

Employment and Training for America's Homeless: Final Report on the Job Training for the Homeless Demonstration Program



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BACKGROUND ON REPORT AND ITS PREPARATION

The Job Training for the Homeless Demonstration Program (JTHDP) was authorized under Section 731 of the McKinney Homeless Assistance Act of 1987 (Public Law 100-77). The overall purpose of JTHDP was to "provide information and direction for the future of job training for homeless Americans." Two supporting goals of the initiative were:

- to gain information on how to provide effective employment and training services for homeless individuals; and
- to learn how states, local public agencies, private nonprofit organizations, and private businesses can develop effective systems of coordination to address the causes of homelessness and meet the needs of the homeless.

This report provides a synthesis of the results, key findings, and implications of the demonstration effort. The report covers the results of the demonstration from its inception in September 1988 through November 1995.

The report was written under the direction of the Office of Policy and Research, of the U.S. Department of Labor's Employment and Training Administration, by James Bell Associates (JBA), Inc. The authors are John W. Trutko, of JBA; Burt S. Barnow, of the Institute for Policy Studies at Johns Hopkins University; Susan Kessler Beck, of JBA; Steve Min of JBA; and Kellie Isbell of JBA. The report was prepared under U.S. Department of Labor Contract No. 99-4701-79-086-01.

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The Authors

NOTE TO READERS:

The Table of Contents of the online version of this document has been changed to improve usability. 9/29/2000

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LIST OF ABBREVIATIONS

AFDC	Aid to Families with Dependent Children
CCIP	Cooperative Client Information Program
DOL	U.S. Department of Labor
ESL	English as a Second Language
ETA	Employment and Training Administration (of the Department of Labor)
FY	Fiscal Year
GED	General Equivalency Degree
HUD	U.S. Department of Housing and Urban Development
JOBS	Job Opportunity and Basic Skills
JTHDP	Job Training for the Homeless Demonstration Program
JTPA	Job Training Partnership Act
MOU	Memorandum of Understanding
OJT	On-the-Job Training
PIC	Private Industry Council
PY	Program Year
SDA	Service Delivery Area
SPIR	Standardized Program Information Report
SRO	Single-Room Occupancy
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
Title II-A	JTPA Title II-A (Employment and Training Program for Disadvantaged Adults)
Title II-C	JTPA Title II-C (Employment and Training Program for Disadvantaged Youth)

EXECUTIVE SUMMARY

PURPOSE

The purpose of this report is two-fold: (1) to analyze the results of the Job Training for the Homeless Demonstration Program (JTHDP) and (2) to draw out lessons learned from the demonstration that can help guide future efforts at providing comprehensive and cost-effective services to address the problem of homelessness in the United States. Particular emphasis is placed on the lessons learned with regard to providing employment and training services, though as is discussed throughout this report, a wide spectrum of other types of housing and support services are often needed to effectively help homeless individuals and families make the transition from homelessness to self-sufficiency. The report that follows is designed to address the following major questions:

- Who did JTHDP serve? (see Chapter 2)
- How did JTHDP grantees serve program participants? (see Chapter 3)
- What were the key program linkages? (see Chapter 3)
- What were the outcomes for participants and costs related to serving these participants? (see Chapter 4)
- How successful were JTHDP sites in “partnering” with the Job Training Partnership Act (JTPA) service delivery system? (see Chapter 5)
- Were JTHDP sites able to continue serving homeless individuals at the conclusion of the demonstration effort? (see Chapter 5)

BACKGROUND

The Job Training for the Homeless Demonstration Program was authorized under Section 731 of the McKinney Act (Public Law 100-77). Under this legislation, the U.S. Department of Labor (DOL) was authorized to plan, implement, and evaluate a job training demonstration program for homeless individuals. The resulting JTHDP, administered by DOL's Employment and Training Administration (ETA), represented the first comprehensive federal program specifically designed to provide employment and training services (and a wide range of other support services) for homeless individuals and to assist them in securing employment. The demonstration effort was launched in September 1988 with a series of grants to 32 locally-operated demonstration sites across the nation.

JTHDP was implemented over four phases, each somewhat distinct, building upon the experiences of the previous phase. Phase 1 was an "exploratory phase," designed to test the feasibility the demonstration effort, help shape the direction of future phases of the demonstration, and develop a methodology for the evaluation. Phase 2 provided sites considerable flexibility in designing their service delivery strategies, selecting program participants, and determining which services participants received and how services were sequenced. Building on what had been learned during JTHDP's initial phases, DOL/ETA announced a new initiative for JTHDP in November 1990. In accordance with a Memorandum of Understanding (MOU) negotiated between DOL and HUD, during Phase 3 sites were required to establish a comprehensive housing assistance strategy. With the demonstration effort drawing to a close, the fourth phase emphasized "partnering" of JTHDP sites with local JTPA programs, as well as the continuation of projects in their localities after the demonstration effort concluded. A major emphasis of the final phase was on broadening and enhancing effective delivery of services to the homeless by the current Job Training Partnership Act Title II-A service delivery system. Exhibit ES-1 provides an overview of funding, participation levels, and key program outcomes during each of JTHDP's four phases. JTHDP continued over seven years, concluding in November 1995.

Findings and implications of this study are based on the following data sources: (1) summary quarterly outcome and financial reports submitted by JTHDP sites, (2) client-level data maintained by the sites, (3) local evaluation reports produced by the sites, (4) site visits, (5) telephone discussions and regular contacts with the sites, (6) information collected during three JTHDP grantee conferences, and (7) other resources, such as grantee applications to DOL/ETA.

PRINCIPAL STUDY FINDINGS

JTHDP experience expanded our knowledge of the feasibility of serving a wide spectrum of America's homeless population and the effectiveness of alternative strategies and delivery systems for serving homeless individuals. Below, we summarize key lessons learned from the demonstration concerning the design of employment and training programs that are most likely to assist homeless persons in securing and retaining jobs.

1. Employment and Training Programs Can Successfully Serve a Wide Spectrum of Homeless Individuals

JTHDP demonstrated that with the appropriate blend of assessment, case management, employment, training, housing, and support services, a substantial proportion of homeless individuals can secure and retain jobs, and improve their housing condition. Since JTHDP's inception in 1988, of the over 45,000 homeless individuals served by demonstration sites, almost 35,000 received employment and training services, and about 16,500 obtained employment.

**EXHIBIT ES-1: OVERVIEW OF JTHDP IMPLEMENTATION EXPERIENCE
AND OUTCOMES, BY PHASE**

CHARACTERISTIC/ OUTCOME	PHASE 1	PHASE 2	PHASE 3	PHASE 4	TOTAL
START DATE - COMPLETION DATE	Sept. 1988 - Aug. 1989	Sept. 1989 - Apr. 1991	May 1991 - Aug. 1994	Sept. 1994 - Nov. 1995	Sept. 1988 - Nov. 1995
DURATION (MONTHS)	12	20	40	14	86
FUNDING LEVEL (IN \$ MILLIONS)	\$7.7	\$17.0	\$24.0	\$7.0	\$55.7
# OF PROJECT SITES	32	45	21	21	63
# OF JTHDP PARTICIPANTS	7,396	13,920	18,852	5,024	45,192
# OF PARTICIPANTS TRAINED	4,600	10,763	14,568	4,960	34,891
# OF PARTICIPANTS PLACED IN JOBS	2,435	4,690	7,169	2,170	16,464
% OF PARTICIPANTS PLACED IN JOBS	33%	34%	38%	43%	36%
% OF PLACED PARTICIPANTS EMPLOYED AT 13 WEEKS	40%	45%	58%	50%	50%

Notes: Phases were not equal in duration -- Phase 3 consisted of three grant or funding cycles; the other three phases involved one grant or funding cycle. There were a total of 63 sites because of multi-year funding of some projects. During Phase 2, 15 of 32 Phase 1 sites were re-funded. In Phase 3, 20 of the Phase 2 sites were re-funded (and the Tucson Indian Center was added in September 1991, bringing the total number of JTHDP sites for Phase 3 to 21). During Phase 4, all Phase 3 sites were re-funded. The percent of placed participants employed at 13 weeks is adjusted slightly because of missing data on placed participants for Phase 3.

Source: Quarterly Reports submitted to DOL/ETA by JTHDP sites.

Overall, 36 percent of JTHDP participants secured employment and half of those obtaining a job were employed 13 weeks after initial job placement.

As intended by Congress and DOL, program sites served a wide spectrum of the homeless population, including dislocated workers, displaced homemakers, families, individuals who had been homeless for long periods, physically disabled persons, mentally ill individuals, chemically dependent persons, and other subgroups facing barriers to employment. Demonstration sites were generally able to individualize service delivery strategies and provide a wide array of services, so that homeless individuals facing different obstacles to employment could secure jobs and upgrade their housing conditions. Program outcomes improved as sites gained experience working with homeless individuals and refined their service delivery strategies -- for example, job placement rates among JTHDP participants increased from 33 percent during Phase 1 to 43 percent by Phase 4, and job retention rates (among those placed in jobs) increased from 40 percent during Phase 1 to a high of 58 percent in Phase 3.

2. A Wide Variety of Public and Private Organizations Can Successfully Establish and Operate Employment and Training Programs for Homeless Persons

There are a wide variety of organizations -- both public and private -- at the state and local levels that can effectively design and operate employment and training programs to serve homeless populations. Under JTHDP, a total of 63 grantees -- including Job Training Partnership Act (JTPA) Service Delivery Areas (SDAs) or Private Industry Councils (PICs), mental health organizations, emergency shelters, agencies operated by city governments, community action agencies, and education agencies -- designed, developed, and implemented demonstration efforts serving a broad range of homeless individuals. Each JTHDP grantee built on their organizational capabilities and developed linkages with other human service agencies to provide employment, training, housing, and support services needed by the homeless individuals to obtain employment and upgrade their housing condition. Although there was substantial variation in the employment and housing outcomes across grantees, this appeared to have more to do with the populations served, local economic conditions, and the structure of individual programs rather than the type of organization administering the program.

3. Employment and Training Programs Serving Homeless Individuals Require Comprehensive Assessment and Ongoing Case Management

Analyses of participant-level data, as well as evidence from interviews with JTHDP staff, indicate most homeless individuals face multiple barriers to employment which are not always evident at the time of intake. For example, drug or alcohol problems, poor reading skills, a history of domestic abuse, and mental health issues are often not apparent at the time of intake. Hence, comprehensive and ongoing participant assessment to identify specific obstacles to

employment and tailoring services to meet the specific needs of each homeless individual are important to achieving positive results.

Closely related to comprehensive assessment is the need for ongoing case management. JTHDP experience suggests that case management -- typically under which a participant is assigned to and monitored by an agency case worker throughout program participation -- is a critical ingredient in tailoring services to specific needs of homeless participants. Ongoing case management enables agency staff to monitor the progress of each participant toward his/her goals and alter the mix of services to respond to changing circumstances or needs of the participant. A case manager can also help deal with problems as they arise, such as child care glitches, housing problems, interpersonal conflicts at work, substance abuse relapses, and transportation problems.

4. Employment and Training Programs for Homeless Persons Must Offer a Wide Array of Services (Including Housing Services), Often Requiring Coordination with Other Service Providers

JTHDP experience underscored the importance of providing a comprehensive range of services to address the varied problems faced by homeless persons. Homeless individuals face different barriers to overcoming homelessness (e.g., basic skills deficiencies, lack of job-specific skills, substance abuse, lack of day care, or lack of transportation). Barriers need to be addressed before individuals are likely to retain long-term employment. Demonstration program experience suggests that at a minimum -- either through the sponsoring agency or coordination with other local service providers -- the following core services must be made available to serve the full array of homeless individuals responsively and effectively:

- outreach and intake;
- case management and counseling;
- assessment and employability development planning;
- alcohol and other substance abuse assessment and counseling, with referral as appropriate to outpatient and/or inpatient treatment;
- other supportive services (e.g., child care, transportation, mental health assessment/counseling/referral to treatment, other health care services, motivational skills training, and life skills training);
- job training services, including: (a) remedial education and basic skills/literacy instruction, (b) job search assistance and job preparatory training, (c) job counseling, (d) vocational and occupational skills training, (e) work experience, and (f) on-the-job training;

- job development and placement services;
- postplacement follow-up and support services (e.g., additional job placement services, training after placement, self-help support groups, and mentoring); and
- housing services (e.g., emergency housing assistance, assessment of housing needs, referrals to appropriate housing alternatives, and development of strategies to address gaps in the supply of housing for participants).

The need for a wide array of services points to the need for strong linkages and coordination arrangements among local service providers. Careful planning of service delivery strategies is needed, including an inventory of services available at the local level and an assessment of how such services might be relevant to the needs of homeless individuals. JTHDP grantees were able to provide a comprehensive continuum of services for their participants, and to leverage funding for providing additional services for participants through extensive use of coordination. Linkages also enabled JTHDP grantees to refer individuals they could not serve effectively to other agencies (e.g., for literacy or English as a Second Language instruction, mental health counseling or services, drug or alcohol rehabilitation, and vocational rehabilitation).

5. Work Readiness Training and Job Search Assistance Are Important Ingredients for Successful Job Placement and Retention

Many homeless participants (as well as other disadvantaged individuals) need some work maturity/job readiness training before they can successfully compete for jobs and/or retain jobs. JTHDP sites found that participants losing or quitting jobs often did so, not as a result of a lack of job-specific skills, but rather because of work maturity issues such as being late for work, inability to deal with child care or transportation-related problems, or conflicts with supervisors or co-workers. Work readiness training provides instruction in skills needed to function on a day-to-day basis within the workplace: how to dress appropriately for work, how to listen and communicate on the job, the importance of arriving to work on time, how to get along with co-workers and supervisors and resolve conflicts, money management, and problem-solving skills. Demonstration sites often provided instruction on work readiness skills in three- to five-day workshops shortly after participants were enrolled in JTHDP.

Even though some homeless individuals lack the education and occupational training/experience to qualify for higher paying jobs, their urgent need for income and housing often means they have little interest in (or ability to attend) longer-term occupational training. This was particularly the case among many non-disabled males, who were not eligible for AFDC or SSI, and generally could not access public housing assistance programs. Job search assistance can equip these individuals with the skills needed to secure employment. Once these individuals have secured employment and stabilized their housing situation, they may be amenable to attending longer-term basic skills or occupational skills training as long as there is no conflict with

their work schedule.

Job search assistance should be structured so that participants interested in obtaining immediate employment can move from intake through assessment, a job search workshop, and job search/job development within a two- to three-week period. This assistance should emphasize assisting participants to find a job, and also emphasize teaching the necessary job search skills so should participants need to search for another job, they are prepared to do so on their own (e.g., using labor market information, writing effective resumes, effective job search strategies, and interviewing techniques). Such direct employment strategies should be supplemented by an array of housing and support services tailored to meet specific needs of participants. In addition, information and referral services on educational and occupational training opportunities should be made available, so that interested participants can upgrade their general and job-specific skills once they have stabilized their employment and housing situations.

6. Careful Screening is Essential to Identify Those Homeless Individuals Most Likely to Benefit from Occupational Skills Training

Homeless-serving agencies can provide a reservoir of appropriate and well-screened homeless individuals for occupational skills training programs, such as JTPA. Some of the agencies with which employment and training programs can link to recruit increased numbers of homeless individuals include: shelters and transitional housing programs, community action agencies, public assistance agencies, halfway houses for individuals in recovery or for ex-offenders, and domestic violence programs.

In general, because of their precarious housing and financial circumstances, many homeless individuals have a strong preference for securing a job before obtaining basic or occupational skills training. Some important considerations before enrolling homeless individuals into longer-term occupational skills training include the following: (1) *extent of personal motivation*, e.g., JTHDP grantees found that it was useful to observe an individual (particularly within structured program activities) over at least several weeks to determine the person's basic motivation and interest in upgrading his or her skills, (2) *housing status*, e.g., JTHDP grantees found that homeless individuals in housing situations that allow for an extended stay were generally more likely to complete training than those living in emergency shelters; (3) *involvement with drugs and alcohol*, e.g., JTHDP grantees found that a serious substance abuse problem was a barrier to completing training and obtaining employment; (4) *means of financial support*, e.g., JTHDP grantees found that those individuals without a means of financial support (e.g., a full- or part-time job, a Pell Grant, or public assistance) were generally less able to participate in long-term training.

JTHDP sites most successful in assisting homeless participants to enter occupational skills training attributed their success to the following:

- Tailoring occupational skills training to the interests and needs of individual participants, as well as the local demands of the labor market. These strategies included: (1) assisting those clients seeking part-time employment to do so in conjunction with a skills training program; (2) having available open-entry training programs; (3) offering training courses in the day as well as evening; and (4) offering "compressed" training options, i.e., courses offered for more hours over a shorter period of time.
- Developing linkages with a wide variety of education and training providers, especially those providing short-term and open-ended training.
- Securing agreements with shelter and housing providers to extend housing stays or give priority to those enrolled in training.
- Making sure homeless participants have all the necessary supports in place prior to entering and throughout training. Many sites stressed the importance of providing case management to troubleshoot problems that participants may face while in training.

7. Housing Assistance and Long-Term Follow-Up and Support Are Needed to Assist Homeless Persons to Retain Employment

For most homeless individuals (and many disadvantaged individuals), their problems do not suddenly disappear upon entering the workplace or securing permanent housing. Hence, even after job placement, many homeless individuals still need support services and an objective and informed person to guide them. By providing follow-up services and ongoing case management (for six months or even longer after a participant has secured a job), agencies can help to troubleshoot problems (before they become bigger problems) and reduce the risks of participants returning to homelessness. An added benefit is that agencies are better able to track the long-term success of their services and adjust service delivery strategies accordingly. JTHDP sites found that successful employment outcomes (i.e., finding and retaining jobs) were often associated with availability of housing assistance and long-term support services.

8. Average Training and Placement Costs for Employment and Training Programs for Homeless Individuals Are Likely to Vary Substantially Across Sites Depending Upon the Types of Participants Served and Types of Training Provided

The average cost of training per JTHDP participant in federal grant funds was \$1,485, and the average cost per placement was \$3,185. These costs were based on the annual JTHDP grant dollars expended by each site divided by the number of participants trained/placed by each site.

Costs of services provided through linkages with other organizations and from grantee matching funds were not included. There was substantial variation across sites in both per participant training and placement costs. For example, among the sites participating in Phases 2 through 4, average training costs per participant ranged from under \$1,000 at four sites to over \$3,000 in four sites. A number of factors contributed to substantial cross-site differences, including: differences in participant characteristics, differences in the number of participants to spread fixed costs across (i.e., economies of scale), the ability of sites to leverage funds for services through other service delivery providers, and differences in the types, amounts, and intensity of training services provided. As expected, the service delivery models used by sites had particular impact on average training and placement costs: sites providing primarily job search/placement assistance for most of their participants had substantially lower training costs per participant trained than sites that provided longer-term occupational skills training.

9. Although the Majority of Phase 4 JTHDP Sites Continued To Provide Employment and Training Services To Homeless Individuals After the Termination of Their JTHDP Funding, Most Reduced the Number of Individuals Served or the Types of Services Provided

Nearly two-thirds (13 of the 21) of the Phase 4 grantees continued providing employment and training services to homeless individuals after JTHDP funding was discontinued. The services and the number of individuals these grantees anticipated serving in the absence of JTHDP funding varied. A few were able to secure funds in excess of their JTHDP grant or develop additional linkages which enabled them to expand locations, offer additional services, or serve more homeless individuals. The majority, though, reported being unable to maintain their JTHDP level of services. Some grantees indicated they no longer had funds for the support services essential for homeless individuals' success in employment and training activities or had to target their services more specifically to certain populations. The eight JTHDP grantees no longer delivering employment and training services to homeless individuals cited lack of funding as the primary reason. Despite discontinuing specific initiatives to provide employment and training for homeless individuals, grantees indicated that the lessons learned and the linkages they had created with other homeless-serving agencies would have a long-lasting effect on their service delivery systems.

10. The JTPA Title II-A (Adult) Program Has Shown That Outcomes for Participants Identified as Homeless Are Comparable to Other Participants in the Program

During PY 1994, a total of 5,569 JTPA Title II-A terminees were identified as homeless, which represented 2.4 percent of all Title II-A terminees and a small share of the nation's homeless population. Program outcomes for homeless individuals served by JTPA in PY 1994 were similar to those for non-homeless individuals:

- homeless terminees had a 54 percent entered employment rate compared to 62 percent for non-homeless terminees;
- average hourly wage at placement for homeless terminees was \$7.13 compared to \$7.05 for non-homeless terminees; and
- homeless terminees recorded a 59 percent job retention rate compared to 64 percent for non-homeless terminees.

During Phase 4, JTHDP sites demonstrated the feasibility of JTPA SDAs “partnering” with homeless-serving programs to increase the flow of homeless individuals served by JTPA. JTHDP grantees that successfully referred and enrolled a high percentage of participants in JTPA cited three major factors for their success: (1) frequent and on-going communication between the two programs, (2) available resources to stabilize the homeless individual’s situation (e.g., transitional housing and transportation assistance), and (3) proper screening of homeless individuals referred to JTPA.

CONCLUSIONS AND IMPLICATIONS

JTHDP has provided a wealth of information on strategies for serving homeless individuals (as well as other disadvantaged populations) and has suggested ways in which to structure a national employment and training policy to help America's homeless population. Based on this analysis, several implications are offered.

1. Implication #1: JTHDP Can Serve as an Effective Model for Assisting Homeless Individuals in Securing Employment and Upgrading Their Housing

Within urban areas and localities with significant numbers of homeless individuals, case managed employment and training initiatives, such as those developed under JTHDP, could be effective both in coordinating local services for homeless individuals and ensuring the availability of a wide range of services to assist these individuals in securing employment and overcoming their homeless situation. While JTHDP program sites were funded through U.S. Department of Labor grants, similar programs could be funded through grants provided by the U.S. Department of Housing and Urban Development (HUD), state and local governments, and private foundations. With the help of well-developed linkages, local programs similar to those operated under JTHDP could be initiated and operated at a cost of less than \$500,000 per year -- for example, during JTHDP’s final phase, grant awards to eight of the 21 JTHDP sites were for amounts less than \$250,000 (with the average site receiving slightly over \$400,000). While focusing on employment and training services, such initiatives should strive to provide the

continuum of services (through direct services and referral) provided by JTHDP grantees.¹

2. Implication #2: Increase Coordination Between DOL and HUD and Their Counterparts at the State and Local Levels

The problem of homelessness within a locality can be most effectively addressed through the development of housing and employment opportunities. Individuals in supported housing are more likely to become self-sufficient if they are given the opportunity to develop the skills needed to obtain and retain employment. Homeless individuals in employment and training programs are more likely to complete training and obtain and retain employment if they are living in stable housing. This points to the need for close cooperation between agencies providing housing assistance and those providing employment and training services. Local housing authorities and other providers of low-cost housing and assistance need to be strongly encouraged to include employment and training activities when designing programs, as is now emphasized in HUD's "Continuum of Care" model. They also need to be encouraged to serve/give priority to homeless persons enrolled in employment and training programs, particularly single males who often find it difficult to secure subsidized housing units. At the federal level, as they did in forging the DOL/HUD Memorandum of Understanding for the JTHDP program, there is a need for DOL and HUD to continue to work closely with one another to ensure that homeless individuals and families have available a continuum of employment, training, housing, and support services needed to achieve long-term self-sufficiency.

3. Implication #3: There Are a Number of Strategies Available to JTPA SDAs/PICs to Expand the Number of Homeless Individuals Served and to Enhance Service Delivery to Homeless Individuals

The Job Training Amendments of 1992 (Public Law 102-367), which went into effect July 1, 1993 (at the beginning of Program Year 1993), provided encouragement for JTPA SDAs/PICs to focus available Title II-A and Title II-C funds on serving more disadvantaged populations by requiring that at least 65 percent of individuals served under these programs fall into one of seven "hard-to-serve" categories. One of these "hard-to-serve" groups was homeless individuals. There are a number of steps that SDAs/PICs could undertake to expand the number of homeless individuals served by their programs and to more effectively target services on the needs of homeless individuals:

- **Expand outreach and recruitment practices to include linkages with**

¹A companion document to this report, *Employment and Training for America's Homeless: Best Practices Guide*, provides specific instructions for designing and implementing a comprehensive and effective employment and training program for homeless individuals (as well as other disadvantaged populations).

homeless-serving agencies (e.g., emergency shelters, transitional housing) so that staff and participants of those agencies are familiar with the services JTPA has to offer and the procedures for obtaining those services. Homeless-serving agencies can effectively recruit and screen homeless individuals for JTPA if provided with a set of guidelines for determining suitability of individuals for JTPA. For example, the demonstration experience suggested that homeless individuals in stable housing -- such as transitional housing or emergency shelters extending stays for individuals enrolled in an employment and training program -- are more likely to complete training and obtain and retain employment. In addition, experience suggests that homeless individuals with active substance abuse problems and chronic serious mental health problems are not likely to be successful in employment and training programs.

- **Expand coordination arrangements with homeless-serving agencies and other human service agencies to ensure that homeless participants have access to a wide range of support services, including chemical dependency counseling, health services, and transportation assistance.**
- **Seek state incentive grant set-asides to enhance the SDA's ability to meet the various needs of homeless people, particularly housing-related needs. These set-asides are a source of funding to enable SDAs to provide housing and other support services.**
- **Provide additional training to agency staff and service providers on the needs of homeless people, the variety of referral agencies locally available to meet those needs, and the best practices for serving homeless participants as identified through JTHDP evaluation findings and program experience. They should also consider joint training with agencies whose primary mission is serving homeless individuals. Many of these homeless-serving agencies have needed resource information available and could assist in the preparation and delivery of presentations.**

4. Implication #4: Further Educate Local Homeless Serving Agencies and Other Community-Based Organizations About the Importance of Enhancing Skills and Employability Among Their Homeless Clients

Just as is the case with HUD-sponsored programs, local social service programs serving homeless clients need to be further educated about the importance of employment and training services in assisting their clients in their efforts to achieve self-sufficiency. Emergency shelter and transitional housing programs, soup kitchens, and domestic violence programs often focus on stabilizing the individual and, when possible, assisting them in securing employment. HUD and DOL's emphases on a "continuum of care" when serving homeless individuals and providing funding for local initiatives which feature coordination are important steps in encouraging local

service providers to emphasize building job skills, addressing basic skills deficiencies, and enhancing overall employability of homeless individuals. Other methods for promoting the importance of employment and training activities include presentations at conferences of homeless serving agencies and other community-based organizations and providing training, technical assistance, and dissemination of training materials illustrating the importance of employment and training services as an essential ingredient for helping individuals to achieve self-sufficiency.

CHAPTER 1:
INTRODUCTION

A. OVERVIEW OF THE JOB TRAINING FOR THE HOMELESS DEMONSTRATION PROGRAM

1. Authorizing Legislation and Program Guidelines

The Job Training for the Homeless Demonstration Program (JTHDP) was authorized under Section 731 of the McKinney Homeless Assistance Act of 1987 (Public Law 100-77). At the time of its enactment, the McKinney Act represented the nation's most comprehensive piece of legislation for the homeless population and included nearly 20 provisions to meet the needs of homeless persons. It provided for emergency shelter, food, health care, mental health care, housing, education, job training, and other community services. This Act recognized the need to pull together the resources of a variety of government agencies to provide comprehensive services for homeless individuals and families.

Under the McKinney Act, the Department of Labor (DOL) was authorized to plan, implement, and evaluate a job training demonstration program for homeless individuals.¹ The resulting JTHDP, administered by DOL's Employment and Training Administration (DOL/ETA), represented the first federal program specifically designed to provide employment and training

¹Under the demonstration effort, the term "homeless" or "homeless" individual was one who: (1) lacked a fixed, regular, and adequate nighttime residence and (2) had a primary nighttime residence that was: (a) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, halfway houses, and transitional housing for the mentally ill); (b) an institution that provides a temporary residence for individuals intended to be institutionalized; or (c) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

services (and a wide range of other support services) for homeless individuals and to assist them in securing employment. The demonstration effort was launched in September 1988 with a series of grants to 32 locally-operated demonstration sites across the nation. JTHDP continued for slightly more than seven years (86 months) and through several distinct phases (discussed below), concluding in November 1995.

The overall purpose of JTHDP was to "provide information and direction for the future of job training for homeless Americans." Two supporting goals of the initiative were:

- to gain information on how to provide effective employment and training services for homeless individuals; and
- to learn how states, local public agencies, private nonprofit organizations, and private businesses can develop effective systems of coordination to address the causes of homelessness and meet the needs of the homeless.²

In undertaking the demonstration effort, DOL/ETA was particularly interested in testing innovative and replicable approaches to providing employment and training services for homeless individuals. Demonstration sites were permitted to serve the full spectrum of the homeless population or emphasize assistance to subgroups within the general homeless population, such as families with children, single men, battered women, mentally ill persons, or chemically dependent individuals. In general, projects were given wide latitude in how to structure their service delivery, but were required to provide either directly or through linkages with other agencies the following services:

- outreach and intake;
- case management and counseling;

²Federal Register, Vol. 54, No. 78, Tuesday, April 25, 1989, p. 17859.

- **assessment and employability development planning;**
- **alcohol and other substance abuse assessment and counseling, with referral as appropriate to outpatient and/or inpatient treatment;**
- **other supportive services (e.g., child care, transportation, mental health assessment/counseling/treatment, other health care services, motivational skills training, and life skills training);**
- **job training services, including: (a) remedial education, basic skills training and literacy instruction, (b) job search assistance and job preparatory training, (c) job counseling, (d) vocational and occupational skills training, (e) work experience, and (f) on-the-job training;**
- **job development and placement services;**
- **postplacement follow-up and support services (e.g., additional job placement services, training after placement, self-help support groups, and mentoring); and**
- **housing services (e.g., emergency housing assistance, assessment of housing needs, referrals to appropriate housing alternatives, and development of strategies to address gaps in the supply of housing for participants).**

In implementing these activities, grantees were encouraged to collaborate with other federal, state, and local programs serving homeless individuals. For example, a 1990 Memorandum of Understanding between the Department of Housing and Urban Development (HUD) and the Department of Labor stressed better coordination of jobs and housing for participants. And in September 1994, at the beginning of the final round of grants issued under JTHDP, DOL/ETA issued new grant guidelines aimed at promoting the long-term viability of grantees' programs by encouraging referral of homeless individuals appropriate for training to local Job Training Partnership Act (JTPA) programs.

From the outset, DOL/ETA realized that no two local projects would be alike. Early in the demonstration effort, a generalized model addressing participant flow and services was

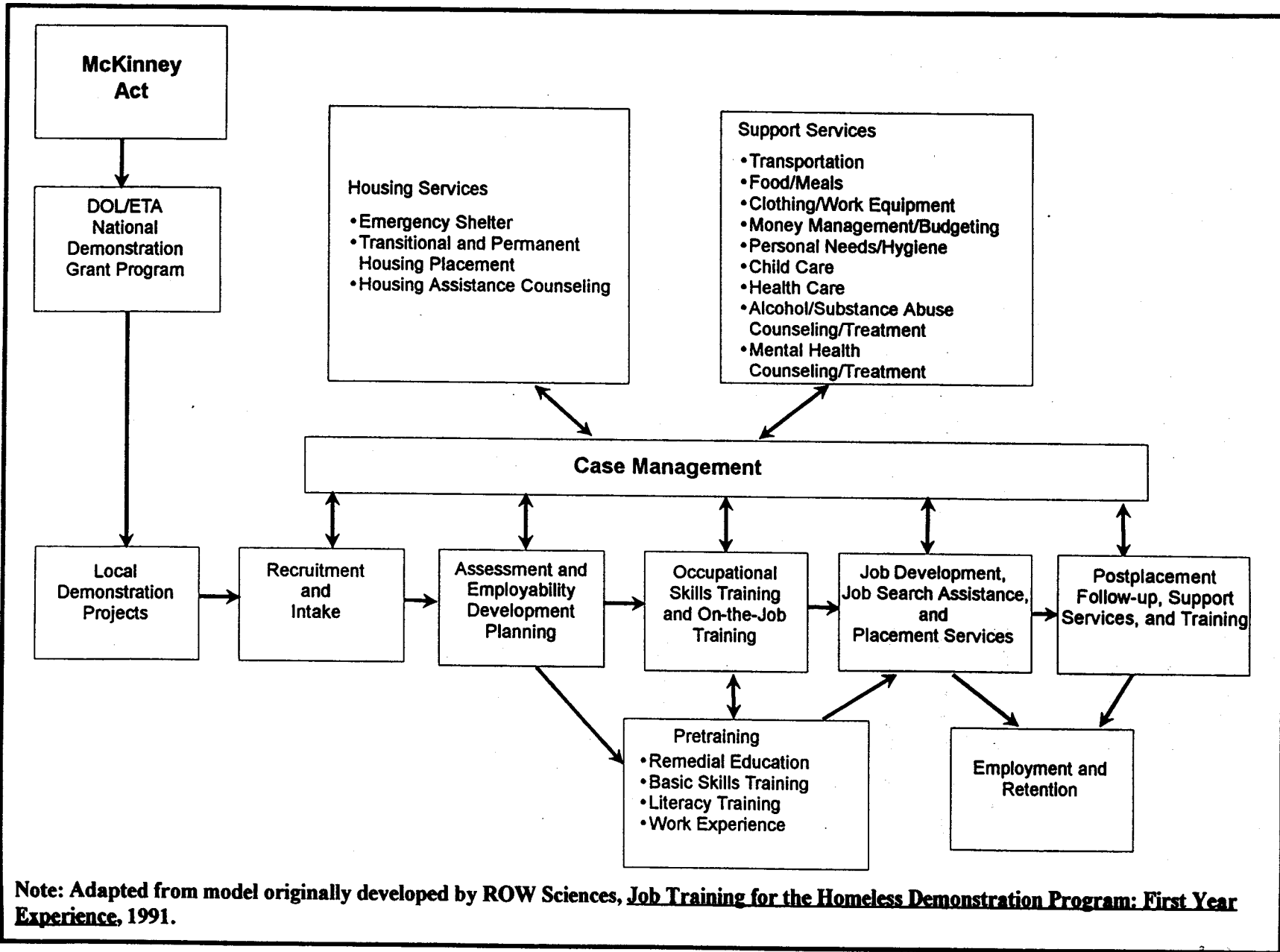
developed to assist local project operators and those responsible for monitoring and evaluating project implementation and outcomes. The key elements captured by this model were: (1) a "traditional" sequence of employment and training services -- outreach followed by intake/assessment, job training, job placement assistance, and retention services; (2) a wide range of housing and support services, including transportation and child care; and (3) case management to monitor participants' progress in reaching their goals and assist participants in securing employment, housing, and other services needed to overcome their homeless condition.

After some experience implementing the program, it became clear that a sequential service delivery model could not meet the needs of all participants seeking services. Although some participants sought this broad range of services in sequence, many had the need and/or the skills to proceed directly from intake/assessment to job search and placement. Others, such as those residing in halfway houses, already had a case manager and needed JTHDP assistance primarily to secure employment and/or training services. As a result, over time the service delivery models used by JTHDP sites evolved and became more individualized -- typically with increased reliance on the results of the intake/assessment process and the participants' expressed needs.³ Though the service delivery strategies varied substantially across sites, Exhibit 1-1 provides a generalized model of the continuum of services provided for JTHDP participants either directly by JTHDP grantees or through linkages with other human service agencies.

³Chapter 3 of this report provides details on the specific types of service delivery strategies used by grantees under JTHDP.

EXHIBIT 1-1: JTHDP PROGRAM DESIGN OR LOGIC MODEL

1-5



Note: Adapted from model originally developed by ROW Sciences, Job Training for the Homeless Demonstration Program: First Year Experience, 1991.

2. JTHDP Implementation

JTHDP was implemented over four major phases, each somewhat distinct, building upon the experiences of the previous phase. The demonstration effort, which began in September 1988, was conducted over about seven years (86 months), concluding in November 1995. Exhibit 1-2 provides an overview of funding levels, numbers of participants, and several key outcome measures for each of JTHDP's four major phases. As shown in the exhibit, phases were of varying lengths -- ranging from 12 months for Phase 1 to 40 months for Phase 3.⁴ The geographic locations of the JTHDP sites for all phases are shown in Exhibit 1-3. A listing of these projects can be found in Exhibit 1-4. Brief descriptions of each demonstration project funded during Phases 3 and 4 can be found in Appendix A.⁵

As shown in Exhibit 1-2, JTHDP sites served a total of 45,192 homeless persons over the course of the demonstration effort. Of those served by JTHDP, 77 percent (34,891 homeless individuals) received at least one of the following employment and training services: remedial education, basic skills training, and/or literacy instruction, job search assistance/job preparation training, job counseling, work experience, on-the-job training (OJT), or vocational/occupational skills training. The remaining 23 percent of homeless individuals served under the program did not receive training services, but did receive some other type of assistance through JTHDP, such as a support service (e.g., transportation, food/meals, clothing, work equipment, substance abuse

⁴Phase 3 involved three separate grant cycles; the other three phases consisted of one funding cycle.

⁵Project descriptions for demonstration projects funded during Phases 1 and 2 are available in the appendices of an earlier report on JTHDP: John Trutko, Burt Barnow, Susan Beck and Fran Rothstein, Employment and Training for America's Homeless: Report on the Job Training for the Homeless Demonstration Program, prepared by James Bell Associates, for the Employment and Training Administration of the U.S. Department of Labor, 1994 (see Appendices C and D).

**EXHIBIT 1-2: OVERVIEW OF JTHDP IMPLEMENTATION EXPERIENCE
AND OUTCOMES, BY PHASE**

CHARACTERISTIC/ OUTCOME	PHASE 1	PHASE 2	PHASE 3	PHASE 4	TOTAL
START DATE - COMPLETION DATE	Sept. 1988 - Aug. 1989	Sept. 1989 - Apr. 1991	May 1991 - Aug. 1994	Sept. 1994 - Nov. 1995	Sept. 1988 - Nov. 1995
DURATION (MONTHS)	12	20	40	14	86
FUNDING LEVEL (IN \$ MILLIONS)	\$7.7	\$17.0	\$24.0	\$7.0	\$55.7
# OF PROJECT SITES	32	45	21	21	63
# OF JTHDP PARTICIPANTS	7,396	13,920	18,852	5,024	45,192
# OF PARTICIPANTS TRAINED	4,600	10,763	14,568	4,960	34,891
# OF PARTICIPANTS PLACED IN JOBS	2,435	4,690	7,169	2,170	16,464
% OF PARTICIPANTS PLACED IN JOBS	33%	34%	38%	43%	36%
% OF PLACED PARTICIPANTS EMPLOYED AT 13 WEEKS	40%	45%	58%	50%	50%

Notes: There were a total of 63 sites because of multi-year funding of some projects. During Phase 2, 15 of 32 Phase 1 sites were re-funded. In Phase 3, 20 of the Phase 2 sites were re-funded (and the Tucson Indian Center was added in September 1991, bringing the total number of JTHDP sites for Phase 3 to 21, and the total for JTHDP to 63). During Phase 4, all Phase 3 sites were re-funded. The percent of placed participants employed at 13 weeks is adjusted slightly because of missing data on placed participants for Phase 3.

Source: Quarterly Reports submitted to DOL/ETA by JTHDP sites.

EXHIBIT 1-3: GEORGRAPHIC LOCATION OF JTHDP SITES, ALL PHASES

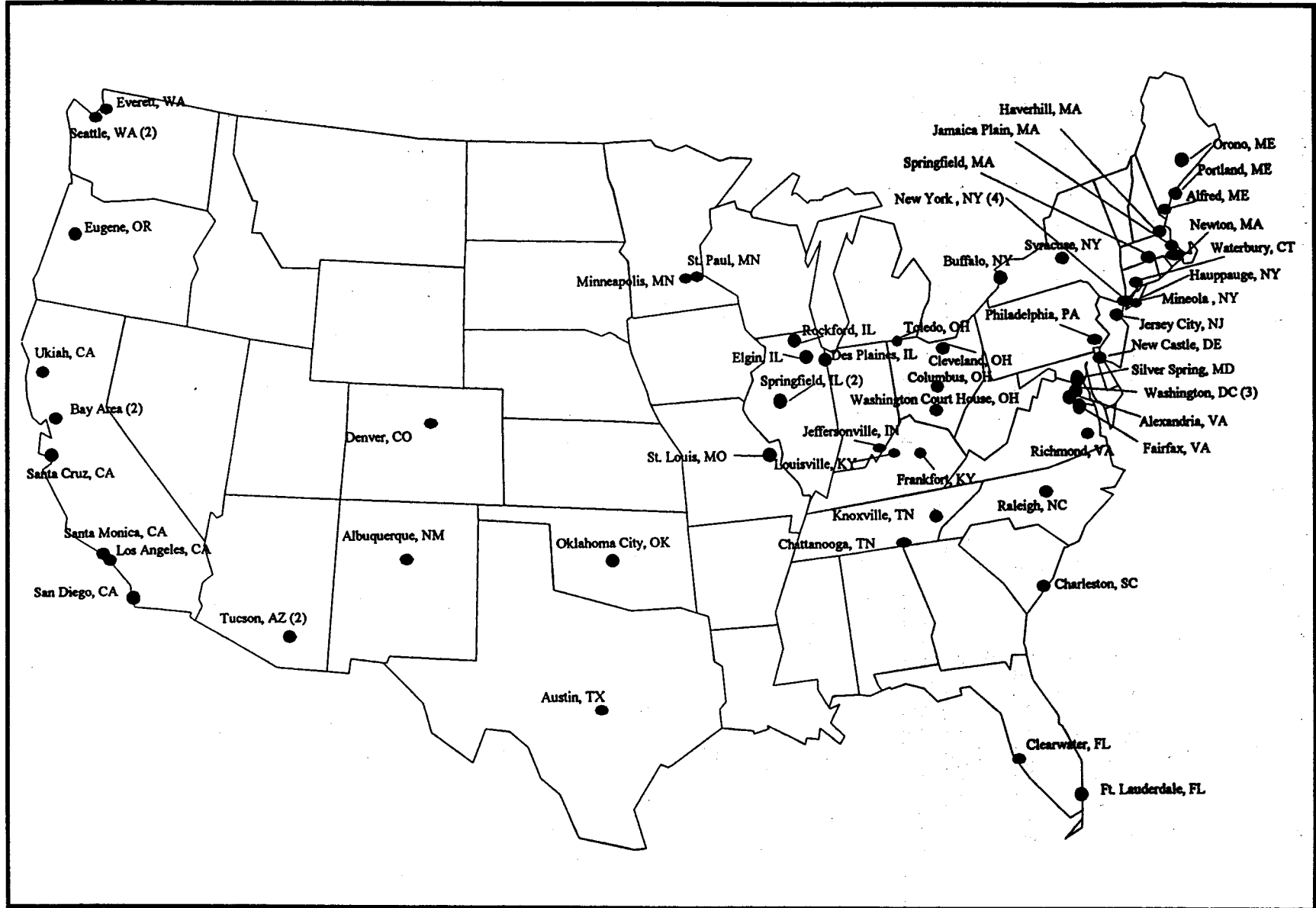


EXHIBIT 1-4: STATE-BY-STATE LISTING OF JTHDP SITES, ALL PHASES

PROGRAM	CITY/STATE	PHASE	PHASE	PHASE	PHASE
		1	2	3	4
Jackson Employment Center	Tucson, AZ	x	x	x	x
Tucson Indian Center	Tucson, AZ			x	x
Center for Independent Living (CIL)	Berkeley, CA	x	x	x	x
Watts Labor Community Action Committee (Watts Labor CAC)	Los Angeles, CA		x		
Rubicon Programs, Inc. (Rubicon)	Richmond, CA	x	x		
County of Santa Cruz, Human Resources Agency (County of Santa Cruz)	Santa Cruz, CA		x		
San Diego Regional Employment and Training Consortium (San Diego RETC)	San Diego, CA		x	x	x
Step up on Second, Inc. (Step Up On Second)	Santa Monica, CA	x	x		
North Coast Opportunities	Ukiah, CA	x			
Denver Dept of Health and Social Services	Denver, CO	x			
City of Waterbury	Waterbury, CT		x	x	x
ARCH Training Center, Inc. (ARCH)	Washington, DC	x	x		
Home Builders Institute (HBI)	Washington, DC		x	x	x
Jobs for Homeless People, Inc. (Jobs for Homeless People)	Washington, DC		x	x	x
Delaware Dept of Health and Social Services (Delaware DHSS)	New Castle, DE	x	x		
Business and Industry Employment Development Council (BIEDC)	Clearwater, FL		x		
Broward Employment and Training Administration (BETA)	Ft. Lauderdale, FL	x	x		
Northern Cook County Private Industry Council (Northern Cook County PIC)	Des Plaines, IL		x		
Elgin Community College	Elgin, IL	x	x	x	x
Rock River Training Corporation	Rockford, IL	x			
Illinois Department of Public Aid	Springfield, IL	x			
Land of Lincoln Goodwill Industries	Springfield, IL	x			
Hoosier Valley Economic Opportunity Corporation	Jeffersonville, IN	x			
Kentucky Domestic Violence Association (KDVA)	Frankfort, KY		x	x	x
Jefferson County Public Schools	Louisville, KY	x	x	x	x
York County Shelters, Inc. (York County Shelters)	Alfred, ME		x		
Tribal Governors	Orono, ME	x			
City of Portland	Portland, ME		x		
Boys and Girls Clubs of Greater Washington (Boys and Girls Clubs)	Silver Spring, MD		x	x	x
Boston Indian Council	Jamaica Plain, MA	x			
Community Action, Inc. (Community Action)	Haverhill, MA		x		
Education Development Center (EDC)	Newton, MA		x		
Massachusetts Career Development Institute (MCDI)	Springfield, MA	x	x	x	x
Hennepin Co. Training and Employment Assistance Office (Hennepin Co. TEA)	Minneapolis, MN		x	x	x
City of St. Paul, Job Creation and Training Section (City of St. Paul)	St. Paul, MN	x	x	x	x
Job Training for the Homeless	St. Louis, MO	x			
Corporation for Employment and Training (CET)	Jersey City, NJ	x	x		
St. Martin's Hospitality Center	Albuquerque, NM	x			
Friends of the Night People, Inc. (Friends of the Night People)	Buffalo, NY		x		
Suffolk County Job Homeless Training Program	Hauppauge, NY	x			
Children's House	Mineola, NY	x			
Argus Community, Inc. (Argus)	New York, NY		x	x	x
City of New York, Dept of Employment (City of New York DOE)	New York, NY		x		
City of New York, Human Resources Administration (City of New York HRA)	New York, NY		x		
Fountain House, Inc. (Fountain House)	New York, NY		x	x	x
Homeless Assistance Act Demonstration Program	Syracuse, NY	x			
Wake County Job Training Office (Wake County)	Raleigh, NC	x	x		
Cuyahoga County Department of Development	Cleveland, OH	x			
Friends of the Homeless, Inc. (Friends of the Homeless)	Columbus, OH		x	x	x
Toledo Area Private Industry Council (Toledo Area PIC)	Toledo, OH	x			
Community Action Committee of Fayette County	Washington Ct. Hs., OH	x			
HOPE Community Services, Inc. (HOPE Community Services)	Oklahoma City, OK		x		
Southern Willamette Private Industry Council (Southern Willamette PIC)	Eugene, OR		x		
Mayor's Office of Community Services	Philadelphia, PA		x		
Charleston County Employment Training Administration	Charleston, SC	x			
Southeast Tennessee Private Industry Council (Southeast Tennessee PIC)	Chattanooga, TN		x	x	x
Knoxville-Knox Co. Community Action Committee (Knoxville-Knox Co. CAC)	Knoxville, TN		x	x	x
Austin/Travis County Private Industry Council (Austin/Travis PIC)	Austin, TX	x	x		
City of Alexandria	Alexandria, VA		x		
Fairfax County Dept of Social Services	Fairfax, VA	x			
Telamon Corporation (Telamon)	Richmond, VA		x		
Snohomish County Private Industry Council (Snohomish County PIC)	Everett, WA		x	x	x
Seattle Indian Center	Seattle, WA		x		
Seattle-King County Private Industry Council (Seattle-King County PIC)	Seattle, WA	x	x	x	x

counseling), a housing service (e.g., referral to a transitional housing facility or housing counseling), and/or other information and referral services.

About one-third (36 percent) of JTHDP participants (i.e., of those receiving a JTHDP service) were placed in jobs. Participants obtained jobs either through their own efforts or with the help of job development and/or placement services provided by JTHDP grantees. Of the 16,464 participants obtaining jobs while participating in the program, 50 percent (8,171 participants) were employed 13 weeks after initial job placement either with the same employer or another employer.⁶ Below, we highlight each of JTHDP's four distinct phases.

Phase 1. In rapid response to the mandate of the McKinney Act, DOL/ETA selected 32 demonstration sites in September 1988.⁷ Total funding for this initial round of grantees was \$7.7 million. Phase 1 was an "exploratory phase," designed to test the feasibility the demonstration effort, help shape the direction of future phases of the demonstration, and develop a methodology for the evaluation. Grantees were to provide case management and assist program participants to move through employment and training services sequentially. They were also to provide, either directly or through referral, needed support services. During Phase 1, conducted over one year, demonstration sites served a total of 7,396 homeless individuals, an average of 231 participants per grantee.⁸

⁶Chapter 2 provides additional details about participation levels by phase and Chapter 4 provides detailed analyses of outcomes for JTHDP participants.

⁷An additional grantee was funded, but experienced organizational problems and was terminated before the project was implemented.

⁸The results of JTHDP's Exploratory Phase are detailed in a previous U.S. Department of Labor, Employment and Training Administration report: Job Training for the Homeless: Report on the Demonstration's First Year, Research and Evaluation Report Series 91-F, 1991.

Phase 2. During this phase, which extended 20 months (from September 1989 through April 1991), DOL/ETA provided \$17 million in funds for 45 demonstration sites. Local project sites were selected in an open competition from nearly 300 candidate sites (15 of the projects selected had been Phase 1 grantees). Phase 2 provided sites considerable flexibility in designing their service delivery strategies, selecting program participants, and determining which services participants received and how services were sequenced. With increased funding, more sites, and a longer phase duration, the total number of individuals served was almost double that of Phase 1 -- 13,920 homeless individuals -- an average of 309 homeless individuals served per site.

Phase 3. Building on what had been learned during JTHDP's initial phases, DOL/ETA announced a new initiative for JTHDP in November 1990. In accordance with a Memorandum of Understanding (MOU) negotiated between DOL and HUD, Phase 3 sites were required to establish a comprehensive housing assistance strategy. These strategies were to include a well-conceived plan for directly providing or arranging for transitional housing during training, and permanent housing after job placement, for each program participant. In addition, during Phase 3, DOL/ETA placed greater emphasis on JTHDP sites providing: (1) objective assessment and comprehensive case management, (2) postplacement services to enhance long-term job retention, and (3) a continuum of support services through linkages with other human service agencies in the locality. DOL/ETA conducted a limited competition among the 45 Phase 2 sites, which resulted in grant awards to 20 sites. During Phase 3, which continued over a 40-month period (from May 1991 through August 1994), grantees received three separate grant awards.⁹ At the end of the

⁹Separate grant awards were made to each of the same grantees for the periods May 1991-April 1992, May 1992-April 1993, and May 1993-August 1994).

first grant period, another grantee was added (the Tucson Indian Center), bringing the number of Phase 3 grantees to 21. During Phase 3, grantees received a total of \$24 million and served a total of 18,852 homeless individuals. An average of 299 homeless individuals were served by each JTHDP site during each of Phase 3's three grant periods.

Phase 4. With the demonstration effort drawing to a close, the fourth phase of JTHDP emphasized "partnering" of JTHDP sites with local JTPA programs, as well as the continuation of projects in their localities after the demonstration effort concluded. A major emphasis of this final JTHDP phase was on broadening and enhancing "effective delivery of services to the homeless by the current Job Training Partnership Act Title II-A service delivery system."¹⁰ Each of the existing 21 Phase 3 grantees were offered the opportunity to submit a proposal to operate a 15-month program (September 1994 through November 1995). Under the "partnering" approach, each grantee was required to establish a formal cooperative agreement with at least one other JTPA Service Delivery Area/Private Industry Council (SDA/PIC) in their locality:

- If the grantee was a non-JTPA entity (i.e. not an SDA or PIC), it was required to partner with a nearby SDA/PIC to facilitate referral and enrollment of JTHDP participants into JTPA-sponsored training. Under this requirement, the JTHDP grantee was expected to negotiate a formal agreement whereby the SDA/PIC would set aside JTPA training slots for appropriately-screened JTHDP participants.
- If the grantee was an SDA, it was required to: (1) partner its JTPA Title II-A activities with its homeless grant to achieve access for JTHDP participants to Title II-A services and (2) partner with one or more other SDAs/PICs in its locality, providing technical assistance and training to help the other SDAs/PICs enhance their Title II-A service delivery system (both to improve access of homeless individuals to mainstream JTPA training and better target JTPA services to meet the needs of homeless individuals).

¹⁰Solicitation for Grant Applications, June 14, 1994, DOL/ETA.

As in Phase 3, each JTHDP grantee was expected to maintain an intervention strategy that at a minimum provided the following services: (a) case management, (b) job training services, (c) job development and placement services, (d) postplacement follow-up and support services, (e) linkages with housing resources and services, and (f) other support services. During Phase 4, the 21 JTHDP sites received \$7.0 million and served 5,024 homeless individuals, an average of 239 homeless individuals per site.

3. The Role of Evaluation in the Demonstration Effort

The McKinney Act mandated a strong emphasis on evaluation of JTHDP to support the development of "knowledge for future policy decisions on job training for homeless individuals." DOL and other federal agencies involved in providing homeless assistance under the McKinney Act were required to submit periodic reports to Congress and the Interagency Council on the Homeless (which was created by the McKinney Act) documenting and assessing their efforts to enhance services for homeless individuals and families.

The evaluation of JTHDP was conducted at two levels: (a) individual project evaluations and (b) a national evaluation to synthesize results across all grantee projects. Individual project evaluations were intended to provide relevant information to DOL/ETA and the national evaluator describing and analyzing their projects across the following topics:

- **project description** - an overview of the project, target population, and service strategy;
- **evaluation approach** - the objectives, scope, and methodology for the project evaluation;
- **program services** - a description of how the project worked, e.g., services

provided and who was providing the services, program logic or client flow mode, and service utilization by participants and participant subgroup;

- **program implementation** - a description of the project implementation over time, including key events and factors that affected implementation;
- **program linkages** - a description and analysis of the linkages used by the project, key elements of coordination, specific agencies where linkages were made, and the number and types of linkages by service category;
- **program outcomes** - an analysis of outcomes reported in the quarterly report and others as identified by the project, compared to planned outcomes and outcomes of previous years;
- **participant characteristics** - a description of participant characteristics, including demographics, education, housing status, labor market experience, and barriers to employment; and
- **conclusions and recommendations** - conclusions regarding how and why the project worked or failed with certain clients and recommendations for future program operations.

The national evaluation was intended to address seven key evaluation questions across all project sites and phases:

- Who did JTHDP serve? (see Chapter 2)
- How did JTHDP grantees serve program participants? (see Chapter 3)
- What were the key program linkages? (see Chapter 3)
- What were the outcomes for participants and costs related to serving these participants? (see Chapter 4)
- How successful were JTHDP sites in “partnering” with the Job Training Partnership Act (JTPA) service delivery system? (see Chapter 5)
- Were JTHDP sites able to continue serving homeless individuals at the conclusion of the demonstration effort? (see Chapter 5)
- What lessons were learned from the demonstration effort about providing job training services for homeless individuals, and what could be done in the future to

better serve this population? (see the Executive Summary)

To support cross-project comparisons, DOL/ETA provided grantees with technical assistance on all aspects of the evaluation and defined specific process and outcome measures on which sites were required to report on a quarterly basis, including the number of homeless individuals served, number of homeless individuals placed in jobs, number of homeless individuals placed in jobs who were working during the 13th week after placement, and others (see Appendix B).

B. SCOPE AND ORGANIZATION OF THIS REPORT

The purpose of this report is to synthesize the results of the evaluation of JTHDP since its inception and identify key lessons learned from the demonstration that can help guide future efforts at providing comprehensive and cost-effective employment and training services for homeless individuals. Although the primary focus is on employment and training services, we also explore the wide spectrum of housing and other support services often needed by homeless individuals. Although this study does provide analyses of outcomes for program participants, it is not a net impact study. The study did not employ an experimental or quasi-experimental design (i.e., with comparison groups), so it is not possible to ascertain what would have happened to program participants in the absence of the intervention. Hence, this report is intended as an implementation study of the varied experiences of JTHDP grantees -- and the homeless individuals they served. Findings and implications of this study are based on the following data sources:

- **summary quarterly outcome and financial reports submitted by JTHDP sites;**
- **client-level data maintained by JTHDP sites;**
- **local evaluation reports produced by JTHDP sites;**

- visits to JTHDP sites;
- telephone discussions and regular contacts with JTHDP sites;
- information collected during the three JTHDP grantee conferences;
- other JTHDP resources, such as grantee applications and DOL/ETA communications with JTHDP grantees; and
- other relevant data, such as JTPA outcome data and U.S. Census data.

The report is divided into five chapters. **Chapter 2, Participant Characteristics,** describes the demographic characteristics, educational attainment, labor market experience, pre-program housing situation, reasons for homelessness, and obstacles to employment for program participants. Analyses are conducted for all participants served under the demonstration effort, as well as across five key subgroups: mentally ill persons, individuals with chemical dependency, long-term homeless individuals, unmarried males, and women with dependent children. The chapter concludes with comparisons of JTHDP participant characteristics with those of JTPA participants.

Chapter 3, Program Design and Services, provides an overview of the various program designs and service delivery strategies employed by JTHDP sites, as well as detail about the specific services provided by JTHDP sites. This chapter examines how services varied by phase and across program sites, as well as the important role coordination played in the delivery of services.

Chapter 4, Program and Participant Outcomes, examines key program outcomes (e.g., job placement, job retention, average wage at placement and retention), and costs (e.g., cost per placement), and utilizes participant-level data collected by JTHDP sites to analyze factors that may have affected outcomes for program participants.

Chapter 5, The Conclusion of JTHDP: Partnering and Continued Provision of

Services to Homeless Individuals, assesses the effects of the “partnering” initiative during the final phase of the demonstration, and the success of JTHDP grantees in continuing to provide services for homeless individuals after the demonstration effort concluded.

CHAPTER 2:

PARTICIPANT CHARACTERISTICS

Recognizing the diversity of the homeless population in the United States and the difficulty that many homeless persons face in obtaining the types of assistance needed to achieve economic self-sufficiency, JTHDP sites were encouraged to serve a wide spectrum of homeless individuals. JTHDP sites were also given the flexibility to target assistance to specific homeless subpopulations, such as mentally ill individuals, persons with chemical dependency problems, individuals with long spells of homelessness, families, and battered women. This chapter provides an overview of the number of individuals served and examines the basic characteristics of program participants, including demographic characteristics, education and employment histories, reasons for homelessness, and housing situation prior to JTHDP participation. Overall numbers of homeless individuals served and trained are based on aggregate numbers provided by JTHDP sites. Analyses of participant characteristics are based on data collected by the sites and entered into a client information system -- referred to as the Cooperative Client Information Program (CCIP).¹ This chapter also profiles five distinct homeless subgroups participating in the program (e.g., women with dependent children). The chapter concludes with a comparison of the characteristics of JTHDP participants with JTPA Title II-A participants.

¹Appendix C provides a copy of the forms used to collect participant-level data.

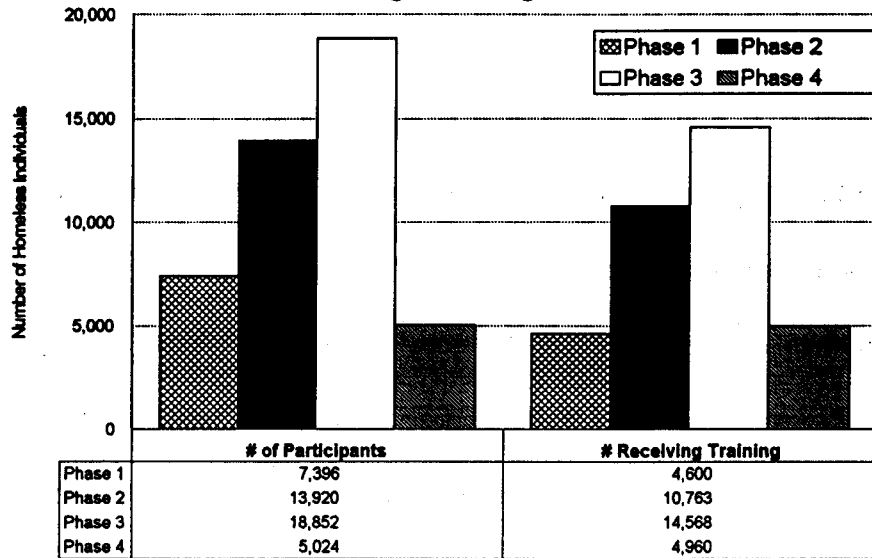
A. NUMBER OF HOMELESS INDIVIDUALS PARTICIPATING IN JTHDP

Under JTHDP, a homeless individual was considered to be a JTHDP “participant” if he or she completed the intake process and received one or more program services (including referral to another service provider). A participant was considered to be “trained” if he or she received one or more of the following training services: (1) remedial education, basic skills training, or literacy instruction; (2) job search assistance or job preparation training; (3) job counseling; (4) work experience or transitional employment; (5) on-the-job training; or (6) vocational or occupational skills training. As discussed in greater detail in Chapter 3, while some participants (approximately one-fifth) received vocational and occupational skills training similar to training provided through the JTPA system, in most instances the employment and training services provided by JTHDP sites was short in duration and focussed more on work readiness and basic skills enhancement.

During JTHDP’s four phases, 63 program grantees provided services to a total of 45,192 homeless individuals. As shown in Exhibit 2-1, nearly three-quarters of the homeless individuals participating in the program received services during JTHDP’s two longest phases -- Phase 2 (13,920 participants) and Phase 3 (18,852 participants). An overall average of 280 homeless individuals participated per site across JTHDP’s four phases.² As shown in Exhibit 2-2, the average numbers of participants per site during Phases 2 and 3 were somewhat above those for the first and final JTHDP phases. The slightly lower averages for JTHDP first and last phases were expected: during Phase 1, sites were involved in developing their initiatives; during Phase 4,

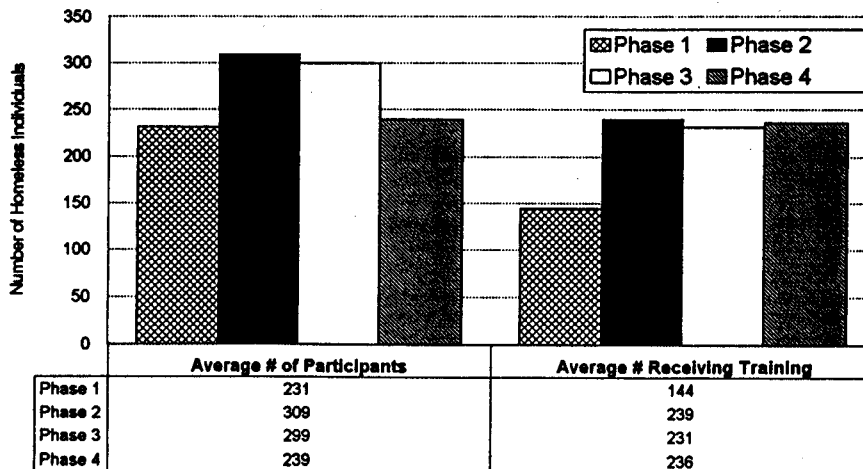
²The average participation level for Phase 3, which consisted of three funding cycles, was calculated by dividing Phase 3 participation by three.

**Exhibit 2-1:
Number of Homeless Individuals Participating in JTHDP
and Receiving Training Services**



Source: Quarterly Reports submitted to DOL/ETA by JTHDP Sites.

**Exhibit 2-2:
Number of Homeless Individuals Participating and
Receiving Training Services Under JTHDP Per Site
(Per Funding Cycle)**



Source: Quarterly Reports submitted to DOL/ETA by JTHDP Sites.

Note: Phase 3 per site average was calculated by dividing the number of participants by three to reflect the three cycles of funding received during this phase.

sites were involved in completing the demonstration and making a transition to other funding or closing their programs.

Since its inception, a total of 34,891 homeless individuals received at least one "training" service provided by JTHDP demonstration sites, or about three-quarters (77 percent) of all JTHDP participants. As shown in Exhibit 2-1 (shown earlier), similar to trends for those served, the number of persons trained during Phase 2 (10,763) and Phase 3 (14,568) accounted for nearly three-quarters of the total number of homeless individuals trained during JTHDP. As sites, through experience and encouragement from DOL/ETA, intensified their pre-screening prior to formal intake, the percentage of participants who received at least one training service increased -- from 62 percent during Phase 1 to 77 percent during Phases 2 and 3 to 99 percent during Phase 4. Overall, an average of 216 JTHDP participants was trained per site, per phase. The average number of individuals trained per site was quite similar for all phases except Phase 1. The average number of individuals trained per site during Phase 1 was lower due to the inexperience of the program and individual sites.

B. CHARACTERISTICS OF JTHDP PARTICIPANTS

As a group, JTHDP participants reflected the program's original mandate -- to serve "the full spectrum of homeless people" -- and the diversity of today's homeless population. Below, characteristics of JTHDP participants are highlighted.³

³Appendix D provides additional detail on characteristics of program participants. It also provides a breakdown of the number of participants and relative percentages for each characteristic covered in this chapter. Because of revisions in the CCIP during the demonstration, in some instances, data are only available for selected phases. Unless otherwise indicated, data are from the CCIP (i.e., JTHDP's participant-level data file) for homeless individuals participating during Phases 2 through 4. The CCIP was being

Age. At the time of intake, JTHDP participants were an average (mean) of 33 years of age. As shown in Exhibit 2-3, about half (49 percent) of the participants were young adults between 22 and 34 years of age. Another 39 percent of the program participants were between 35 and 54 years of age. Although not shown in the exhibit, there was a slight upward shift in the age of participants over the course of the demonstration because several programs targeting homeless youths were funded in the early phases of JTHDP, but not during the final two phases.

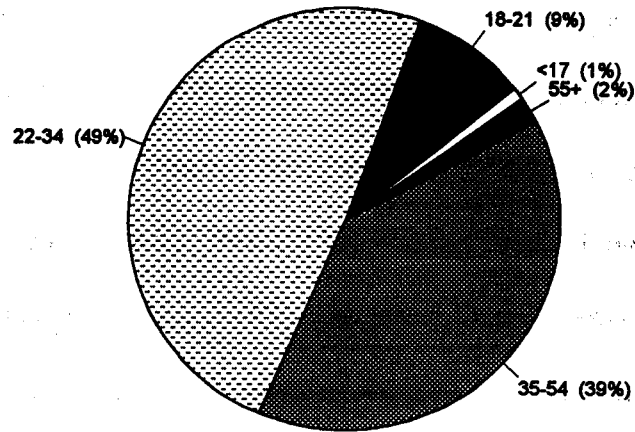
Gender. Nearly two-thirds (63 percent) of JTHDP participants were male. The proportion of males participating in the program is higher than that of the general U.S. population (49 percent of whom are male) and reflects the generally higher proportion of men that make up the homeless population in the United States.⁴

Race/Ethnicity. Throughout the demonstration effort, JTHDP served a racially and ethnically diverse population. As shown in Exhibit 2-4, slightly over half (53 percent) of JTHDP participants were black and about one-third (36 percent) were white. Other racial and ethnic groups included Hispanics (7 percent), American Indians and Alaskan Natives (2 percent), and Asian/Pacific Islanders (1 percent). The racial/ethnic distribution of participants was relatively stable over the course of the demonstration, with a slight increase in the proportion of

developed during Phase 1, so there are no participant-level data available for this phase. Data for Phase 2 and the first funding period under Phase 3 are for individuals enrolled in JTHDP and receiving any type of services (e.g., a referral for housing or substance abuse treatment only); data for the second and third funding periods under Phase 3 and for Phase 4 are for homeless individuals enrolled in JTHDP and receiving at least one training service.

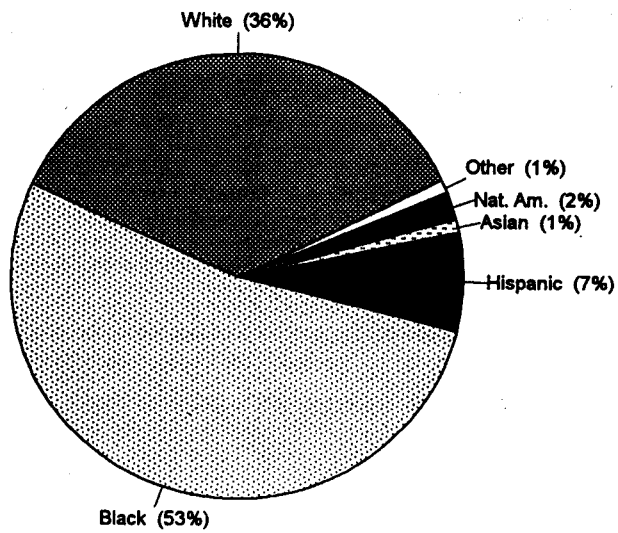
⁴Bureau of the Census, Current Population Survey (March Supplement), as reported in the "Statistical Abstract of the United States: 1995," U.S. Department of Commerce, Table 14.

**Exhibit 2-3:
Age of JTHDP Participants**



Source: CCIP for individuals served during Phases 2-4 (N=28,532).

**Exhibit 2-4:
Race/Ethnicity of JTHDP Participants**



Source: CCIP for individuals served during Phases 2-4 (N=28,605).

blacks served and a slight decrease in the proportion of whites served.

The proportion of blacks participating in the program was much higher than the proportion that blacks represent within the U.S. population (i.e., an estimated 12.5 percent of the U.S. population in 1993) and among persons below the poverty level (i.e., 27.7 percent of all persons with income below the poverty line in 1993).⁵ The proportion of blacks participating in JTHDP was reflective of the relatively high percentage of the homeless population that is black in the United States. The relatively high proportion of blacks participating in the demonstration was also, in part, a function of the inner-city locations of many of the program sites (i.e., most grantees served areas with relatively high concentrations of blacks).

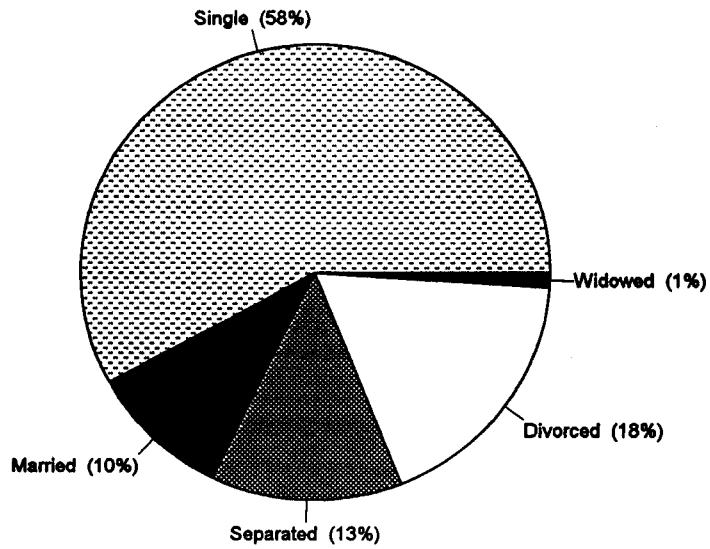
Family Status. Most JTHDP participants were single, never married (58 percent) at the time they entered the program (see Exhibit 2-5); only about 10 percent were married. In comparison, a much lower percentage of the U.S. adult population is single (23 percent in 1994), and a much higher percentage is married (61 percent in 1994).⁶ Slightly less than one-third of JTHDP participants (29 percent) had dependent children.⁷ Of those participants who had dependent children, 40 percent had one child, 32 percent two children, and 29 percent had three or more dependent children. About one-fifth (20 percent) of JTHDP participants were women with dependent children (of whom 84 percent were unmarried).

⁵U.S. Bureau of the Census, Current Population Survey, as reported in the "Statistical Abstract of the United States: 1995," U.S. Department of Commerce, Tables 13 and 744.

⁶Bureau of the Census, Current Population Survey, as reported in the "Statistical Abstract of the United States: 1995," U.S. Department of Commerce, Table 58.

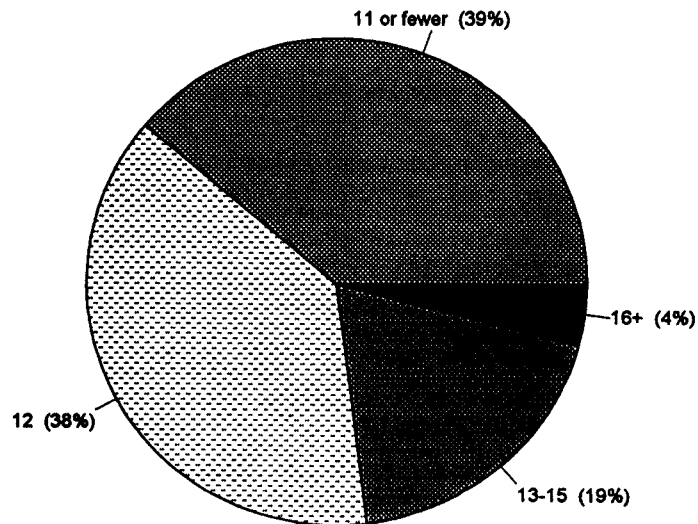
⁷Data available on JTHDP participants are for Phases 3 through 4 only and do not distinguish between those participants who had custodial responsibility for children and those who did not. At intake, JTHDP participants were asked: "During the past six months, how many of the client's children have resided with the client for at least half the time?"

**Exhibit 2-5:
Marital Status of JTHDP Participants**



Source: CCIP for individuals served during Phases 2-4 (N=28,545).

**Exhibit 2-6:
Years of Education Completed for JTHDP Participants**



Source: CCIP for individuals served during Phases 2-4 (N=28,349).

Education. As shown in Exhibit 2-6, 61 percent of JTHDP participants had completed 12 years of education (high school) or more, with 23 percent completing one or more years of college at the time they were enrolled in the program. In comparison, in 1994, 81 percent of the U.S. adult population (age 25 or older) had completed 12 years of education, with 47 percent completing one or more years of college.⁸ The average number of years of education among JTHDP participants was 11.7 years, with little variation from phase to phase. In terms of attaining educational certification,⁹ slightly more than two thirds of JTHDP participants had received either a high school diploma (51 percent) or a GED (18 percent). Sixteen percent had a trade or vocational certificate. Five percent had attained a college or graduate degree.

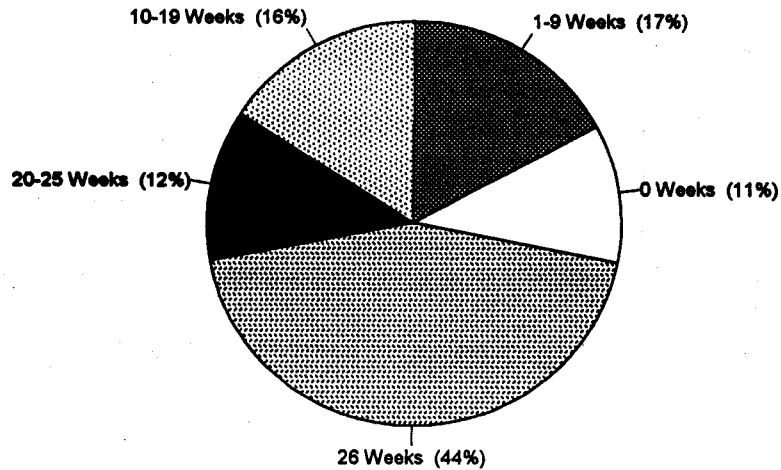
Employment Status. Virtually all JTHDP participants (97 percent) had been employed at some time prior to intake. However, only 10 percent indicated they were employed at the time of intake. The remaining 90 percent of participants indicated they were either unemployed (75 percent) or not in the labor force (15 percent). Lack of employment during the period leading up to JTHDP participation was further indicated by the following:

- About nine in 10 participants (88 percent) had worked no hours during the week preceding JTHDP intake. Only about 4 percent of participants had worked 40 or more hours during the week preceding program intake.
- As shown in Exhibit 2-7, 56 percent of participants had not worked for 20 or more weeks during the 26 weeks prior to intake; 44 percent had not worked throughout the 26-week period prior to intake. Participants were unemployed an average of 17.2 weeks of the 26 weeks prior to entry into the demonstration program.

⁸Bureau of the Census, Current Population Survey, as reported in the "Statistical Abstract of the United States: 1995," U.S. Department of Commerce, Table 240.

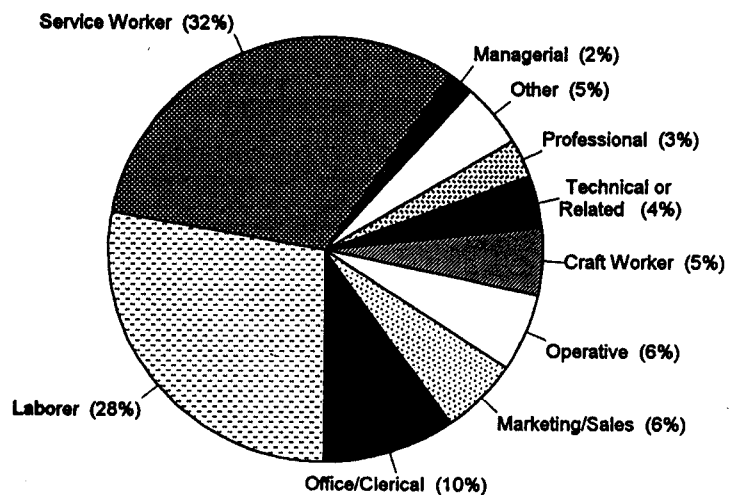
⁹Data on education certification are for Phase 3 only.

**Exhibit 2-7:
Number of Weeks Not Working
During 26 Weeks Before Intake**



Source: CCIP for individuals served during Phases 2-4 (N=26,580).

**Exhibit 2-8:
Current or Most Recent Occupation of JTHDP Participants**



Source: CCIP for individuals served during Phases 2 and 3 (N=12,695).

- Only 5 percent received unemployment compensation at any time during the six months prior to JTHDP participation, indicating that although unemployed they had not had sufficient employment to qualify for unemployment compensation.

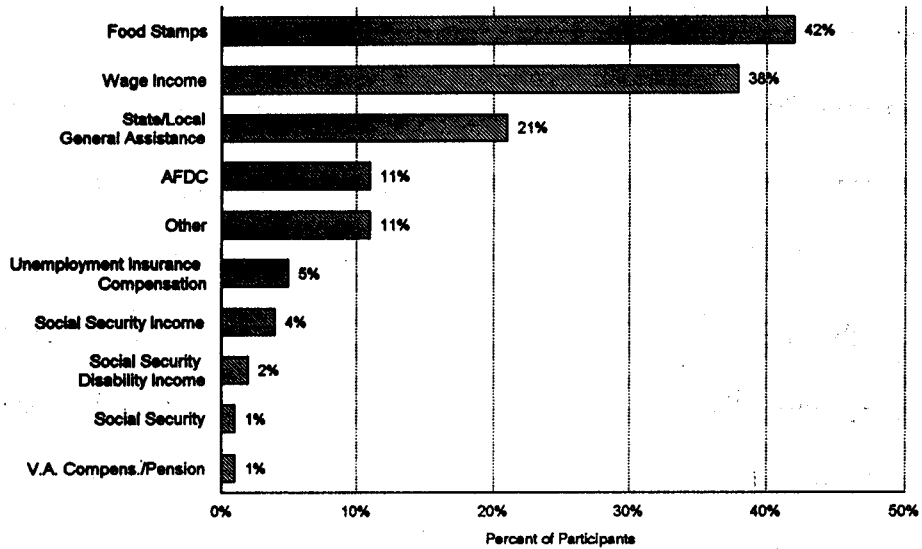
When employed prior to program participation, most JTHDP participants held relatively low-wage jobs. At the time of intake, participants reported an average hourly wage of \$6.37 in their current or most recent job, with slightly over half (56 percent) reporting earning less than \$6.00 per hour.

Finally, as shown in Exhibit 2-8, current or recent jobs for most of those entering the program were in non-skilled and low-skilled fields. About one-tenth of participants identified their most recent job as managerial (2 percent), professional (3 percent), or technical (4 percent). Most of those entering the program had most recently been service workers (32 percent), laborers (28 percent), or office/clerical workers (10 percent).

Sources of Income, Public Assistance Reciprocity, and Gross Income. As might be expected from their low level of participation in the labor market during the period preceding intake, only 38 percent of participants reported some wage income during the six months preceding intake (see Exhibit 2-9). Over half (57 percent) of participants received one or more types of public assistance during the six months preceding intake.¹⁰ The leading types of public assistance received during the six months preceding JTHDP involvement were food stamps (42 percent of participants), state or local general assistance (22 percent), and AFDC (11 percent). Of those participants receiving AFDC, about half (49 percent) had received benefits for more than one year preceding JTHDP intake.

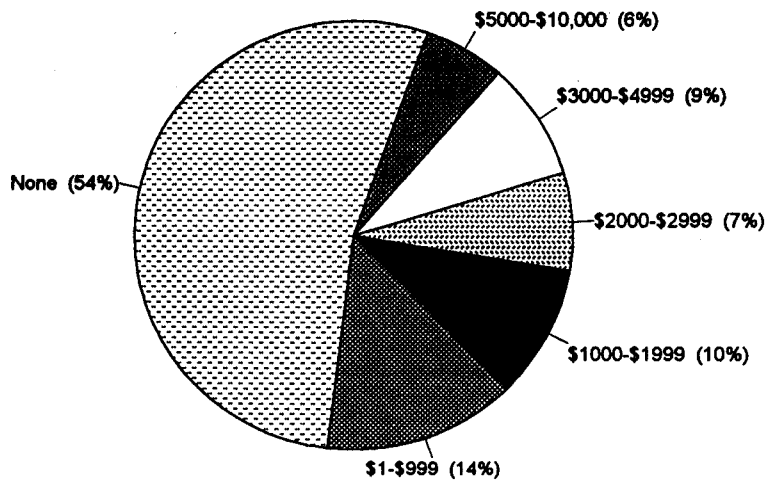
¹⁰Public Assistance includes one or more of the following types of assistance: state or local general assistance, food stamps, Supplemental Security Income (SSI), or AFDC.

**Exhibit 2-9:
Sources of Income or In-kind Benefits During
the Six Months Preceding JTHDP Intake**



Source: CCIP for individuals served during Phases 2 and 3 (N=22,628).

**Exhibit 2-10:
Gross Earnings
During 6 Months Preceding JTHDP Intake**



Source: CCIP for individuals served during Phases 2 and 3 (N=19,903).

As shown in Exhibit 2-10, slightly over half (54 percent) of participants reported no gross earnings during the six months prior to JTHDP intake. An additional 31 percent reported earnings of less than \$3,000 during the six-month period preceding JTHDP intake. The average (mean) gross earnings for participants during the six months preceding intake was \$1,187.

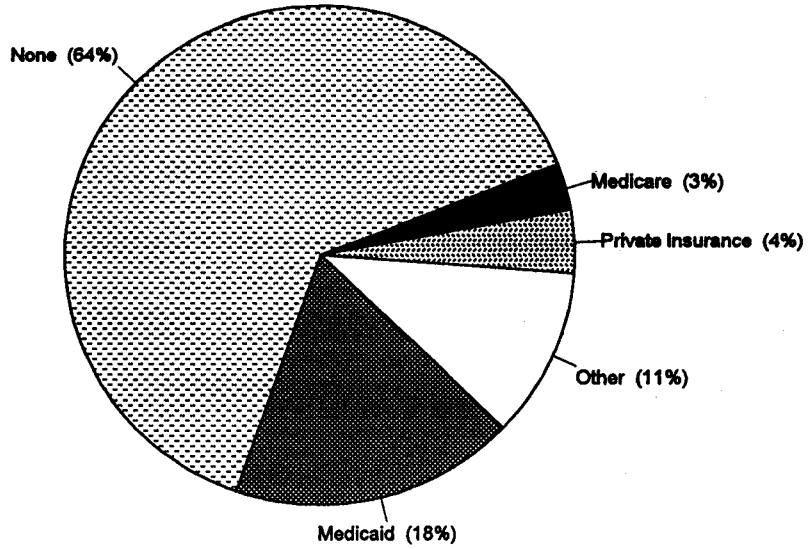
Health Insurance Coverage. About two-thirds of those participating in the program (64 percent) reported no health insurance coverage at the time of program intake (see Exhibit 2-11). In comparison, in 1993 an estimated 15 percent of the U.S. population were not covered by health insurance.¹¹ About one-fifth of participants received health insurance coverage through Medicaid (18 percent) or Medicare (3 percent) at the time of intake. Only 4 percent of participants were covered by private health insurance plans at the time of JTHDP entry, compared to an estimated 70 percent of the U.S. population in 1993. The remaining 11 percent received health care coverage through other sources, such as state government-sponsored health care programs.

Housing Situation and Duration of Homelessness. As displayed in Exhibit 2-12, nearly half (47 percent) of JTHDP participants spent the night before their intake into the program in a shelter, 8 percent were living on the street, 20 percent had stayed with a friend or relative, and 18 percent were living in transitional housing facilities.¹² Although not shown in the exhibit, over the course of the demonstration effort, a generally decreasing proportion of participants stayed in

¹¹Bureau of the Census, Current Population Survey (March Supplement), as reported in the "Statistical Abstract of the United States: 1995," U.S. Department of Commerce, Table 118.

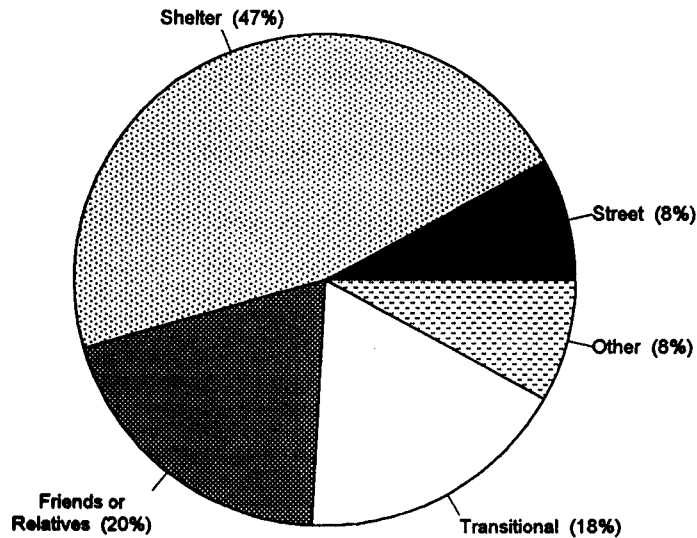
¹²Transitional housing is short-term housing for homeless persons, including housing for able-bodied persons (such as halfway houses for recovering alcoholics, chemically dependent individuals, and/or ex-offenders) that permits limited length of residency (usually up to 24 months) or housing (including halfway houses) for the mentally, emotionally, or physically disabled that includes supportive services, some degree of supervision, and subsidized rent.

**Exhibit 2-11:
Health Insurance Status at the Time of JTHDP Intake**



Source: CCIP for individuals served during Phases 2 and 3 (N=22,028).

**Exhibit 2-12:
Housing Status the Night Prior to JTHDP Intake**



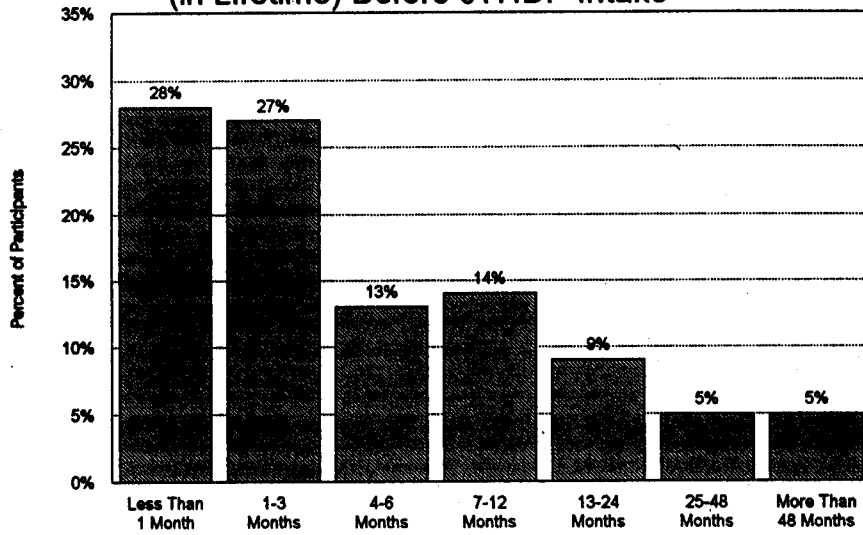
Source: CCIP for individuals served during Phases 2-4 (N=28,525).

emergency shelters the night preceding intake (e.g., 53 percent in Phase 2 compared to 45 percent in Phase 4) or on the street (e.g., 9 percent during Phase 2 compared to 5 percent during Phase 4). At the same time, a higher proportion of homeless individuals entering the program in Phase 4 indicated they had spent the night prior to intake in transitional housing (20 percent versus 11 percent during Phase 2). This increased involvement of persons within transitional housing settings was, at least in part, related to the increased emphasis on linkages between JTHDP sites and local housing providers after Phase 2.

Most participants had recently become homeless (see Exhibit 2-13). Slightly over half (55 percent) estimated they had been homeless for less than four months (in their lifetime); about one-fourth (28 percent) had been homeless for less than one month at the time of intake. The mean months of (lifetime) homelessness at the time of JTHDP intake was about 10 months. Despite serving many short-term homeless individuals, program sites served many who had been homeless for longer periods. For example, about one-third (32 percent) of participants had been homeless for more than six months and 5 percent had been homeless for more than four years (in their lifetime).

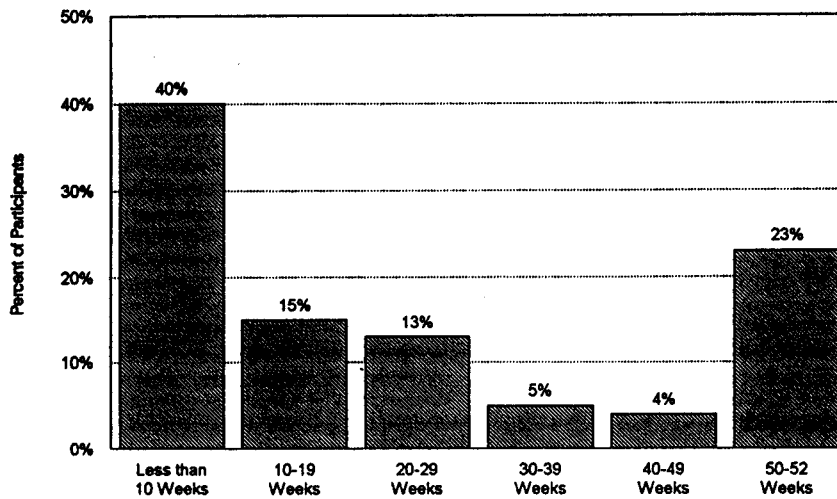
Participants were also asked to estimate the number of weeks they had been homeless during the year preceding program intake. On average, participants reported being homeless 22 of the 52 weeks preceding JTHDP intake. As shown in Exhibit 2-14, 40 percent of participants reported being homeless less than 10 weeks during the year before intake; at the other end of the distribution, nearly one-fourth (23 percent) indicated they had been homeless 50 or more weeks out the previous 52 weeks.

**Exhibit 2-13:
Number of Months Homeless
(in Lifetime) Before JTHDP Intake**



Source: CCIP for individuals served during Phases 2-4 (N=27,856).

**Exhibit 2-14:
Number of Weeks Homeless During
the Year Preceding JTHDP Intake**



Source: CCIP for individuals served during Phases 3 and 4 (N=13,645).

Reasons for Homelessness. During the application process, participants and their case managers were asked to identify factors that contributed to each participant's homeless situation.¹³ Participants and case managers could identify more than one reason. The reasons identified by participants and their case managers included the following (see Exhibit 2-15):

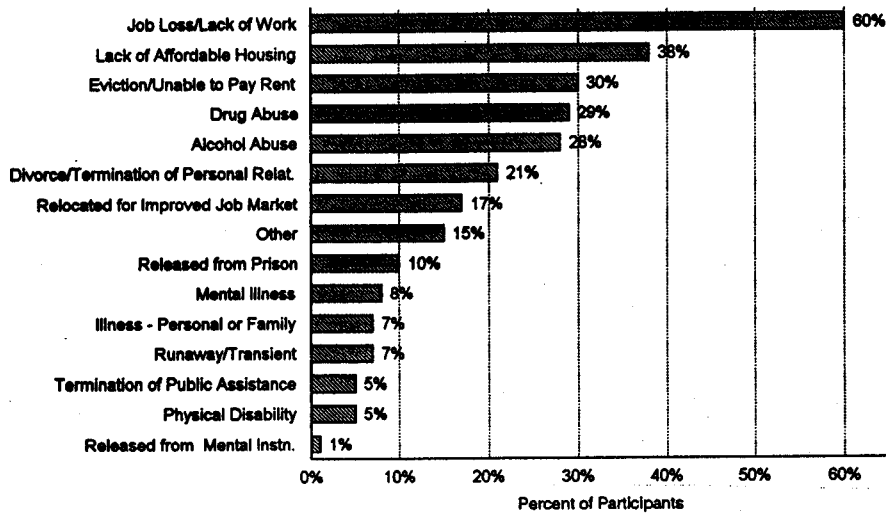
- **economic circumstances**, including job loss or lack of work (identified as a reason for 60 percent of JTHDP participants), eviction/inability to pay rent (30 percent), lack of affordable housing (38 percent), and relocation for improved job market (17 percent);
- **chemical dependency problems**, including alcohol (28 percent) and drugs (29 percent);¹⁴
- **personal crises**, including divorce or termination of a personal relationship (21 percent), personal or family illness (7 percent), or being a runaway or transient (7 percent);
- **other disabling conditions**, including mental illness (8 percent) and physical disability (5 percent); and
- **other problems**, including termination of public assistance (5 percent) and release from prison (10 percent) or mental institutions (1 percent).

Obstacles to Employment. During Phase 3, participants and their case managers were also asked to identify obstacles each participant faced to obtaining employment. Participants and case managers could identify more than one obstacle. Among the obstacles reported were the

¹³The findings in this section and the following section (discussing obstacles to employment) should be viewed with some caution. Many homeless individuals are guarded with personal information until a trust relationship is developed with their case managers. Reasons for homelessness and barriers to employment were typically discussed during the initial intake interview for JTHDP. Although, case managers were encouraged to update reasons and barriers as they got to know participants, many case managers reported forgetting to do so.

¹⁴For the most part, alcohol and drug abuse problems were self-identified by participants or observed by case managers. Some sites also used drug screening to identify individuals with substance abuse problems.

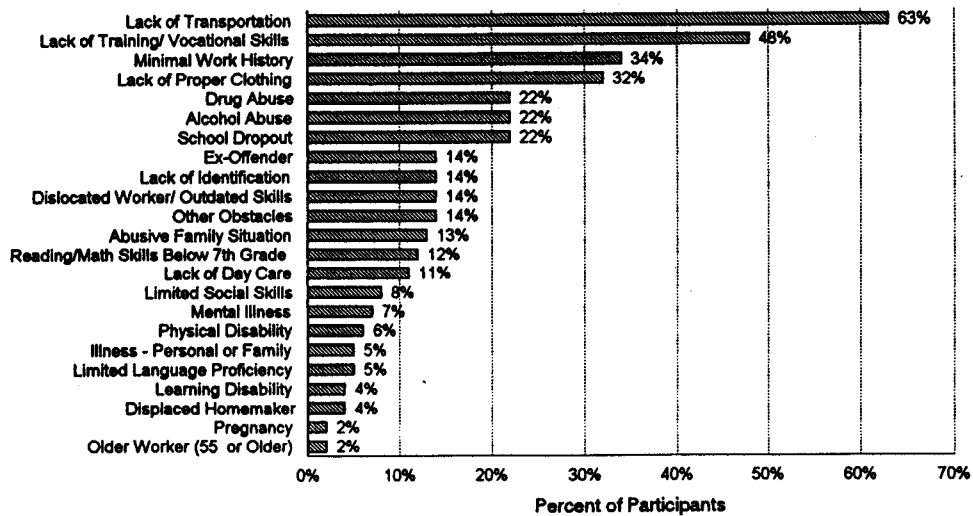
Exhibit 2-15: Reasons for Homelessness Identified for JTHDP Participants



Note: Reasons could be identified by JTHDP participants or their case managers. More than one reason could be identified.

Source: CCIP for individuals served during Phases 3 and 4 (N=13,893).

Exhibit 2-16: Leading Obstacles to Employment Identified for JTHDP Participants



Note: Obstacles could be identified by JTHDP participants or their case managers. More than one reason could be identified.

Source: CCIP for individuals served during Phases 3 and 4 (N=13,893).

following (Exhibit 2-16 displays the leading obstacles):

- **lack of access to transportation and clothing**, including lack transportation (63 percent -- the leading cited obstacle to employment), lack of proper clothing (32 percent), and lack of proper identification (14 percent);
- **lack of education or competitive work skills**, including lack of training or vocational skills (48 percent), minimal work history (34 percent), school dropout (22 percent), dislocated worker or outdated skills (14 percent), and reading or math skills below the 7th grade level (12 percent);
- **chemical dependency problems**, including alcohol (22 percent) or drugs (22 percent);
- **family-related problems**, including abusive family situation (13 percent), lack of day care (11 percent), personal or family illness (5 percent), and being a displaced homemaker (4 percent);
- **communication problems**, including limited social skills (8 percent) and limited language proficiency (5 percent);
- **other disabling conditions**, including mental illness (7 percent), physical disability (6 percent), and learning disability (4 percent); and
- **other obstacles**, including being an ex-offender (14 percent), pregnancy (2 percent), and being an older worker (2 percent).

C. KEY SUBPOPULATIONS SERVED BY JTHDP

An important objective of JTHDP was to serve the full spectrum of homeless persons.

Analysis of data on program participants, along with in-depth discussions during visits to program sites, indicated that all of the major subgroups of homeless persons identified in the original Federal Register announcement for the demonstration were served, including mentally ill individuals, chemically dependent persons, families with children, and single men and women.

Program sites varied substantially in terms of the extent to which they concentrated on specific

subgroups or served the entire homeless population. For example, among the sites focusing on specific homeless subpopulations were:

- Argus Community (in New York City), which served men with a history of alcohol or other drug abuse and/or chronic mental health problems;
- the Kentucky Domestic Violence Association (in various locations throughout Kentucky), which served abused women and their children;
- Southern Willamette Private Industry Council (in Eugene, OR), which served only adult or youth offenders and non-English speakers;
- the City of Alexandria (in Virginia), which served only homeless single parents;
- the Tucson Indian Association (in Tucson, AZ), which served only homeless American Indians; and
- Fountain House (in New York City), HOPE Community Services (in Oklahoma City, OK), and Step Up On Second (in Santa Monica, CA) which served only chronically mentally ill individuals.

Other sites -- such as Jobs for Homeless People (in Washington, D.C.), the Center for Independent Living (in Berkeley, CA), and Friends of the Homeless (in Columbus, OH) -- served the full range of homeless persons within their communities.

Based on discussions with demonstration sites and data available at the participant level, the sections that follow profile characteristics of five major homeless subgroups participating in JTHDP: (1) unmarried men, (2) chemically dependent persons, (3) women with dependent children, (4) long-term homeless individuals, and (5) mentally ill individuals.¹⁵ Exhibit 2-17 compares selected characteristics of homeless individuals within each of these five groups.¹⁶

¹⁵Analyses are based on homeless individuals enrolled in JTHDP and receiving at least one training service during Phase 3 (the second and third funding years) or Phase 4.

¹⁶Appendix E presents a more detailed table showing differences on each characteristic between JTHDP participants categorized within a homeless subgroup and all other JTHDP participants.

EXHIBIT 2-17:

CHARACTERISTICS OF HOMELESS SUBPOPULATIONS
PARTICIPATING IN JTHDP

PARTICIPANT CHARACTERISTICS	UNMARRIED MALES	CHEMICALLY DEPENDENT	WOMEN WITH DEPENDENT CHILDREN	LONG-TERM HOMELESS	MENTALLY ILL
NUMBER	7,728	5,471	2,842	3,632	1,232
PERCENT OF TOTAL	66%	39%	20%	22%	9%
AGE					
<18	0%	0%	1%	0%	1%
18-21	5%	4%	12%	5%	5%
22-34	44%	49%	62%	40%	43%
35-54	49%	46%	26%	53%	49%
55+	2%	1%	0%	2%	3%
SEX					
Male	100%	71%	0%	72%	62%
Female	0%	29%	100%	28%	38%
RACE/ETHNICITY					
White	32%	35%	40%	30%	48%
Black/Non-Hispanic	56%	53%	51%	59%	41%
Hispanic	7%	8%	5%	7%	6%
Other	4%	5%	5%	5%	6%
VETERAN STATUS					
Non-Veteran	70%	77%	95%	74%	79%
Non-Disabled Vet.	27%	21%	4%	23%	17%
Disabled Veteran	3%	2%	1%	3%	4%
MARITAL STATUS					
Single	64%	57%	45%	59%	56%
Married	0%	6%	16%	5%	7%
Seperated	11%	12%	22%	11%	11%
Divorced	24%	23%	17%	23%	24%
Widowed	1%	2%	1%	2%	2%
DEPENDENT CHILDREN					
Yes	9%	19%	100%	17%	18%
No	91%	81%	0%	83%	82%
EDUCATION					
6 or Less (Elementary)	1%	1%	1%	2%	2%
7-11	34%	42%	43%	37%	37%
12 (High School)	39%	35%	38%	37%	34%
13-15 (Some College)	21%	18%	16%	21%	19%
16+ (Completed College)	5%	4%	2%	4%	8%
EMPLOYMENT STATUS					
Currently Employed	8%	5%	11%	10%	9%
0 Hrs. Worked Last Week	83%	86%	79%	81%	81%
Hourly Wage < \$6.00	47%	51%	64%	54%	60%
Unemployed Last 6 Mo.	51%	57%	50%	56%	60%
GROSS INCOME (8 MO.)					
None	49%	53%	47%	52%	56%
\$1-\$2,999	37%	36%	37%	31%	27%
\$3,000+	14%	11%	15%	17%	17%
INCOME SOURCES					
Wage Income	39%	36%	35%	34%	31%
State/Local GA	27%	32%	10%	26%	22%
Food Stamps	44%	51%	62%	50%	44%
SSI	4%	4%	4%	5%	19%
Social Security	1%	1%	2%	1%	3%
SSDI	2%	2%	1%	3%	9%
AFDC	1%	7%	53%	6%	6%
HEALTH INSURANCE					
None	71%	57%	33%	67%	46%
Medicaid	15%	25%	43%	18%	32%
Medicare	2%	2%	5%	2%	8%
Private Health Ins.	2%	3%	5%	2%	3%
Other	10%	13%	13%	10%	10%
HOUSING STATUS AT INTAKE					
Street	9%	5%	1%	10%	8%
Shelter	45%	36%	40%	43%	39%
Friends/Relatives	15%	12%	29%	18%	15%
Transitional	25%	38%	18%	22%	26%
Other	6%	9%	12%	8%	13%

EXHIBIT 2-17:

**CHARACTERISTICS OF HOMELESS SUBPOPULATIONS
PARTICIPATING IN JTHDP (CONTINUED)**

PARTICIPANT CHARACTERISTICS	UNMARRIED MALES	CHEMICALLY DEPENDENT	WOMEN WITH DEPENDENT CHILDREN	LONG-TERM HOMELESS	MENTALLY ILL
NUMBER	7,728	5,471	2,842	3,032	1,232
MONTHS HOMELESS					
<1	23%	21%	48%	0%	21%
1-3	18%	17%	18%	0%	17%
4-6	14%	14%	12%	0%	13%
7-12	16%	18%	11%	0%	16%
13-24	13%	13%	6%	48%	15%
25-48	9%	9%	4%	31%	9%
49+	7%	7%	2%	22%	10%
LEADING REASONS FOR HOMELESSNESS					
Job Loss/Lack of Work	59%	60%	38%	68%	57%
Eviction/Unable to Pay Rent	30%	28%	20%	33%	33%
Runaway/Transient	9%	9%	3%	9%	17%
Lack of Affordable Housing	35%	34%	42%	42%	44%
Abusive Family Situation	9%	17%	44%	16%	28%
Illness - Personal or Family	7%	7%	5%	9%	20%
Mental Illness	8%	11%	4%	11%	85%
Alcohol Abuse	35%	70%	13%	36%	45%
Drug Abuse	34%	73%	15%	37%	37%
Termination of Public Assistance	5%	6%	5%	7%	8%
Physical Disability	5%	5%	2%	7%	14%
Divorce/Termination of Personal Relationship	18%	19%	29%	21%	26%
Released from Prison	13%	16%	3%	12%	11%
Released from Mental Institution	2%	2%	1%	12%	11%
Relocated for Improved Job Market	19%	11%	12%	14%	12%
Other	12%	12%	21%	12%	14%
LEADING OBSTACLES TO EMPLOYMENT					
Lack of Day Care	1%	5%	48%	6%	5%
Displaced Homemaker	1%	3%	14%	3%	6%
Pregnancy	0%	1%	6%	1%	1%
Older Worker (55+)	2%	2%	0%	2%	5%
Alcohol Abuse	29%	56%	9%	29%	35%
Drug Abuse	27%	56%	11%	27%	17%
Physical Disability	6%	8%	4%	8%	19%
Mental Illness	7%	9%	3%	9%	70%
Abusive Family Situation	5%	11%	32%	9%	20%
Illness - Personal or Family	4%	5%	4%	6%	13%
Lack of Transportation	66%	64%	55%	63%	55%
Dislocated Worker/Outdated Skills	13%	13%	13%	17%	20%
Minimal Work History	31%	36%	41%	35%	44%
School Dropout	19%	26%	29%	23%	27%
Lack of Training/Vocational Skills	44%	47%	54%	50%	53%
Limited Language Proficiency/Limited English	4%	4%	5%	5%	6%
Reading/Math Skills Below 7th Grade	11%	13%	11%	14%	14%
Lack of Identification	16%	16%	10%	16%	14%
Lack of Proper Clothing	34%	34%	29%	32%	34%
Ex-Offender	19%	25%	4%	17%	18%
Limited Social Skills	9%	11%	5%	12%	22%
Learning Disability	4%	4%	3%	5%	12%
Other Obstacles	16%	13%	8%	12%	15%

Source: CCIP for homeless individuals enrolled in JTHDP and receiving at least one training service during Phase 3 (the second and third funding years) or Phase 4.

1. Unmarried Males

One of the largest identifiable subgroups of homeless individuals are single males.

Unmarried males accounted for over half (56 percent) of the homeless individuals participating in JTHDP. Although similar in many ways to all JTHDP participants, unmarried males did exhibit several distinctive characteristics, as highlighted below (see Exhibit 2-17):

- **Age:** 51 percent were 35 years or older (compared to 37 percent of all other JTHDP participants).
- **Veteran Status:** 30 percent were veterans (compared to 8 percent of all other JTHDP participants).
- **Dependent Children:** Only 9 percent reported having dependent children (compared to 53 percent of all other participants).
- **Hourly Wage of Most Recent Job:** 53 percent earned \$6.00 or more per hour (compared to 39 percent of all other participants).
- **Income Sources:** 27 percent received state or local general assistance (compared to 17 percent of all other participants; only 1 percent received AFDC (compared with 26 percent of all other JTHDP participants).
- **Health Insurance:** 71 percent (compared to 51 percent of all other participants) reported having no health insurance, and only 15 percent (compared to 30 percent of all other participants) reported having Medicaid.
- **Length of Homelessness:** 29 percent (compared to 16 percent of all other participants) reported being homeless for more than one year.

At the time of intake, the leading reasons for being homeless identified by the unmarried males or their case managers were job loss or lack of work (59 percent), lack of affordable housing (35 percent), alcohol (35 percent) or drug (34 percent) abuse, and eviction or inability to pay rent (30 percent). The leading obstacles to employment for this group were lack of

transportation (66 percent), lack of training or vocational skills (44 percent), lack of proper clothing (34 percent), and minimal work history (31 percent).

2. Chemically Dependent Individuals

Chemical dependency problems -- i.e., alcohol or drug abuse -- are major contributing factors to homelessness in the United States and pose a challenge to serving the homeless population effectively.¹⁷ Thirty-nine percent of persons served by JTHDP sites were identified as having chemical dependency problems.¹⁸ However, because of the methodology used to identify persons with chemical dependency problems and because some homeless persons were not always aware of or willing to identify chemical dependency problems (i.e., they were in a "state of denial" or afraid of potential consequences), this proportion may underestimate the actual percentage of program participants with such problems. As shown (earlier) in Exhibit 2-17, chemically dependent participants were different from all other JTHDP participants in a number of important ways. Some distinctive characteristics of this group are highlighted below:

- **Gender:** 71 percent were male (compared to 53 percent of all other participants).
- **Dependent Children:** 19 percent reported having dependent children (compared to 35 percent of all other participants).

¹⁷For example, The Urban Institute's 1987 survey found that about one-third of the users of soup kitchens and shelters in urban areas (over a seven-day period in March 1987) had been patients in a detoxification or alcohol/drug treatment center. In addition, The Urban Institute study found that problems with chemical dependency among homeless individuals were often linked with other types of institutionalization (e.g., 21 percent of those surveyed had been institutionalized for both mental illness and chemical dependency). See: Martha Burt and Barbara Cohen, America's Homeless: Numbers, Characteristics, and Programs That Serve Them, The Urban Institute, Report 89-3, 1989, p. 51.

¹⁸Participants were identified as having chemical dependency problems if they or their case managers (through testing and assessment, client records, or experience with the client) reported that alcohol or drug abuse was a reason for their homelessness or an obstacle to employment.

- **Employment:** 57 percent had been unemployed during the full 26 weeks leading up to intake into JTHDP (compared to 45 percent of all other participants).
- **Income Sources:** 32 percent (higher than any other subgroup) reported receiving state/local general assistance (compared to 16 percent of all other participants).
- **Housing Status and Duration of Homelessness:** 38 percent had been living in transitional housing (compared to 15 percent of all other participants); 47 percent had been homeless longer than six months (compared to 33 percent of all participants).

At the time of intake, besides chemical dependency, the leading reasons for being homeless (identified by the participant and/or case manager) were job loss or lack of work (60 percent), lack of affordable housing (34 percent), and eviction or inability to pay rent (28 percent). In addition to chemical dependency problems, the leading obstacles to employment identified by these individuals and/or their case managers were lack of transportation (64 percent), lack of training or vocational skills (47 percent), minimal work history (36 percent), and lack of proper clothing (34 percent).

3. Women with Dependent Children

According to a 1990 study by Peter Rossi,¹⁹ the "new homeless" tend to include more families than the "old homeless" of the 1950s. Homeless families, who increasingly began seeking refuge in shelters in the 1980s, are typically less visible than other homeless populations, in part, because most communities target emergency and transitional housing to women and children. Long-term dependence on welfare, lack of training or skills, the need to secure day care, and lack of affordable housing are among the multitude of problems that this group faces in overcoming

¹⁹Peter Rossi, "The Old Homeless and New Homeless in Historical Perspective," American Psychologist, 45:954-959, 1990.

homelessness.

About one-fifth of JTHDP participants were women with dependent children.²⁰ This group's characteristics were considerably different from those of other groups served by JTHDP.

Some distinctive characteristics of this group were the following (see Exhibit 2-17, earlier):

- **Age:** 75 percent were under 35 years of age (compared to 50 percent of all other participants).
- **Veteran Status:** Only 5 percent were veterans (compared to 24 percent of all other participants).
- **Marital Status:** 45 percent were single (compared to 58 percent of all other participants), 16 percent were married (compared to 8 percent of all other participants), and 22 percent were separated (compared to 11 percent of all other participants).
- **Income Sources:** 64 percent reported the hourly wage at their most recent job to be less than \$6 per hour (compared to 50 percent of all other participants). A much greater proportion of this group compared to any other subgroup reported receiving AFDC (53 percent) and food stamps (62 percent) during the six months preceding intake (compared to 3 percent AFDC and 45 percent food stamp reciprocity among all other participants).
- **Health Insurance:** In comparison to the average for JTHDP participants and the four other subgroups, this group was much more likely to have some form of health insurance -- 67 percent of this group reported some type of health insurance versus 31 percent for all other participants. Among women with dependent children, 43 percent reported having Medicaid coverage (compared to 16 percent among all other participants).
- **Housing Status and Duration of Homelessness.** Only 1 percent (compared to 8 percent of all other participants) were living on the street at intake, and 29 percent were living with friends or relatives (compared to 17 percent of all other participants). Prior to intake, this group had been homeless for a shorter period than any other major subgroup (e.g., 65 percent were homeless three months or less, compared to 44 percent of all other participants).

²⁰Participants were defined as having dependent children if they reported having children who resided with them for at least three of the six months prior to intake into JTHDP.

At intake, the leading reasons that women with dependent children or their case managers gave for their homelessness were an abusive family situation (44 percent), lack of affordable housing (42 percent), and job loss or lack of work (38 percent). They were much less likely than any other subgroup to identify alcohol (13 percent) or drug (15 percent) abuse as a reason for homelessness. The leading obstacles to employment identified by this group or their case managers were lack of transportation (55 percent), lack of training/vocational skills (54 percent), lack of day care (48 percent), and minimal work history (41 percent).

4. Long-Term Homeless Persons

As homelessness persists over a longer period of time and becomes ingrained as a way of life, it typically becomes increasingly difficult for an individual to break the cycle of homelessness. For example, during lengthy stretches of homelessness, health care problems or chemical dependency problems may intensify because of lack of treatment, work skills may diminish or become outdated, and the individual's appearance and self-confidence may decrease to a point where it becomes very difficult to secure and/or hold a job. About one-fifth (22 percent) of JTHDP participants had been homeless for longer than one year. As shown (earlier) in Exhibit 2-17, the long-term homeless (i.e., those individuals who had been homeless for over one year) were different from the general population served by JTHDP in a few important ways. Some distinctive characteristics of long-term homeless individuals served are highlighted below:

- **Age:** 55 percent were age 35 and older (compared to 43 percent of all other participants). This group had the oldest age distribution of the five major subgroups profiled.
- **Gender:** 72 percent were male (compared to 57 percent of all other participants).

- **Dependent Children:** 17 percent reported having dependent children (compared to 32 percent of all other participants).

At the time of intake, the leading reasons that the long-term homeless gave (or were reported by their case managers) for being homeless were job loss or lack of work (68 percent), lack of affordable housing (42 percent), drug (37 percent) or alcohol (36 percent) abuse problems, and eviction or inability to pay rent (33 percent). The leading obstacles to employment they identified were lack of transportation (63 percent), lack of training or vocational skills (50 percent), minimal work history (35 percent), and lack of proper clothing (32 percent).

5. Mentally Ill Individuals

Mental health problems are a major contributing factor to homelessness in the United States.²¹ Homeless persons suffering from mental health problems come from widely varying backgrounds and often have other associated problems that contribute to their homelessness:

...Many homeless persons have a history of institutionalization in mental hospitals. Others, particularly younger persons, are diagnosably mentally ill (and often also chemically dependent) but, because far fewer people are hospitalized today than would have been hospitalized 15 or 20 years ago, they have never spent time in a mental hospital. In addition, many homeless persons are depressed and demoralized enough to need clinical treatment, whether or not they would be diagnosed as having a major mental illness.²²

²¹For example, Burt and Cohen observe that “most careful studies find that 20 to 50 percent of homeless people have either a current severe mental illness, a history of hospitalization for severe mental illness, or both....Most experts now work with a conservative assumptions that about one-third of the homeless suffer from a severe mental illness.” (See: Martha Burt and Barbara Cohen, Over the Edge: The Growth of Homelessness in the 1980s, The Urban Institute, 1992, p. 108-109).

²²Burt and Cohen, 1989, p. 136.

About 9 percent of persons participating in JTHDP were identified as being mentally ill.²³

As shown in earlier Exhibit 2-17, mentally ill persons were different from the general population participating in JTHDP in a number of important respects. Some distinctive characteristics of mentally ill persons served by JTHDP are highlighted below:

- **Race:** 48 percent were white (compared to 34 percent of all other participants) -- no other subgroup profiled had more than 40 percent of individuals identifying themselves as white.
- **Dependent Children:** 18 percent had dependent children (compared to 30 percent of all other participants).
- **Earnings/Income Sources:** During the six-month period prior to intake, 56 percent had no earnings (compared to 46 percent of all other participants). Mentally ill participants were more likely to have received SSI, Social Security, or Social Security Disability Income (SSDI) than any other subgroup.
- **Employment Status:** 60 percent of mentally ill participants indicated that they had not been employed during the full 26 weeks preceding JTHDP intake, compared to 49 percent for all other participants.
- **Health Insurance:** Mentally ill participants were more likely than any other group except homeless families to have some form of health insurance (54 percent had some type of health insurance compared to 36 percent of all other participants), particularly Medicaid (32 percent) or Medicare (8 percent).²⁴
- **Housing Situation:** Mentally ill participants were more likely to have been homeless longer than other JTHDP participants -- 34 percent had been homeless for more than a year versus 23 percent for all other JTHDP participants.

The leading reasons mentally ill participants gave for being homeless (in addition to mental health problems) were job loss or lack of work (57 percent), alcohol abuse (45 percent), lack of

²³Participants were identified as mentally ill if they or their case managers (through testing and assessment, client records, or experience with the client) reported that mental illness was a reason for their homelessness or an obstacle to employment.

²⁴Most SSI recipients receive Medicaid and most SSDI recipients receive Medicare.

affordable housing (44 percent), drug abuse (37 percent), and eviction or inability to pay rent (33 percent). Major obstacles to employment (in addition to mental health problems) faced by this group included lack of transportation (55 percent), lack of training or vocational skills (53 percent), minimal work history (44 percent), alcohol abuse (35 percent), and lack of proper clothing (34 percent).

D. COMPARISON OF THE CHARACTERISTICS OF JTHDP AND JTPA PARTICIPANTS

Job training programs funded under Title II-A of JTPA are a potential resource for homeless persons in need of employment and training services. Under the Job Training Reform Amendments of 1992 (P.L. 102-367, Section 203), 65 percent of individuals served by JTPA Title II-A programs must fit into one or more of seven "hard-to-serve" target groups. Homeless individuals are one of these target groups. A comparison of the characteristics of JTHDP participants and adult JTPA participants is useful in understanding the potential of JTPA to serve the general homeless population.²⁵ As discussed in greater detail in Chapter 4, the final phase of JTHDP placed special emphasis on establishing partnerships between JTHDP programs and nearby JTPA service delivery areas to increase referrals of homeless individuals for JTPA training opportunities and to enhance delivery of services for homeless individuals within the JTPA system.

²⁵Homeless individuals accounted for an estimated 2.4 percent of Title II-A participants in PY 1994 (5,569 individuals).

Exhibit 2-18 provides a comparison of the characteristics of JTHDP participants and JTPA Title II-A (PY 1994) homeless and non-homeless terminées.²⁶ As shown in the exhibit, there were considerable similarities in the characteristics of homeless individuals served by JTHDP and JTPA, while there were differences in the characteristics of JTHDP participants and JTPA non-homeless terminées. Some of the similarities and differences are discussed below:

- **Age:** While the age distribution of JTHDP participants and JTPA homeless terminées was similar, both groups tended to be somewhat older than JTPA non-homeless terminées. For example, 33 percent of JTHDP participants and 28 percent of homeless JTPA terminées were under 30 years of age, compared with 41 percent of JTPA non-homeless terminées.
- **Gender:** While the proportion of male JTHDP participants (63 percent) was nearly the same as the proportion of homeless JTPA terminées (62 percent), only one-third (33 percent) of non-homeless JTPA terminées were male.
- **Race/Ethnicity:** The racial composition of JTHDP and JTPA non-homeless participants were about the reverse of one another. A substantially higher percentage of JTHDP participants were black (53 percent) compared to JTPA non-homeless terminées (32 percent). While about one-third of JTHDP participants were white (35 percent), over half (53 percent) of non-homeless JTPA terminées were white. While a similar proportion of JTHDP participants (7 percent) and homeless JTPA terminées (9 percent) were Hispanic, 14 percent of the non-homeless JTPA terminées were Hispanic.
- **Veteran Status:** While the proportion of veterans was identical among JTHDP participants and homeless JTPA terminées (20 percent), only 8 percent of non-homeless JTPA terminées were veterans.
- **Average Number of Dependent Children Under 18 Years of Age:** JTHDP participants and homeless JTPA terminées had (on average) fewer dependent children than non-homeless JTPA terminées.
- **Education:** JTHDP participants generally completed fewer years of education than both homeless and non-homeless JTPA terminées. Thirty-nine percent of JTHDP participants had less than 12 years of education, compared with about one-

²⁶Terminées refer to JTPA participants who terminated (i.e., left) the JTPA program after the objective assessment process.

EXHIBIT 2-18:

**CHARACTERISTICS OF JTHDP PARTICIPANTS
COMPARED TO JTPA TITLE II-A TERMINEES**

CLIENT CHARACTERISTICS	JTHDP PARTICIPANTS	JTPA TITLE II-A NON-HOMELESS TERMINEES	JTPA TITLE II-A HOMELESS TERMINEES
AGE			
29 or Under	33%	41%	28%
30-54	65%	56%	71%
55+	2%	2%	2%
GENDER			
Male	63%	33%	62%
Female	37%	67%	38%
RACE/ETHNICITY			
White/Non-Hispanic	36%	53%	41%
Black/Non-Hispanic	53%	32%	44%
Hispanic	7%	14%	9%
Other	4%	3%	5%
VETERAN STATUS			
Veteran	20%	8%	20%
Non-Veteran	80%	91%	80%
AVERAGE NUMBER OF CHILDREN UNDER 18	0.6	1.3	<1
EDUCATION			
Less than High School	39%	23%	25%
High School Graduate	38%	56%	53%
Some Post High School	23%	21%	22%
LABOR FORCE STATUS AT TIME OF INTAKE			
Employed (Full- or Part-time)	10%	15%	8%
Unemployed	75%	52%	54%
Not in the Labor Force	15%	33%	39%
Average Number of Weeks Unemployed in 26 Weeks to Intake	17	12	13
U.I Claimant or Exhaustee	5%	15%	10%
AVERAGE PRE-PROGRAM HOURLY WAGE	\$6.37	\$6.07	\$6.07
RECEIPT OF AFDC	11%	42%	31%
OBSTACLES TO EMPLOYMENT			
Ex-Offender	14%	13%	31%
Substance Abuse	25%	5%	27%
Disabled	6%	8%	11%
Limited Language Proficiency	5%	5%	3%
Long-term AFDC Recipient	3%	16%	6%
TYPES OF SERVICES RECEIVED			
Vocational/Occupational Training	21%	56%	NA
Remedial Education	23%	21%	NA
On-the-Job Training	4%	14%	NA
Work Experience	13%	4%	NA
Transportation	76%	51%	NA

Figures are for JTPA terminees in Program Year (PY) 1994 (July 1, 1994 - June 30, 1995), as reported by DOL/ETA from JTPA Standardized Program Information Report (SPIR). Sample Size for JTPA Title II-A non-homeless terminees is 226,468; sample size for JTPA Title II-A homeless terminees is 5,569. JTHDP figures are based on participant-level data maintained by sites for Phases 2 through 4, except for age (age figures from Phases 3 and 4). Sample size for JTHDP participants is 28,617.

fourth of JTPA terminees (23 percent for non-homeless and 25 percent of homeless JTPA terminees). Interestingly, about the same proportion of JTHDP participants (24 percent) completed some post-high school education as JTPA homeless (22 percent) and JTPA non-homeless (21 percent) terminees.

- **Employment:** A relatively small proportion of JTHDP participants (10 percent) and JTPA terminees (15 percent for non-homeless and 8 percent for homeless terminees) were employed full- or part-time at the time of intake. A higher proportion of JTHDP participants were unemployed (75 percent) at program intake than was the case for either non-homeless (52 percent) or homeless JTPA terminees (54 percent). A substantially higher proportion of JTHDP participants (85 percent) was in the labor force than either non-homeless (67 percent) or homeless JTPA terminees (61 percent). The average number of weeks unemployed during the six months preceding program enrollment was longer for JTHDP participants (17 of the previous 26 weeks) compared to either JTPA non-homeless (12 weeks) or homeless terminees (13 weeks). Finally, JTHDP participants were somewhat less likely to be unemployment insurance claimants or exhaustees (5 percent), in comparison to either JTPA non-homeless (15 percent) or homeless terminees (10 percent).
- **Average Pre-program Hourly Wage:** A pre-program wage is the hourly wage earned by participants in their most recent job prior to applying to the employment and training program. JTHDP participants reported a somewhat higher pre-program wage (\$6.37) than either homeless or non-homeless JTPA participants (both of whom reported a pre-program wage of \$6.07).
- **Receipt of AFDC:** JTHDP participants (11 percent) were substantially less likely than either JTPA non-homeless (42 percent) or homeless (31 percent) terminees to be AFDC recipients. The percentage of long-term AFDC recipients was considerably lower among JTHDP participants (about 3 percent) and homeless JTPA terminees (6 percent), in comparison with JTPA non-homeless terminees (16 percent).
- **Barriers to Employment:** Although the definitions of substance abuse and methods for obtaining information about substance abuse problems were different for JTHDP and JTPA, available data suggest that the problem of substance abuse (alcohol and drug abuse) was about the same for JTHDP participants and homeless JTPA terminees.²⁷ In terms of available data, 25 percent of JTHDP participants were identified (either by themselves or their case managers) as having a drug or alcohol abuse problem that was considered to be a barrier to employment,

²⁷Under JTPA, individuals who abuse alcohol or other drugs, as defined by the Governor, were classified as having a substance abuse problem that was a barrier to employment.

compared to 5 percent of JTPA non-homeless and 27 percent of homeless terminees. The proportion of ex-offenders was about the same for JTHDP (15 percent) and JTPA non-homeless terminees (14 percent), but much higher among JTPA homeless terminees (31 percent). The percentage of disabled and those with limited language proficiencies was about the same for JTHDP participants and JTPA terminees.

E. SUMMARY

As intended by Congress and DOL, program sites served a wide spectrum of the homeless population, including dislocated workers, displaced homemakers, families, individuals who had been homeless for long periods, physically disabled persons, mentally ill individuals, individuals with chemical dependency problems, and other subgroups facing barriers to employment. Over the course of the demonstration, JTHDP sites served 45,192 homeless individuals (an average of about 280 participants per site, per funding cycle). The percentage of these participants receiving training services (77 percent) increased over the course of the demonstration effort, as sites focused on pre-screening individuals prior to program intake.

Some distinguishing characteristics of JTHDP participants included the following: About half (49 percent) were young adults between 22 and 34 years of age, with the average being 33 years of age. Nearly two-thirds (63 percent) were male. About half (53 percent) were black. Nearly 6 in 10 (58 percent) were single (never married) individuals. Although 97 percent had been employed at one time, only 10 percent were employed at intake. About two-thirds (64 percent) were without health insurance. Slightly over half (55 percent) reported being homeless for less than four months in their lifetime. The most frequently identified reason for homelessness was job loss or lack of work -- reported by 60 percent of participants. The most frequently

identified obstacle to employment was lack of transportation -- reported by 63 percent of participants.

Among the five key subpopulations profiled, there were some interesting differences. *Unmarried males* were older, more likely to be veterans, not have dependent children, and to have been homeless for more than one year than other JTHDP participants. *Chemically dependent individuals* were more likely to be male, to have been unemployed during the full 26 weeks leading up to program intake, to have received state or local general assistance, and to have been living in transitional housing at the time of intake than other participants. *Women with dependent children* were more likely to be younger, to have a lower hourly wage at their most recent job, to have some form of health insurance, and to be homeless for a shorter period of time than other participants. *Long-term homeless persons* were more likely to be older, male, and not to have dependent children than other participants. *Mentally ill individuals* were more likely to be white, have no earnings (but have received SSI, Social Security, or SSDI), to have health insurance, and to have been homeless for a longer period of time than other participants.

Finally, the characteristics of JTHDP participants were similar to those of JTPA Title II-A homeless terminees on a number of dimensions, but quite different from JTPA Title II-A non-homeless terminees. For example, approximately two-thirds of JTHDP (63 percent) and homeless JTPA terminees (62 percent) were male, compared to 41 percent of non-homeless JTPA terminees. The age distribution of JTHDP participants and JTPA homeless terminees were similar, with both groups tending to be somewhat older than JTPA non-homeless terminees. The proportion of veterans was identical among JTHDP participants and homeless JTPA terminees (20 percent), compared to 8 percent of non-homeless JTPA terminees. JTHDP participants (53

percent) and homeless JTPA participants (44 percent) were more likely to be black than non-homeless JTPA participants (32 percent). Despite some similarities, JTHDP participants differed from JTPA homeless (and non-homeless) terminées in terms of educational attainment and workforce attachment. For example, JTHDP participants were less likely to complete high school (61 percent) than either homeless JTPA terminées (75 percent) and non-homeless JTPA terminées (77 percent); 15 percent of JTHDP participants were reported not to be in the labor force, compared with 39 percent of homeless JTPA terminées and 33 percent of non-homeless JTPA terminées.

CHAPTER 3:

PROGRAM DESIGN AND SERVICES

One of the major objectives and challenges of JTHDP was to determine how the employment and training needs of a wide variety of homeless individuals and families could be met most effectively. In this chapter, we describe and assess JTHDP design and service strategies and how they evolved over the course of the demonstration effort.¹ Particular emphasis is placed on the sites which were grantees during Phases 2 through 4, because these sites provided an opportunity to examine changes and refinements in service delivery strategies over a period of nearly six years.²

A. PROGRAM DESIGN

JTHDP grantees represented a broad range of organizations, including JTPA SDAs/PICs, mental health organizations, shelters, a variety of agencies operated under city governments, community action committees, and education agencies (e.g., community colleges and vocational

¹A Best Practices Guide has been developed as a companion volume to this report, which provides more detailed descriptions of services offered by JTHDP grantees and recommendations for effective strategies for providing employment, training, housing, and other support services for homeless individuals. See: Susan Kessler Beck, John Trutko, Kellie Isbell, Fran Rothstein, and Burt Barnow, Employment and Training for America's Homeless: Best Practices Guide, prepared by James Bell Associates, Inc., for the U.S. Department of Labor, 1997.

²For an overview and analysis of services offerings during Phase 1 see: R.O.W. Sciences, Job Training for the Homeless Demonstration Program: First Year Experience: October 1988 to September 1989, prepared for the U.S. Department of Labor, January 1991, Chapter 4. For an overview and analysis of services offerings during Phase 2 see: James Bell Associates, Inc., Employment and Training for America's Homeless: Report on the Job Training for the Homeless Demonstration Program, prepared for the U.S. Department of Labor, 1994, Chapter 3.

training institutes). Grantees employed different approaches and strategies for assisting homeless individuals toward economic self-sufficiency, based (at least initially) on their type of organization. For example, homeless-serving agencies generally focused on improving participants' housing situations and contracted with other agencies to provide vocational training services, while school systems typically focused on education and training, and looked to other agencies to provide housing assistance. Grantees also designed elements of their programs based on the homeless subpopulations they planned to serve. For example, given the chronic and often debilitating nature of mental illness -- and the fact that many mentally ill homeless persons also had other problems contributing to their homelessness (e.g., substance abuse, lack of vocational skills, and minimal work history) -- it was necessary for sites serving such populations to offer extended training periods and a wide array of services (often through linkages). Fountain House (located in New York City), for example, provided the following services and assistance for its JTHDP participants (all of whom were mentally ill): assertive outreach, integrated case management, housing, psychiatric treatment, chemical dependency treatment, health care, assistance in obtaining federal/state entitlements, consumer/family involvement, legal protection, rehabilitation treatment, vocational training, transitional employment, and referral to temporary and permanent employment.

Even among the variety of approaches and populations served, certain design elements were common to most projects funded under JTHDP (especially during the latter phases of the demonstration):

- recruitment and prescreening, with an increased emphasis on agency linkages as the demonstration proceeded;

- **objective assessment and ongoing case management, as methods for tailoring services to meet individual client needs and tracking progress participants made in the program;**
- **availability of remedial and basic skills education;**
- **provision of vocational/occupational skills training;**
- **provision of job search and placement assistance;**
- **availability of a wide variety of support services;**
- **provision of postplacement services, with a growing emphasis on these services as a key to job retention, housing retention, and long-term stability over the course of the demonstration;**
- **availability of shelter placements, transitional housing placements, and assistance in securing permanent housing, with increasing emphasis on formal housing linkages as the demonstration proceeded; and**
- **coordination with community agencies -- sometimes on an agency-by-agency basis and sometimes through coordinated, community-wide systems of linkages.**

As is true of any new program, JTHDP service delivery systems and approaches were modified as grantees became more experienced in providing employment, training, housing, and support services for homeless individuals. Over time, JTHDP grantees moved from recruiting homeless individuals from the street or other locations where homeless people congregated to developing agreements with agencies to screen and refer homeless individuals interested in pursuing employment and training services. Project staff sought more reliable and valid assessment tools and practices, particularly regarding mental health and chemical dependency problems, as those issues were increasingly seen as interfering with participant success. To increase retention rates, projects increased their emphasis on postplacement services through strategies such as mentoring, support groups, and longer-term case management.

Program design changes also resulted from new DOL/ETA program requirements emphasizing job retention, upgraded housing, and when appropriate, increased referrals of program participants to JTPA for occupational skills training. For example, based on JTHDP grantee experiences and evaluation results from earlier phases, DOL/ETA required grantees to expand linkages with local housing providers and clearly define a comprehensive housing strategy to complement their employment and training efforts as a condition for acceptance as a grantee during JTHDP's Phase 3. In response, JTHDP sites moved beyond housing counseling and providing housing referrals to negotiating priorities or set-asides with local public housing authorities, nonprofit housing providers, and even for-profit landlords. Some JTHDP sites even began to view themselves as affordable housing developers or as catalysts in their communities for the development of affordable housing. For example, because of their work with homeless individuals through JTHDP, the Massachusetts Career Development Institute (MCDI) in Springfield, Massachusetts was asked by city officials to administer an emergency and transitional housing program. By managing the housing program, MCDI was able to more effectively assess individuals prior to enrollment in JTHDP and to assure extended shelter stays and priority placement in the transitional facility for program participants working toward their employment and training goals.

The next section discusses the types of services provided by JTHDP grantees (directly or through linkages with other agencies) and some of the lessons learned by grantees in providing a comprehensive and cost-effective blend of services to meet the widely varying needs of homeless individuals.

B. PROGRAM SERVICES

JTHDP was primarily an employment and training program, and as such, involved a core of specific activities and services: recruitment, intake, and assessment; training and education services; and placement and postplacement services. The program's focus on homeless individuals required that traditional employment and training services be supplemented by services tailored to the varied needs of homeless individuals. These additional services included case management, work-readiness training, housing services, and support services. Case management was important because the case manager served as the gatekeeper through which the homeless person obtained needed services, as well as provided support and guidance. Work-readiness training was key to homeless individuals securing and retaining employment because of their absence from the workforce and problems that often accompany or lead to homelessness. Housing services were a critical component because shelter, particularly transitional and permanent housing, created the stability needed by participants to undertake training and/or seek and retain employment. Finally, support services were necessary to address immediate survival issues (e.g., food and clothing) as well as the longer-term stability issues (e.g., financial assistance and health issues). Each of these services, and the ways in which the various JTHDP sites provided them, is discussed below, including variations in how services were delivered across sites, the level of utilization of services by program participants, and some of the lessons learned by sites for effective delivery of services to homeless individuals. Where possible, examples are provided of the specific practices utilized by sites, particularly those JTHDP sites that participated in the demonstration effort over several phases.

1. Initial Services (Recruitment, Intake, and Assessment)

JTHDP sites faced some of the same initial challenges faced by any job training program -- how to publicize their services, recruit interested persons, identify appropriate clients, and assess training and service needs. However, for JTHDP, those challenges were intensified and defined by the transient nature of homeless people and their often tenuous ties with community agencies.

Recruitment. Recruitment (or outreach) strategies are the ways in which programs publicize their services, and identify and recruit potential participants. JTHDP sites used a variety of outreach methods, including: making regular presentations to staff and individuals served by local human service agencies and homeless-serving agencies (e.g., soup kitchens, shelters, halfway houses, and welfare agencies); maintaining regular telephone contact with case workers at local human services agencies; and periodically distributing posters and other materials to homeless-serving agencies, halfway houses, human service agencies, libraries, and schools.

There was a noticeable shift in recruitment strategies after Phase 2. In the first few years of the demonstration, few sites were well-enough established to draw clients primarily through word-of-mouth or referral networks. Hence, JTHDP staff invested considerable time in directly recruiting homeless individuals from shelters and congregate sites such as parks and soup kitchens. As programs became more established, they developed more extensive referral networks with homeless-serving agencies (and other local human service agencies) and began to de-emphasize direct client outreach in favor of agency outreach. Grantees reported that homeless-serving agencies had a track-record of working with homeless individuals and, through guidance from JTHDP grantees, were able to provide appropriate and generally well-screened candidates for program participation. Hence, beginning in Phase 2, most sites targeted their

outreach efforts toward the staff of shelters, halfway houses, and other homeless-serving agencies, rather than toward homeless individuals, and then depended on referrals from those staffs. In working with other organizations, grantees had several important suggestions with regard to structuring the referral relationship:

- Develop cooperative agreements with referring agencies which delineate each party's responsibilities.
- Be sure referring agencies conduct thorough initial screenings to determine appropriateness and the desire of clients for employment and training activities. If possible, provide specific guidelines or criteria for the referring agency.
- Provide regular feedback to the referring agency on appropriate and inappropriate referrals.

Intake and Assessment. Intake and assessment are initiated once a potential client expresses interest in program participation. During intake, staff begin to collect personal and demographic data on potential participants through a combination of interviews and written application. Ideally, assessment begins at intake and is an ongoing process that involves determining an individual's strengths and skills deficits. The determination may be made based on subjective interviews, more objective standardized tools, or a combination of interviews and standardized assessment tools.

All JTHDP sites employed a standardized intake process. Even when referring agencies did some initial screening, JTHDP sites collected information about applicants' service needs, and educational, employment, and health histories. Almost all sites also implemented some type of formal assessment process, usually including tests of vocational aptitude or preference, education and basic skills level, and mental or physical health. In addition to these standardized tests, some sites reported designing their intake and assessment processes to determine whether applicants

were sufficiently motivated. For example, if an applicant could not arrive on time each day for assessment, there was little likelihood they would be able to do so during the training period, or for subsequent employment. By Phase 3, at least half of the sites had intensified their assessment of drug and alcohol abuse through interviews, meetings with substance abuse counselors, and/or formal assessment instruments. Most sites refused admission to individuals with active chemical dependencies until they had addressed that problem.

By Phase 3, sites began to vary significantly in the ways in which they used intake and assessment data. Some sites conducted extensive assessment prior to determining whether to accept an applicant, thereby limiting services to those clients most likely to benefit from them. Others accepted applicants more readily and reserved assessment until after enrollment. The one program designed to serve only mentally ill homeless persons administered no assessment or functional tests; rather, staff attempted to build personal relationships with prospective clients and to determine motivation and employability through those relationships. A few sites used “situational” assessments to test appropriateness for vocational skills training. For example, Project Worth, the Jefferson County (KY) Public School’s JTHDP program, required all participants interested in commercial drivers’ license certification to complete a battery of situational assessment tests. The assessment not only included basic skills tests related to the training program but tests of eye-hand coordination and reaction time. Specific minimum scores were required in each area of the situational assessment before an individual would be accepted into the training program. This assessment enabled applicants to understand the skills required for commercial driving, e.g., truck driving, before a large investment was made in training, as well as provided program staff with job-specific feedback on the applicant. A positive by-product of a

more rigorous assessment process was that the sites tended to develop wide-ranging referral networks so they could direct inappropriate applicants to other agencies better able to meet their needs. Individuals referred to other service providers who succeeded in addressing their barriers to program participation (e.g., an active chemical dependency) were generally permitted by sites to re-apply to the JTHDP program.

Increasingly, programs became committed to ongoing client assessment because participant service needs often changed once participants began receiving services or as new problems arose (e.g., loss of day care, illness, or car problems). JTHDP sites found that questions relating to the individual's circumstances and service requirements needed to be asked periodically, and the case plan updated accordingly.

2. Case Management and Employability Development Planning

Case management is a client-centered, goal-oriented process for assessing participants' needs and helping them obtain the services needed to overcome barriers to employment and achieve long-term self-sufficiency. Pivotal to an effective case management system is establishing a trusting relationship between the case manager and the participant -- a relationship that is especially important for homeless individuals who, in many cases, have few ties to the traditional support systems of family and friends. JTHDP sites found early on that the relationship afforded through an effective case management system could make a critical difference in whether a homeless person secured and retained employment, as evidenced by the following findings from the Home Builders Institute's (HBI) site-level evaluation report:

...Homeless people need extensive and varied social and housing services beyond those required by typical economically disadvantaged JTPA Title II-A clients. HEART [HBI's JTHDP program] program retention, completion, and job retention statistics rose dramatically when HBI moved to full-time contracted case management during the 1991-92 program year.³

As grantees gained experience in working with homeless individuals and families, they increased their emphasis on case management and established a specific process for case managing participants to ensure that they received the services needed to achieve their employment and personal goals. For example, while the Jackson Employment Center did not mention case management in their description of Phase 2 services, by Phase 4, case management was described as:

...The framework that holds these often diverse elements -- a full array of services that go beyond employment and training activities, including universal shelter, transportation and extensive support services -- together is controlled by case management and depends on adherence to case plans.⁴

Three-fourths of the 21 sites involved in Phases 3 and 4 assigned each participant to a single case manager who coordinated services and served as an advocate for the participant from intake through postplacement. The remaining sites used a team concept in which participants had several different agency staff responsible for guiding and monitoring client progress during different aspects of the intervention. Regardless of how sites managed their caseload, there was general agreement that successful client outcomes hinged upon each participant having a well-developed case plan and good channels of communication and coordination among staff and agencies involved in serving the participant.

³Home Builders' Institute, JTHDP Site Level Evaluation Report, 1995.

⁴Jackson Employment Center, JTHDP Site Level Evaluation Report, 1995.

JTHDP sites found that it was important to keep the case manager/client ratio low enough that the case manager had time to get to know and maintain regular contact with each client and to be flexible enough to devote additional time to a client when unforeseen needs arose. By Phase 3, case managers at most sites maintained at least weekly or bi-weekly contact with their assigned clients -- with more frequent interaction during the initial weeks of the client's participation in the program and at points of crisis or transition. Average caseloads ranged from 15 to 30 active cases per case manager, compared to a range of 10 to 70 cases per case manager in the earlier phases of the demonstration.

3. Education and Training Services

Education and training services are designed to address skill deficiencies and upgrade the long-term employability of program participants. The McKinney legislation authorized provision of the following education and training services: (a) remedial education, basic skills training, and literacy instruction, (b) job search and job preparatory training, (c) job counseling, (d) vocational and occupational skills training, (e) on-the-job training, and (f) work experience. In response to the immediate needs of many of their homeless clients, JTHDP sites tended to emphasize job search assistance, job preparatory training (including job clubs), and job counseling. In comparison to JTPA, there was considerably less emphasis on occupational skills training under JTHDP (with the exception of a few sites, such as the Boys and Girls Club, MCDI, the Home Builders Institute, and the Knox County Community Action Committee). However, during JTHDP's final phase, with its emphasis on partnering with the JTPA system, there was an increase in referrals to JTPA for occupational skills training.

Exhibit 3-1 illustrate the proportion of participants receiving education and training services under JTHDP for Phases 3 and 4.⁵ As is shown in the exhibit, and discussed in greater detail in the sections that follow, job search assistance (received by 74 percent of participants) and job counseling (received by 70 percent of participants) were the most frequently utilized services by JTHDP participants. Slightly less than one-fourth of participants received remedial education, basic skills training, or literacy instruction (23 percent) or vocational/occupational skills training (21 percent). In comparison, while the same percentage of JTPA Title II-A adult terminees as JTHDP participants received basic skills training (23 percent), a much higher percentage of Title II-A terminees received occupational skills training (59 percent).⁶

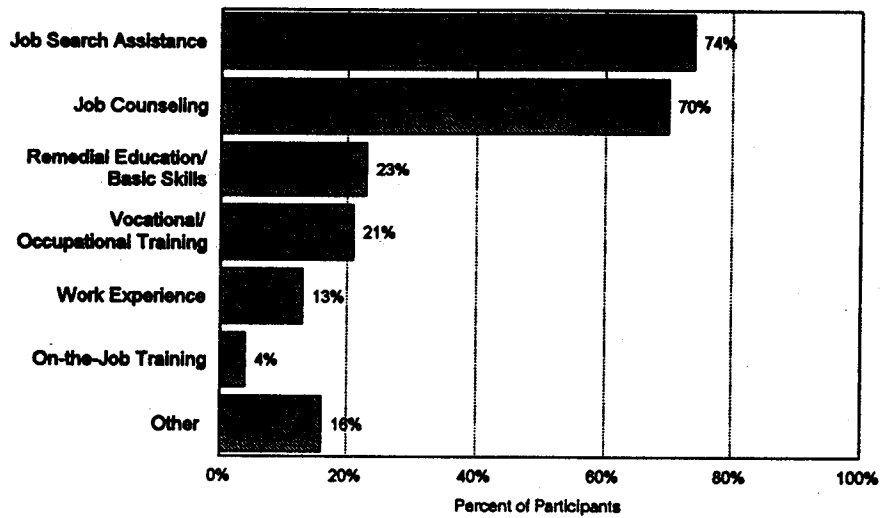
Emphasis on short-term and intensive employment and training services in most sites was also reflected in the average hours of training that participants.⁷ Exhibit 3-2 shows that most participants received relatively short-term training services under JTHDP. About 60 percent of those who received training services under JTHDP were involved in less than 50 hours of training -- with 39 percent receiving 24 hours or less of training services. About 30 percent of JTHDP participants received 100 or more hours of training under JTHDP; 10 percent received 300 or more hours of training. The average was 125 hours of training among participants receiving one

⁵Reliable data on the percentage of participants receiving various types of JTHDP services were not available before Phase 3.

⁶Based on PY 1994 (July 1, 1994 - June 30, 1995) JTPA Standardized Program Information Report (SPIR) data for Title II-A terminees who received services beyond objective assessment, as reported by DOL/ETA.

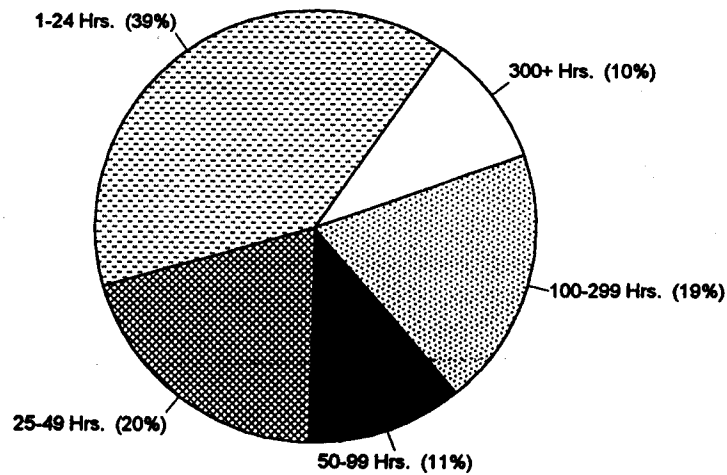
⁷During two grant years under Phase 3, case managers recorded in the CCIP the estimated number of hours of training services clients received between the dates of enrollment and termination from JTHDP. Data on the number of training hours were available for 86 percent of the 9,559 individuals trained during these two grant years.

**Exhibit 3-1:
Percentage of JTHDP Participants Receiving Training Services**



Source: CCIP for individuals served during Phases 3 and 4 (N = 13,893).

**Exhibit 3-2:
Estimated Hours of Training Services
Received by JTHDP Participants**



Source: CCIP for individuals served during Phase 3 (N = 7,924).

or more hours of training services.⁸ In contrast, the average hours of training received by JTPA Title II-A adult terminees was 400 hours.⁹

The sections that follow highlight the varying approaches and strategies used by JTHDP sites in their provision of training services under JTHDP.

Remedial Education, Basic Skills Training, and Literacy Instruction. Remedial education, basic skills training, and literacy instruction included instruction in reading comprehension, math computation, language arts, problem-solving, reasoning skills, and English as a second language (ESL). This type of instruction is intended to build basic skills to enhance employability and the capability of individuals to undertake vocational training. Although many JTHDP participants needed basic skills training (e.g., almost 40 percent had not completed the 12th grade), relatively few participants expressed a strong preference for this type of training. Overall, about one-fourth (23 percent) of JTHDP participants received some form of remedial education, basic skills training, or literacy instruction (see Exhibit 3-1, earlier). There were considerable differences across sites in terms of the proportion of participants receiving basic skills training -- ranging from 91 percent of participants at the Boys and Girls Club and 66 percent at Jefferson County Public Schools, to 3 percent or less at four sites.

JTHDP participants were often reluctant to enter into long-term commitments to upgrade

⁸Sites also estimated the average weeks of training that they provided for their aggregate quarterly reporting to DOL. The methodologies used, however, varied substantially across sites, and the estimates provided could not be verified. During Phase 4, among the 18 sites for which data were available, the (mean) average was 16 weeks of training (with a median of 11.5 weeks) for each individual trained under JTHDP.

⁹Based on PY 1995 (July 1, 1995 - June 30, 1996) JTPA Standardized Program Information Report (SPIR) data for Title II-A terminees who received services beyond objective assessment, as reported by DOL/ETA.

their basic skills and literacy, at least until they had secured some type of work and shelter. Yet, it was their lack of basic skills that often needed to be addressed before a good job could be secured. As sites gained experience in working with their target populations, they placed more emphasis on testing for basic skills deficiencies during the assessment process and implemented more flexible strategies to bring remedial education and basic skills training to their participants.

For example, sites increasingly:

- provided a wide variety of academic training settings and flexible training times for basic skills instruction;
- offered individually-paced and computer-assisted instruction;
- linked remediation efforts to knowledge/skills needed for jobs or to enter vocational training;
- offered concurrent remedial education training and occupational skills training -- JTHDP sites typically found that participants were more receptive to remedial education when it was offered in conjunction with occupational skills training; and
- established more stringent academic standards for entry into longer-term occupational/vocational training.

JTHDP sites provided remedial education services to participants directly or through referrals to other agencies. Many sites took advantage of local agencies and service providers specializing in literacy, basic skills, and ESL instruction, such as local public schools, community colleges, and PICs.

Job Search and Job Counseling. Job search assistance and job counseling -- designed to assist an individual in developing and enhancing his/her job seeking skills -- were the most frequently provided training services under JTHDP. As shown earlier in Exhibit 3-1, nearly three in four JTHDP participants received job search assistance/job preparation training (74 percent) or

job counseling (70 percent). With the exception of one site, all JTHDP sites (during Phases 3 and 4) provided some form of job search assistance/job preparation training for over half of their participants, with five sites providing this type of assistance for over 90 percent of participants.

While sites defined job search assistance/job preparation training differently, this type of training service typically involved three- to five-day workshops followed by on-going individual or group support and assistance. The job search workshops typically focussed on: (1) identifying participant skills, interests, and needs; (2) building self-esteem; and (3) preparing for effective job searches (including role playing for job interviews and developing a resume). In structuring these workshops, sites found it was important not only to cover materials related to effective job search strategies, but also to address a range of other issues that affected participants' employability and job retention, such as personal hygiene, appropriate dress and mannerisms, motivation, employer expectations, appropriate work habits, and work-related interpersonal relationships. Workshops were directed at teaching participants how to market themselves to employers, as well as at improving participants' feeling of self-worth and heightening motivation.

Immediately following job search/job preparation workshops, sites typically provided job search assistance and job counseling to help participants find a job. This type of assistance usually consisted of informal individual or group meetings where JTHDP staff and participants shared job leads and resources, and provided support for one another. The approach to providing job search assistance and counseling at the Center for Independent Living (in Berkeley, CA) was similar to the approach adopted at other JTHDP sites:

...After a two-day job preparation workshop, the Center for Independent Living (CIL) had a daily job club organized and led by staff. The job club allowed for continuing peer support and was designed to counter the isolation and rejection clients experienced during

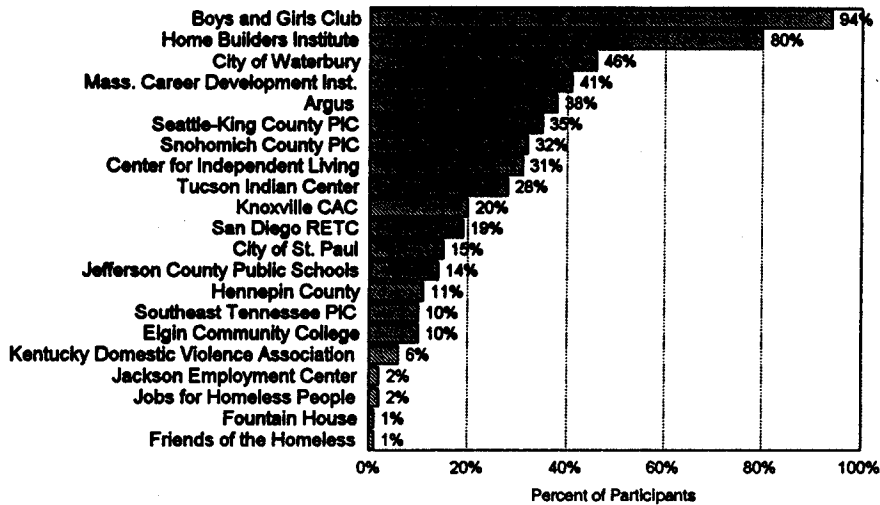
their job searches. During these job clubs, clients developed additional targeted resumes and cover letters, and received direct assistance from CIL staff with their job searches. CIL determined that a daily job club was better able to satisfy the needs of clients for job leads and for helping target resumes and cover letters.¹⁰

Occupational Skills Training. All JTHDP sites offered some form of occupational skills training, either directly or through referral to other training providers. Although many grantees indicated a preference for vocational training because it offered participants a greater likelihood of future employment stability and earnings growth, few sites were able to direct substantial numbers of participants into longer term training because of their immediate income needs and limitations on shelter stays. As displayed earlier (in Exhibit 3-1), about one-fifth (21 percent) of JTHDP participants received occupational/vocational training. Although some training was short-term, and in some cases involved referrals to JTPA, in most instances training was short in nature, such as eight-week Certified Nurses' Assistant training or 25-week training for building trades certification. Vocational and occupational skills training typically incorporated classroom and "hands-on" training.

As shown in Exhibit 3-3, only two JTHDP sites during Phases 3 and 4 -- the Home Builders Institute (with 80 percent of participants entering vocational training) and the Boys and Girls Club (94 percent) -- provided occupational skills training for more than half of their participants. In contrast, five sites provided occupational skills training for less than 10 percent of their participants. Several sites -- notably, the Home Builders Institute, the Boys and Girls Club, MCDI, and several PIC-sponsored sites -- provided occupational training services directly for their JTHDP participants. For the most part, though, occupational skills training was delivered

¹⁰Center for Independent Living, Site Level Evaluation Reports, 1995.

**Exhibit 3-3:
Percentage of JTHDP Participants Receiving
Vocational/Occupational Training Services by Site**



Source: CCIP for individuals served during Phases 3 and 4 (N varies by site).

through referral of participants to JTPA, community colleges, and proprietary schools. Some JTHDP sites reported difficulty in accessing JTPA-sponsored training for their participants because of concerns on the part of some SDAs that JTHDP participants were not appropriate for occupational training.

Sites most successful in assisting homeless participants to enter occupational skills training attributed the following key factors to their success:

- Tailoring occupational skills training to the interests and needs of individual participants, as well as the local demands of the labor market. These strategies included: (1) assisting those clients seeking part-time employment to do so in conjunction with a skills training program; (2) having available open-entry training programs; (3) offering training courses in the day as well as evening; and (4) offering "compressed" training options, i.e., courses offered for more hours over a shorter period of time.
- Developing linkages with a wide variety of education and training providers,

especially those providing short-term and open-ended training.

- **Securing agreements with shelter and housing providers to extend housing stays or give priority to those enrolled in training.**
- **Making sure homeless participants have all the necessary supports in place prior to entering and throughout training. Many sites stressed the importance of providing case management to troubleshoot problems that participants may face while in training.**

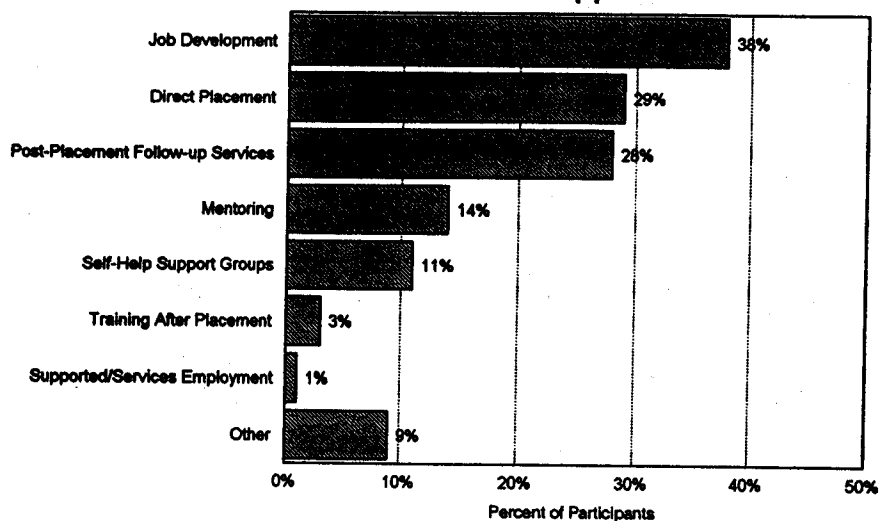
On-the-Job Training. OJT provided the opportunity for participants to learn job-related skills, while at the same time earning wages. Despite this advantage, just 4 percent of participants (during Phases 3 and 4) were involved in OJT placements across all sites. Only two sites during these phases -- the Home Builders Institute (22 percent) and the Boys and Girls Club (10 percent) -- placed 10 percent or more of their participants in OJT. Program sites offering OJT did so either through: (1) linkages with their local PIC/SDA, which enabled participants to access JTPA OJT placements, (2) direct relationships the JTHDP program or their trainers had with local businesses, or (3) efforts by participants to find and structure their own OJT slots. For example, the staff of the Boys and Girls Club negotiated over 60 OJT slots with local employers (including a major hotel chain, an insurance company, and a printing firm).

Work Experience/Transitional Employment. Work experience under JTHDP offered participants opportunities to gain confidence in their abilities to function within the workplace, learn or apply new job skills in a work setting, rebuild or add to their work experience, and gain job references to eventually bridge the gap to permanent, unsubsidized employment. Program sites found that work experience was a particularly effective strategy for homeless individuals who otherwise would have been unlikely to secure jobs within the competitive labor market (e.g., displaced homemakers) and for those facing formidable barriers to employment (e.g., chronic

mental illness, ex-offenders).

During Phases 3 and 4, about 13 percent of JTHDP participants were involved in some form of work experience or transitional employment. Two JTHDP sites relied heavily upon work experience. One of those sites, Argus Community -- a therapeutic community located in the Bronx, NY serving chemically dependent and/or chronically mentally ill homeless individuals -- provided work experience for all of its participants. As part of its approach, participants worked at various jobs for several months at Argus, including a greenhouse, a printing office, and a vinegar processing operation, before being placed outside the community in an unsubsidized job. A second site, Fountain House -- serving only chronically mentally-ill individuals -- provided its participants with temporary jobs at its own facility (e.g., assisting with food preparation/serving in the cafeteria, taking care of indoor plants, assisting with mass mailings). When individuals proved themselves ready for outside work through their efforts at the facility, Fountain House job developers would place these individuals in temporary job slots reserved at local employers for their participants. Participants could remain with a specific job placement (which paid an unsubsidized wage) for up to six months, and then had to move to another temporary job position maintained by Fountain House. Alternatively, if ready, the participant could seek employment within the general labor market with a local employer. Fountain House was able to secure numerous long-lasting work experience slots for its participants because: (1) program staff trained each worker the first several days of each placement to ensure the worker understood his/her responsibilities; (2) firms providing work experience positions were guaranteed that a specific number of workers would be at the job site each day even if it meant that a Fountain House staff would have to perform the job as a substitute; and (3) Fountain House case managers

**Exhibit 3-4:
Percentage of JTHDP Participants Receiving
Placement/Post-Placement Support Services**



Source: CCIP for individuals served during Phases 3 and 4 (N = 13,893).

maintained constant communication with each work site and with each participant to ensure that the employer's needs were being met.

4. Job Development and Postplacement Services

Job Development. Exhibit 3-4 displays selected job placement and postplacement services provided by JTHDP sites and the proportion of participants receiving each service. As shown in the exhibit, 38 percent of Phases 3 and 4 participants received job development services and 29 percent received direct job placement services. All JTHDP sites provided job placement assistance, but the strategies employed varied considerably across sites. Some sites were very active in terms of job development activities; other sites felt it was advantageous for participants to conduct their own job searches and reserved job development activities for the few who were

unable to find jobs on their own. Some JTHDP sites approached placement assistance with the goal of assisting participants to secure any job. These sites believed that any job was better than no job, based on the theory that homeless individuals needed to develop work habits, build a resume, and earn enough income to begin to stabilize their lives; higher-quality jobs (with health insurance, advancement potential, and in-service training opportunities) could come later. Other sites emphasized finding better jobs with health benefits and career paths, fearing that minimum wage jobs would be “dead ends” which would not provide the individual with enough resources to achieve self-sufficiency over the long-term.

By JTHDP’s final phase, almost two-thirds of the JTHDP sites had designated one or more staff members to work primarily on job development and placement; in the remainder of the sites, case managers or other agencies, such as SDAs/PICs and vocational schools, with which the participant was involved had job development responsibilities. Earlier in the demonstration, JTHDP sites provided job development services, but few assigned staff primarily to that task.

Postplacement Services. Postplacement services were designed to ensure a smooth transition from training to employment and to provide needed support to assure job retention. JTHDP sites found this extended support to be particularly critical for homeless individuals, many of whom had moved from job to job in the past and had few support systems. During Phases 3 and 4, 64 percent of those participants placed in jobs received some form of postplacement services. Postplacement services included postplacement follow-up (received by 53 percent of placed participants), mentoring programs (20 percent of placed participants), self-help support groups (11 percent of placed participants), and training after placement (received by 5 percent of placed participants). Postplacement follow-up was conducted by sites generally with the

participant, though in some cases contact was also made with the employer. Follow-up consisted of telephone or in-person contact at the participant's place of employment, or his or her residence.

As JTHDP sites gained experience, they intensified postplacement services and instituted new postplacement strategies in an effort to increase job retention and long-term self-sufficiency. Overall, participants receiving postplacement services had a 78 percent retention rate, only exceeded by those receiving permanent housing assistance, with an 80 percent retention rate. Nearly all the Phase 4 sites encouraged employed participants to attend postplacement support groups or had strong postplacement mentoring components. Case managers or job counselors maintained contact with employed participants on a periodic basis for 13 weeks after placement at all Phase 4 sites, and for up to six months or longer at four sites. They generally reported having weekly contact through the first month of employment, and then less frequent contact over the remaining follow-up period. Some sites provided problem-solving and mediation services when participants ran into problems at work. Other sites continued their financial support services for participants who began working or tied housing upgrades to continued employment. The following provides three examples of postplacement services:

...Project Uplift of the Boys and Girls Club in Washington, D.C. took a two-pronged approach to follow-up support. The job developer and job coach provided the following postplacement services: employment counseling; conflict resolution on the job with employers and other workers; and assistance with job productivity, grievances, and dismissals. In addition, the case management team had the responsibility for all post-placement services other than employment-related issues. This included: housing assistance; counseling for participants and family members; food, clothing, and transportation assistance; referrals for health services including mental health; day care assistance; and other general assistance needs.

...Hennepin County Training and Employment Assistance Program in Minnesota found support groups to correlate highly with job retention. Group facilitators guided discussion and encouraged sharing. Topics of discussion included the transition off of public

assistance, challenges encountered on the work site, financial management strategies, tips for securing housing, parenting education, and ongoing support for substance abuse problems.

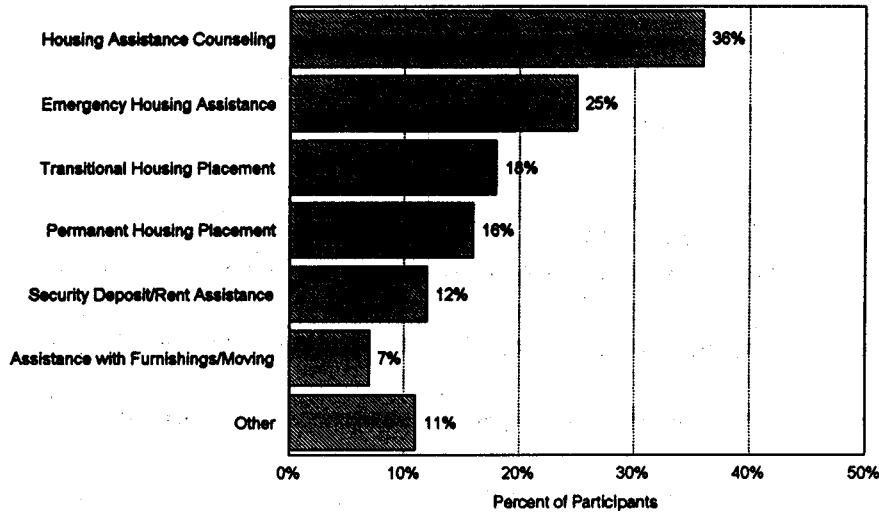
...The Washington, D.C.-based Jobs for Homeless People's (JHP) mentoring program matched volunteer mentors with participants after they were employed. Mentors committed to spending three to four hours a month in contact with the participant for a period of three months, primarily in a supportive role, listening and responding to participant problems. JHP's Resources Director matched each mentor with a participant, trained the mentors, and was on call for any questions or problems they had. More than 70 volunteers signed up as mentors and helped to improving job retention.

Finally, some other types of postplacement assistance provided by JTHDP sites included: transportation assistance, stipends to assist participants until they received their first pay check, coaching on work place behaviors, replacement job leads, and housing assistance.

5. Housing Services

Either directly or through referrals, JTHDP sites provided a wide array of housing assistance services, which varied substantially across sites, such as: operation of shelters, transitional housing, or group homes; referrals to providers of such housing; housing counseling and home management skills training; financial assistance with move-in expenses or rent; mediation with landlords; and involvement in affordable housing development within local communities. Exhibit 3-5 shows housing assistance services available through JTHDP and the percentage of participants receiving each service. Overall, almost two-thirds of the participants received one or more housing services during Phases 3 and 4. As shown in the exhibit, the most frequently received housing services were housing assistance counseling (36 percent of JTHDP participants received this service), emergency housing assistance (25 percent), transitional housing placement (18 percent), and permanent housing placement (16 percent).

**Exhibit 3-5:
Percentage of JTHDP Participants Receiving Housing Services**



Source: CCIP for individuals served during Phases 3 and 4 (N = 13,893).

JTHDP experience underscored the importance of understanding and effectively addressing each homeless individual's housing situation before they entered education, training, and employment. Demonstration sites found that given the cost of providing housing assistance and the housing options necessary to meet the varying needs of their participants, strong linkages were needed with a variety of housing assistance providers in their locality. Beginning in Phase 3 of the demonstration, DOL required grantees to develop comprehensive housing intervention strategies as a condition of grant renewal. This requirement grew out of the belief that there was a correlation between stable housing and stable employment. As a result, after Phase 2, every JTHDP site provided, either directly or through contract, each of the following services: housing assistance counseling, emergency housing assistance, transitional housing placements, and financial assistance with security deposits and initial rental payments. For example, half of the 21

sites (after Phase 2) operated their own emergency shelters and/or transitional housing, and three sites were co-located within a shelter or had arranged for emergency and transitional housing slots for program participants. Two projects whose target populations were chronically mentally ill individuals and/or chemically dependent individuals operated residential centers or therapeutic communities for people with those conditions. The remainder of the sites continued to extend their shelter referral networks and seek special arrangements with shelter and other housing providers. Another trend as sites gained experience was an increase in the number of sites hiring housing coordinators or arranging for housing expertise to be available to case managers and participants. As a result, staff began helping participants establish housing goals and strategies as a part of the employability development planning process.

A DOL/HUD Memorandum of Understanding,¹¹ together with DOL's requirement that housing services be provided, spurred eight Phase 3 sites to develop formal agreements and eight others to develop informal agreements with their public housing authority -- generally involving housing set-asides or improved access for participants. Despite these accomplishments, a number of the sites indicated problems with the Memorandum of Understanding, both because procedures were not fully specified and staff at some public housing authorities were not aware of its provisions. Even under the best circumstances, most JTHDP sites found public housing authorities limited in the number of available public housing units. For instance, one site reported that there was a two-year wait for public housing units in their locality; others reported difficulties in locating subsidized units for single males.

¹¹DOL/ETA and HUD negotiated a Memorandum of Understanding, which was intended to assist JTHDP grantees with obtaining housing assistance from local housing authorities for JTHDP participants. Appendix F provides a copy of the memorandum.

6. Support Services

JTHDP projects had to provide a flexible array of support services to enable their homeless participants to benefit from employment-related services. As discussed in Chapter 2, homeless individuals seeking services came to the program facing different barriers to employment, many of which were not directly employment-related. For example, barriers could include the lack of a stable residence, chemical dependency problems, lack of transportation, lack of day care, and health issues. To foster job placement and retention, JTHDP sites offered support services to assist participants in working through these barriers. Projects provided support services directly with JTHDP funds or with other public and private funds. Grantees also used cooperative agreements, referral networks, in-kind contributions, and other strategies to help meet participant needs.

JTHDP sites found it necessary to assess support service needs on an ongoing basis as the service needs of participants changed. For example, as participants moved from emergency shelters to transitional housing and from transitional to permanent housing, different support service needs typically arose. While in emergency shelters, participants typically had limited access to telephones, making call backs from employers and landlords difficult. While in transitional housing, participants typically had access to telephones, but often needed assistance juggling their training and/or employment schedules around their transitional housing programs' schedule requirements. Those in permanent housing had to find furniture and other household goods not needed in emergency shelters or transitional facilities. Types of assistance needed when individuals were engaged in job preparation workshops and job search efforts (e.g., purchase of clothes for interviews, transportation assistance to go to job interviews, and help with securing

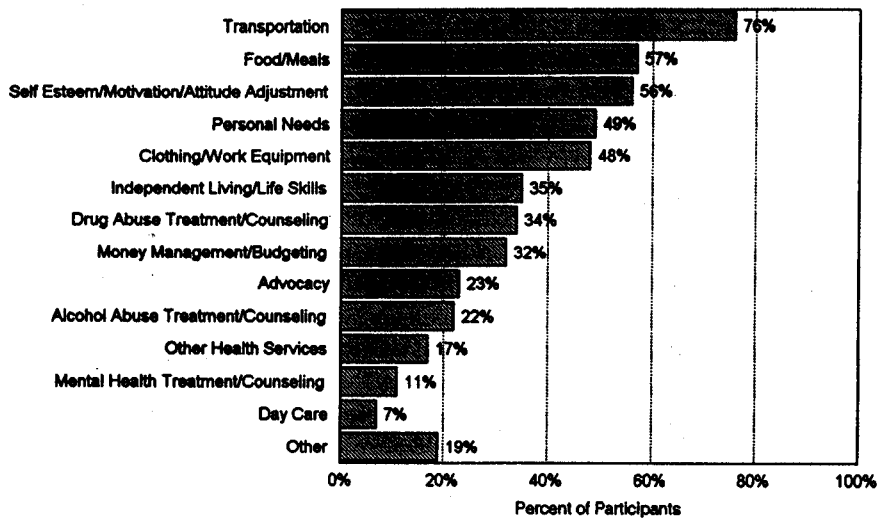
tools/equipment to start a job) changed once an individual was employed and had a regular pay check.

One of the areas in which JTHDP sites became more proficient as the demonstration proceeded was in referring participants to other human service agencies to obtain support services for which they were eligible. Sites became more aware of the varied resources available within their localities where they could refer clients for free or low-cost assistance (e.g., local food banks, low-cost providers of dental care and eyeglasses, and providers of second-hand clothing and work equipment). With respect to long-term occupational training, sites found that assisting participants to qualify for training loans/grants (e.g., JTPA Title II-A training assistance or Pell grants to support community college training) and other types of income support and health service programs often made the critical difference in individuals completing long-term training and overcoming their homeless situation.

As shown in Exhibit 3-6, transportation was the most widely used support service, with 76 percent of participants receiving this service. Sites made transportation to shelters, training, and jobs available through project-operated vans and buses, as well as issuance of public transportation passes or tokens. As illustrated in the exhibit, provision of food or meals was the second most frequently provided service, with 57 percent of participants receiving this service. Food services were closely followed by self-esteem/motivational training, with 56 percent of participants receiving this service. Sites made other support services available either directly or through referral to other local service providers, such as:

- clothing/work equipment (received by 48 percent of participants);

**Exhibit 3-6:
Percentage of JTHDP Participants Receiving Support Services**



Source: CCIP for individuals served during Phases 3 and 4 (N = 13,893).

- the provision of goods and services such as toothbrushes, shampoo, false teeth, eyeglasses, and showers/laundry services (49 percent);
- assistance with independent living/life skills, which involved individual counseling or group training related to coping and resolving everyday problems associated with living, working, using public transportation, following directions, and finding a place to live (35 percent);
- money management/budgeting counseling, involving one-on-one counseling or group workshops (32 percent);
- provision or referral to drug abuse treatment/counseling (34 percent), alcohol abuse treatment/counseling (22 percent), and/or mental health treatment/counseling (11 percent); and
- referral for day care services (7 percent).

With respect to drug abuse, alcohol abuse, and mental health treatment/counseling, some sites reported difficulty and/or lengthy delays in obtaining referrals for the types of long-term treatment

and counseling that some participants needed. This inability to access needed services impeded clients' progress and, in some cases, prevented clients from benefiting from program participation.

C. PROGRAM COORDINATION UNDER JTHDP

1. Scope and Characteristics of Linkages

Linkages with a wide range of community resources represented a logical and essential strategy for meeting the varied needs of the people served by JTHDP projects. Early on in the demonstration effort, JTHDP sites found they neither had the expertise nor the resources to meet the full spectrum of needs of the homeless population they served. Sites found that the individuals and families entering the program were homeless for a variety of reasons and faced a wide array of (and often multiple) obstacles to employment. With limited resources and staff, JTHDP programs needed to provide a wide range of employment-related services (e.g., work readiness, education, and training services; and job search, placement, and postplacement support) tailored to meet the specific needs of each homeless individual. They also needed to provide or arrange for housing and support services to address a variety of other underlying conditions and problems associated with homelessness -- including provision of emergency, transitional, and permanent housing services; mental and physical health services; and chemical dependency assessment and treatment.

There was great variety among JTHDP sites in the types of services provided through linkages and in the structure of these arrangements. Throughout the demonstration effort, the most common types of services provided through linkages with other agencies were housing and support services (with many sites providing employment and training services directly). Nearly all

Phase 2 sites and all Phases 3 and 4 sites used linkages to provide or enhance the availability of these housing and support services.

Common elements of effective linkages identified early in the demonstration continued to hold true throughout the demonstration effort: (1) use of the case manager as an advocate working on behalf of the client, (2) frequent and regular communication with linked agencies, (3) diligent follow-up once the linkage is established, and (4) flexibility and willingness to modify linkage arrangements. As the demonstration proceeded, JTHDP sites moved toward a more sophisticated understanding of coordination. Whereas many of the earlier linkages had been developed informally by individual case managers on an ad hoc basis, linkages were increasingly formalized through written agreement as the demonstration effort continued. As the following examples illustrate, effective linkages were developed by JTHDP sites, regardless of whether the grantee was primarily focused on training and employment, on shelter and housing, or on some other service need:

...The City of St. Paul's Project Decisions, which was run by the city's job training agency, contracted with two agencies for case management and other program services. Project Decisions supported these agencies in their efforts through convening formal monthly meetings with all service-providing agencies and held additional meetings as needed. Project Decisions also ran joint training for its subcontractors.

...The Seattle-King County PIC's Homeless Initiatives Pilot Project (HIPP) based its coordination strategy on staff relationships across agencies, supported by formal interagency agreements. HIPP was designed as a partnership project, with four different training and placement programs run by four partner agencies. Regular coordination meetings among case managers in the four agencies ensured uniformity of case management philosophy. PIC staff developed other community linkages with agencies such as local housing authorities and business organizations that were made available to case managers in all four partner agencies. The Seattle PIC's close coordination enabled HIPP to move toward implementation of a uniform assessment process across all its partners.

...The Jefferson County Public School's Project WORTH (Work Opportunity Readiness for The Homeless) was operated through the Adult and Continuing Education Division. Because of its education focus, Project WORTH had to "begin from scratch" to develop both housing and employment linkages. Project WORTH's leadership role in Louisville's Coalition for the Homeless was of major importance; Coalition member agencies viewed Project WORTH to be their link with education and job training, and Project WORTH established linkages with housing resources through the Coalition.

The common thread running through these three examples -- and through the other most effective JTHDP projects -- was a strong cadre of well-trained case managers who "worked the system of linkages" on behalf of their clients. Ultimately, linkages are of little use unless accessed appropriately by case managers and program participants.

2. Barriers to Coordination of Services

Most coordination efforts encounter some barriers during planning and implementation. These generally involve legal requirements, administrative arrangements, and other factors such as turf and personality issues. Turf problems were particularly relevant to JTHDP, because the needs of homeless people cut across traditional agency boundaries. Conversely, because JTHDP was a demonstration program with considerable flexibility in use of its funds, local projects faced few legal or funding barriers to coordination of services. In fact, flexibility in funding enhanced both participant outcomes and coordination -- a common example was the use of project funds to pay security deposits and other move-in costs, thus enhancing the potential for coordination between JTHDP and housing providers (both nonprofit and for-profit). Administrative barriers of potential partners, on the other hand, sometimes limited the ability of JTHDP sites to link with other local service providers. Some of the barriers and problems encountered by sites in establishing and maintaining linkages are highlighted below.

Difficulty in Working with Staff from Other Agencies. Interagency linkages can be inhibited for a number of reasons. This problem is not unique to JTHDP, but is common in the JTPA coordination experience as well. One difficulty experienced by some JTHDP sites in working with other agencies was differences in agency mission. For example, while for a JTHDP site, high quality training and successful employment may be the primary goal for its program, a housing agency it desires to link with may be exclusively focused on building and maintaining public housing units. Other examples include chemical dependency programs (in which "staying clean" is the ultimate objective), welfare-to-work programs (in which long-term improvement of education/skills may vie with a JTHDP program's emphasis on and participants' desire for job placement), and therapeutic organizations (where the goal of a sheltered work situation may contrast with JTHDP's emphasis on unsubsidized employment).

Lack of knowledge of linked agencies' procedures and processes was another frequently reported barrier to coordination. JTHDP programs, with an employment and training orientation, reported particular difficulties mastering the complications of subsidized housing programs and the housing industry in general. On the other hand, for JTHDP projects run by housing-oriented agencies, it was a challenge to learn how to link with training resources. One way in which some projects addressed these problems was through sponsorship of joint training for agency administrators and staff. Other difficulties between JTHDP staff and other agency staff, such as multiple case managers seeking primacy over clients, were reduced by continued communication efforts over time.

Local Implications of the DOL/HUD Memorandum of Understanding. Although JTHDP grantee staff welcomed the DOL/HUD Memorandum of Understanding (MOU), some

found that it did not always open the doors to local housing authorities as expected. Generally, this was because some housing agencies were unaware of the MOU and continued to operate on a "business as usual" basis. Many sites found that local housing authorities had long waiting lists for public housing units and Section 8 certificates. Sites that were able to negotiate formal agreements with local housing authorities attributed their success primarily to persistent negotiating.

Time Required to Plan and Implement Coordination. Those projects that were able to establish an effective and coordinated service delivery system with other agencies found it necessary to devote a great deal of time to developing those systems. And, they needed to continue to invest time in maintaining their relationships and to negotiate changes in the relationship over time. Both the City of St. Paul's Project Decisions and Seattle-King County's Homeless Initiative Pilot Project convened monthly meetings of coordinating agencies for troubleshooting and communication purposes, and convened interagency case manager meetings as well. Directors of both of those projects acknowledged that the time spent on coordination was substantial, but worthwhile.

Staff Turnover. Staff turnover is a particular barrier to coordination in a case management system, particularly when the case manager is key to creating a tailored service package. Those sites in which coordination was largely informal suffered the most from high staff turnover, because new staff had to spend large amounts of time building personal relationships with their counterparts in other agencies. However, even where formal agreements existed, new staff inevitably needed to establish their own personal relationships with staff in other agencies, albeit within the framework of a formal interagency relationship that made their task easier.

D. SUMMARY

Although tailoring services to meet the needs of the population they served, each JTHDP site offered a core set of services, including: recruitment, intake, assessment, case management, education and training services, placement and postplacement services, housing services, and other support services. Service delivery strategies changed considerably over the course of the demonstration effort as sites built on their own experiences. For example, sites moved from recruiting homeless individuals from parks and soup kitchens where homeless individuals congregated to recruiting through homeless-serving agencies (e.g., such as emergency and transitional housing facilities, substance abuse programs) and other human service agencies in their locality. As the demonstration proceeded, sites also used more sophisticated and thorough client assessments; refined their case management systems; developed more extensive and formal linkages with housing and other service providers; and added and expanded postplacement services to increase the likelihood of long-term job retention.

Throughout the demonstration, each JTHDP site offered case management to coordinate services and advocate for participants. Generally, sites assigned each participant to a case manager, who provided guidance and advise, referred the participant to needed services within and outside the sponsoring agency, and monitored the individual's progress toward meeting his or her objectives. There was consensus across program sites that successful client outcomes hinged upon each participant having a well-developed case plan, as well as good channels of communication and coordination among staff and agencies involved in serving the participant.

The types of education and training services offered varied across sites. In response to the immediate needs for income and shelter of many homeless participants, sites generally focused on

short-term training, with job search assistance and job counseling the most frequently used employment and training services. Housing services were also important to stable employment. Realizing this link, DOL and HUD developed a Memorandum of Understanding to assist JTHDP grantees with obtaining housing assistance from local housing authorities and, beginning in Phase 3, DOL required sites to develop comprehensive housing intervention strategies as a condition of grant renewal. Finally, JTHDP sites provided a broad array of support services to meet the varied needs of participants. The most frequently used support services included transportation, food and meals, and self-esteem/motivational training -- all received by more than half of JTHDP participants.

To provide this range of services, JTHDP sites formed linkages with agencies in their localities. Sites varied in their approach, the types of services obtained through linkages, and in the number of agencies with which they were linked. As the demonstration progressed, though, JTHDP grantees moved to more formalized and extensive linkages. The programs reporting the most successful linkages attributed their success to the time and effort devoted to developing and maintaining the linkage, e.g., monthly meetings with partner agency staff, and the specificity of the coordination agreement.

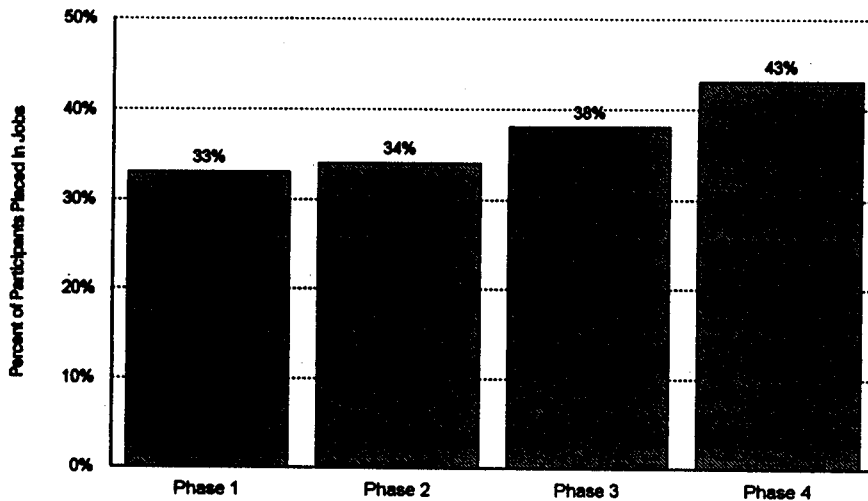
CHAPTER 4:

PROGRAM AND PARTICIPANT OUTCOMES

This chapter focuses on participant outcomes under JTHDP, including job placement rates, employment retention rates at 13 weeks after initial placement, and changes in housing condition during program participation. It assesses how program outcomes varied by site, characteristics of program participants, and the types of services received. It also, for selected measures, compares JTHDP participant outcomes with those of JTPA Title II-A homeless and non-homeless terminees. In addition, this chapter examines the average costs of training and placement during the demonstration effort.

Program outcomes presented are based on: (1) aggregate site-level data for all JTHDP phases and (2) more detailed participant-level data. The aggregate data analyses are based on data submitted by each site on a quarterly basis and in self-evaluation reports submitted by sites at the end of each program year. The participant-level analyses, which are intended to differentiate outcomes for different groups of homeless persons served by JTHDP, are based on client-level data systems (i.e., the Cooperative Client Information Program [CCIP]) maintained by each site beginning with Phase 2. It is important to note that the evaluation of JTHDP did not employ an experimental design methodology. Hence, while it is possible to discuss outcomes for JTHDP participants, it is not possible to analyze net impacts of the intervention (i.e., compare outcomes of JTHDP participants with a randomly-selected control group of homeless individuals who were not part of JTHDP). Appendices G and H provide detailed breakdowns of key outcome and cost measures for each site and by phase.

**Exhibit 4-1:
Percentage of JTHDP Participants Obtaining Employment**



Source: Quarterly Reports submitted to DOL/ETA by JTHDP sites.

A. JOB PLACEMENT OUTCOMES

1. Number and Percentage of Participants Obtaining Employment.

A key outcome measure for JTHDP was the extent to which participants obtained employment. Since its inception, a total of 16,464 homeless individuals served by JTHDP sites were placed in jobs (i.e., full- or part-time unsubsidized positions). Overall, the job placement rate for participants was 36 percent. As shown in Exhibit 4-1, as sites refined their interventions and increased their knowledge about providing services for homeless individuals, job placement rates gradually increased -- from one-third of participants during Phase 1 to 43 percent during the demonstration's final phase.

Average job placement rates tend to obscure the substantial variation in rates across JTHDP sites and between phases. For example, as shown in Exhibit 4-2, among the 20 sites

EXHIBIT 4-2:

**JOB PLACEMENT RATE FOR JTHDP PARTICIPANTS
BY SITE, PHASES 2-4**

STATE	ORGANIZATION NAME	NUMBER OF FUNDING CYCLES	NUMBER OF PARTICIPANTS	NUMBER PLACED IN JOBS	PERCENT PLACED IN JOBS
IL	NORTHERN COOK COUNTY PIC	1	19	17	89%
AZ	JACKSON EMPLOYMENT CENTER	5	1,799	1,421	79%
DC	HOME BUILDERS INSTITUTE	5	691	452	65%
CT	CITY OF WATERBURY	5	1,241	782	63%
CA	SAN DIEGO RETC	5	1,271	776	61%
VA	CITY OF ALEXANDRIA	1	65	39	60%
DE	DELAWARE DHSS	1	139	83	60%
FL	BETA	1	341	192	56%
CA	STEP UP ON SECOND	1	273	144	53%
TX	AUSTIN/TRAVIS COUNTY PIC	1	309	159	51%
WA	SEATTLE-KING COUNTY PIC	5	1,977	963	49%
AZ	TUCSON INDIAN CENTER	4	107	50	47%
NC	WAKE COUNTY	1	394	179	45%
MN	CITY OF ST. PAUL	5	1,273	577	45%
MN	HENNEPIN COUNTY TEA	5	1,901	818	43%
KY	KDVA	5	1,520	647	43%
DC	JOBS FOR HOMELESS PEOPLE	5	2,395	984	41%
VA	TELAMON	1	324	126	39%
ME	YORK COUNTY SHELTERS	1	29	11	38%
MD	BOYS & GIRLS CLUB	5	645	241	37%
OR	SOUTHERN WILLAMETTE PIC	1	265	98	37%
WA	SEATTLE INDIAN CENTER	1	83	30	36%
NJ	CET	1	350	121	35%
OH	FRIENDS OF THE HOMELESS	5	1,144	386	34%
TN	SOUTHEAST TENNESSEE PIC	5	1,169	387	33%
CA	COUNTY OF SANTA CRUZ	1	260	85	33%
IL	ELGIN COMMUNITY COLLEGE	5	2,752	878	32%
MA	COMMUNITY ACTION	1	87	27	31%
WA	SNOHOMICH COUNTY PIC	5	192	58	30%
MA	MCDI	5	1,136	333	29%
ME	CITY OF PORTLAND	1	261	73	28%
CA	CENTER FOR INDEPENDENT LIVING	5	5,316	1,405	26%
NY	CITY OF NEW YORK DOE	1	107	28	26%
TN	KNOXVILLE-KNOX CO. CAC	5	1,362	321	24%
FL	BIEDC	1	853	201	24%
KY	JEFFERSON COUNTY PUBLIC SCHOOLS	5	1,782	402	23%
NY	FRIENDS OF THE NIGHT PEOPLE	1	273	57	21%
MA	EDC	1	100	20	20%
DC	ARCH	1	136	26	19%
CA	WATTS LABOR CAC	1	255	48	19%
OK	HOPE COMMUNITY SERVICES	1	184	34	18%
NY	CITY OF NEW YORK HRA	1	720	112	16%
PA	MAYOR'S OFFICE OF COMMUNITY SERVICES	1	261	38	15%
NY	FOUNTAIN HOUSE	5	874	119	14%
CA	RUBICON	1	426	36	8%
NY	ARGUS	5	735	45	6%
	TOTAL		37,796	14,029	37%

Source: Quarterly Reports submitted to DOL/ETA by JTHDP sites.

participating in Phases 2 through 4, placement rates among participants ranged from 79 percent for Jackson Employment Center and 65 percent for the Home Builders Institute to 23 percent for Jefferson County Public Schools and 24 percent for Knoxville-Knox County Community Action Committee.¹ The Jackson Employment Center -- which served many individuals who had been homeless for long periods of time with substance abuse problems and a host of other obstacles to employment -- credited its success in placing a high percentage of individuals to its one-week job preparation workshops, followed immediately by a highly-structured and intensive job search process.²

2. Job Placement Rates for JTHDP in Comparison to JTPA Title II-A

Comparisons between JTHDP job placement rates and those of JTPA Title II-A terminées must be approached with caution because of a number of important differences between the two programs: (1) JTHDP was a demonstration program with limited duration, while JTPA is an ongoing program, (2) JTHDP was tested in a limited number of sites (21 sites during the final round), while JTPA is a nationwide program (serving every urban, suburban, and rural area in the

¹Fountain House, serving chronically mentally ill individuals, and Argus Community, serving substance abusers and chronically mentally ill substance abusers, had lower placement rates reflecting the special populations they served -- 14 percent and 6 percent, respectively. However, both sites were able to place many participants in temporary work experience positions at the grantee, nonprofit organizations, and for-profit companies in their locality.

²The job search process emphasized participants finding their own job openings within the "hidden" job market. Each morning, participants (who had previously completed the job preparation workshop) came to a job club located at the Jackson Employment Center. Using (primarily) the "Yellow Pages" to identify employers within their selected occupation (e.g., carpentry) and a well-practiced telephone script, each individual would make as many "cold calls" to employers as necessary to obtain at least three quality job leads. They would then spend the remainder of the day making in-person visits to employers to submit job applications and interview for openings.

country), (3) JTHDP assistance was targeted narrowly on homeless individuals, while JTPA served a much wider range of disadvantaged adults (which included a small proportion of homeless individuals), (4) placement rates for JTHDP were based on all homeless individuals served by sites, while the placement rates under JTPA were based on individuals terminated from JTPA,³ and (5) most JTHDP sites focused their service delivery systems on providing immediate job search and placement assistance, and much less on providing occupation skills training and education in comparison to JTPA programs.

With these caveats in mind, only rough comparisons can be made in job placement rates between JTHDP participants and JTPA Title II-A terminees. The best comparisons between JTHDP and JTPA can be made using job placement data from the JTPA Standardized Program Information Report (SPIR) for PY 1994 (covering the period July 1, 1994 through June 30, 1995) and job placement data from Phase 4 of JTHDP (covering the period September 1, 1994 through November 30, 1995). The job placement rate for JTHDP participants was 43.2 percent during Phase 4, which was about 10 percentage points below the entered employment rate for Title II-A homeless terminees (53.5 percent) and about 20 percentage points below the entered employment rate for Title II-A non-homeless terminees (62.5 percent).

³This is a particularly critical factor because under JTHDP all homeless individuals entering the demonstration program counted in the base for determining job placement rates, while under JTPA a portion of those entering the program leave the program without being counted as JTPA terminees.

3. Job Placement Rates by Participant Characteristics and Services Received

Exhibit 4-3 shows the placement rates for distinctive characteristics and subpopulations of JTHDP participants receiving one or more training services during Phases 3 and 4.⁴ Despite some important differences that emerged in placement rates across subpopulations and for some demographic characteristics, sites succeeded in serving and placing a wide spectrum of homeless individuals within their localities.

Placement rates for three of the five subgroups profiled in Chapter 2 were considerably below the placement rate for all JTHDP participants. The placement rate for mentally-ill individuals⁵ was the lowest among the five subpopulations profiled -- 33 percent compared to a 50 percent placement rate for all other JTHDP participants receiving one or more JTHDP training services. Sites serving substantial numbers of chronically mentally ill persons -- such as Fountain House and Argus Community-- found that while unsubsidized employment was a potential outcome for some mentally ill participants (a 14 percent placement rate at Fountain House and a 6 percent placement rate at Argus Community), for many a supported employment position was the most appropriate outcome. These individuals required a wide array of services (and in particular, frequent contact and monitoring by a case manager) and employment options (including part-time jobs and work experience).

⁴Job placement, job retention, and housing upgrades are based on participant-level data available through the CCIP for JTHDP participants who received one of the six JTHDP training services during Phase 3 (the 2nd and 3rd funding cycles) or Phase 4. Results for 13-week job retention and securing permanent housing are discussed later in this chapter.

⁵Mentally-ill individuals were identified by having mental illness as a reason for their homelessness or as an obstacle to employment (by themselves or their case manager).

EXHIBIT 4-3:

**JOB PLACEMENT, JOB RETENTION, AND PERMANENT HOUSING
OUTCOMES BY PARTICIPANT CHARACTERISTICS
AND SERVICES RECEIVED, PHASES 3-4**

PARTICIPANT CHARACTERISTICS	NUMBER OF PARTICIPANTS TRAINED	PERCENT OF THOSE TRAINED PLACED IN JOBS	PERCENT OF THOSE PLACED WORKING DURING THE 13TH WEEK	PERCENT OF THOSE TRAINED THAT SECURED PERMANENT HOUSING
Subpopulation Groups				
Mentally Ill	1,232	33%	60%	23%
Chemically Dependent	6,751	52%	60%	25%
Long-Term Homeless	3,032	41%	60%	19%
Unmarried Males	7,726	54%	59%	23%
Women with Dependent Children	2,842	37%	63%	40%
Age				
<17	65	49%	56%	15%
18-21	1,017	43%	55%	27%
22-34	6,530	49%	61%	28%
35-54	6,008	50%	59%	27%
55+	247	44%	60%	24%
Subtotal	13,867	49%	60%	27%
Sex				
Male	8,357	54%	59%	24%
Female	5,533	40%	61%	32%
Subtotal	13,890	49%	59%	27%
Race/Ethnicity				
White	4,877	53%	61%	31%
Black/Non-Hispanic	7,396	46%	57%	25%
Asian/Pacific Islander	180	43%	60%	31%
Hispanic	986	50%	64%	26%
Amer. Indian/Alaska Native	297	52%	65%	35%
Other	147	45%	59%	20%
Subtotal	13,883	49%	59%	27%
Veteran Status				
Non-Disabled Veteran	2,546	58%	58%	26%
Disabled Veteran	251	42%	58%	19%
Non-Veteran	11,085	47%	60%	28%
Subtotal	13,882	49%	59%	27%
Marital Status				
Single	7,682	47%	58%	25%
Married	1,321	51%	60%	37%
Separated	1,778	47%	63%	28%
Divorced	2,877	55%	60%	30%
Widowed	209	42%	54%	25%
Subtotal	13,867	49%	59%	27%
Dependent Children				
Yes	3,801	41%	62%	37%
No	9,328	52%	59%	23%
Subtotal	13,129	49%	59%	27%
Education				
6 or Less	211	32%	47%	21%
7-11	4,973	45%	58%	26%
12 (High School)	5,277	51%	62%	29%
Some College	2,648	54%	57%	27%
Bachelor's	449	53%	62%	27%
Post-Graduate	190	49%	64%	27%
Subtotal	13,748	49%	59%	27%
Housing Status Night Before Intake				
Street	912	41%	46%	13%
Shelter	6,054	52%	56%	26%
Friends/Relatives	2,647	46%	67%	33%
Transitional	3,145	50%	63%	27%
Other	1,122	41%	61%	32%
Subtotal	13,880	49%	59%	27%
Weeks Homeless Past Year				
0	152	38%	56%	29%
1-9	5,339	52%	61%	32%
10-19	2,071	48%	58%	27%
20-29	1,728	47%	60%	26%
30-39	699	48%	58%	24%
40-49	518	51%	61%	26%
50-52	3,138	46%	59%	22%
Subtotal	13,645	49%	60%	27%
Employment Status at Time of JTHDP Intake				
Employed (Full- or Part-Time)	909	60%	69%	39%
Unemployed	7,036	52%	59%	27%
Not in the Labor Force	1,435	34%	65%	27%
Subtotal	9,380	50%	61%	28%

EXHIBIT 4-3:

**JOB PLACEMENT, JOB RETENTION, AND PERMANENT HOUSING
OUTCOMES BY PARTICIPANT CHARACTERISTICS
AND SERVICES RECEIVED, PHASES 3-4 (CONTINUED)**

PARTICIPANT CHARACTERISTICS	NUMBER OF PARTICIPANTS TRAINED	PERCENT OF THOSE TRAINED PLACED IN JOBS	PERCENT OF THOSE PLACED WORKING DURING THE 13TH WEEK	PERCENT OF THOSE TRAINED THAT SECURED PERMANENT HOUSING
Total Months of Homeless (Lifetime)				
<1	4,051	48%	59%	33%
1-3	2,368	52%	61%	29%
4-6	1,709	47%	60%	25%
7-12	1,980	47%	63%	25%
13-24	1,477	45%	57%	20%
25-48	886	47%	53%	19%
>48	652	37%	57%	16%
Subtotal	13,123	47%	59%	27%
Firs. Worked Week Before Intake (All Jobs)				
0	6,168	54%	59%	29%
1-9	210	50%	56%	24%
10-19	210	59%	69%	40%
20-29	297	48%	76%	32%
30-39	257	56%	67%	36%
40+	398	58%	69%	35%
Subtotal	7,540	54%	61%	29%
Client's Current or Most Recent Hourly Wage				
\$3.99 or Less	220	36%	60%	31%
\$4.00-\$5.99	3,500	55%	61%	31%
\$6.00-\$7.99	1,857	54%	62%	29%
\$8.00-\$9.99	711	57%	64%	28%
\$10.00-14.99	569	54%	64%	29%
\$15.00 or More	206	51%	50%	26%
Subtotal	7,063	54%	62%	30%
Client's Current or Most Recent Occupation				
Managerial	223	57%	64%	31%
Professional	292	49%	67%	30%
Technical or Related Support	340	60%	61%	36%
Marketing or Sales	561	54%	60%	32%
Office or Clerical	769	47%	64%	33%
Craft Worker	409	60%	57%	30%
Operative	513	56%	56%	25%
Laborer	2,580	53%	58%	27%
Service Worker	2,529	50%	62%	29%
Other	557	40%	69%	25%
Subtotal	8,773	52%	61%	29%
# of Weeks Unemployed or Not in the Labor Force During Past 26 Weeks Before Intake				
0	812	40%	70%	33%
1-9	2,138	56%	66%	31%
10-19	2,172	57%	60%	29%
20-25	1,591	53%	58%	28%
26	6,639	42%	60%	24%
Subtotal	13,352	48%	61%	27%
Client's Gross Earnings Over the Six Months Preceding JTHDP Intake				
\$0	3,675	47%	57%	25%
\$1-\$999	1,395	56%	58%	28%
\$1000-\$1999	936	56%	60%	33%
\$2000-\$2999	688	61%	65%	34%
\$3000-\$4999	671	61%	69%	37%
\$5000-\$7499	281	59%	65%	36%
\$7500-\$9999	89	64%	61%	37%
\$10,000+	52	56%	55%	23%
Subtotal	7,787	53%	60%	29%
Sources of Income or In-kind Benefits in the Past Six Months				
Wage Income	3,649	61%	62%	33%
State/Local General Assistance	2,102	46%	57%	24%
Food Stamps	4,509	50%	61%	29%
Unemployment Insurance Compensation (UI)	534	55%	64%	30%
Supplemental Security Income (SSI)	348	14%	60%	18%
Social Security	101	24%	67%	21%
Social Security Disability Income (SSDI)	182	29%	42%	16%
VA Compens./Pension	61	51%	61%	28%
AFDC	1,160	36%	68%	41%
Other	1,028	66%	62%	38%
Subtotal	9,385	50%	61%	28%

EXHIBIT 4-3:

**JOB PLACEMENT, JOB RETENTION, AND PERMANENT HOUSING
OUTCOMES BY PARTICIPANT CHARACTERISTICS
AND SERVICES RECEIVED, PHASES 3-4 (CONTINUED)**

PARTICIPANT CHARACTERISTICS	NUMBER OF PARTICIPANTS TRAINED	PERCENT OF THOSE TRAINED PLACED IN JOBS	PERCENT OF THOSE PLACED WORKING DURING THE 13TH WEEK	PERCENT OF THOSE TRAINED THAT SECURED PERMANENT HOUSING
Health Insurance Status at Intake				
None	5,844	55%	60%	26%
Medicaid	2,009	36%	63%	30%
Medicare	262	27%	64%	26%
Private Health Ins.	317	49%	70%	39%
Other	962	52%	62%	35%
Subtotal	9,294	51%	61%	29%
Received Training Services				
Remedial Education	3,135	41%	63%	30%
Job Search Assistance	10,229	57%	60%	30%
Job Counseling	9,674	58%	60%	31%
Work Experience	1,757	37%	62%	25%
On-the-Job Training	555	68%	63%	35%
Vocational/Occupational Training	2,900	52%	66%	32%
Other	2,181	64%	59%	37%
Subtotal	13,893	49%	59%	27%
Received Support Services				
Transportation	10,572	54%	60%	31%
Food/Meals	7,884	56%	60%	32%
Personal Needs	6,746	59%	60%	33%
Clothing/Work Equipment	6,616	62%	60%	33%
Money Management/Budgeting	4,475	63%	62%	37%
Self-Esteem/Motivation/Attitude Development	7,707	54%	61%	30%
Independent Living/Life Skills	4,919	58%	64%	33%
Drug Abuse Treatment/Counseling	3,294	53%	60%	24%
Alcohol Abuse Treatment/Counseling	3,085	55%	61%	27%
Mental Health Treatment/Counseling	1,523	51%	60%	30%
Other Health Services	2,357	56%	62%	31%
Day Care	925	42%	67%	52%
Advocacy	3,210	53%	65%	35%
Other	2,668	61%	58%	30%
Subtotal	13,893	49%	59%	27%
Received Housing Services				
Emergency Housing Assistance	3,458	61%	57%	31%
Transitional Housing Placement	2,560	65%	66%	33%
Permanent Housing Placement	2,248	69%	80%	81%
Security Deposits/Rent Assistance	1,700	69%	76%	72%
Assistance with Furnishings/Moving	919	66%	75%	70%
Housing Assistance Counseling	4,976	50%	67%	39%
Other	1,502	70%	57%	38%
Subtotal	13,893	49%	59%	27%
Received Placement and Postplacement Serv.				
Job Development	5,279	69%	60%	36%
Direct Placement	4,073	93%	62%	43%
Supported/Sheltered Employment	163	58%	61%	36%
Training After Placement	402	87%	72%	56%
Postplacement Follow-up Services	3,855	92%	65%	49%
Self-Help Support Groups	1,548	48%	67%	41%
Mentoring	1,975	68%	63%	39%
Other	1,309	83%	59%	44%
Subtotal	13,893	49%	59%	27%
Total Hours of Training				
0	335	30%	46%	11%
1-24	3,079	44%	54%	24%
25-49	1,613	61%	68%	35%
50-74	551	48%	61%	30%
75-99	349	65%	51%	38%
100-149	591	65%	58%	37%
150-199	329	70%	63%	37%
200-299	607	49%	67%	33%
300-399	238	55%	74%	37%
400-499	215	67%	63%	32%
500+	352	60%	83%	40%
Subtotal	8,259	52%	61%	30%

Source: CCIP for homeless individuals enrolled in JTHDP and receiving at least one training service during Phase 3 (the second and third funding years) or Phase 4.

Women with children also had a relatively low placement rate -- 37 percent compared to 52 percent for all other JTHDP participants receiving at least one training service. The lower rate of placement for this group may be explained, at least in part, by: (1) the need for a substantial proportion of individuals within this group to locate day care for their dependent children before starting a job (e.g., at the time of intake, 48 percent of individuals within this group indicated that availability of day care was an obstacle to employment) and (2) the greater likelihood of being eligible for public assistance (e.g., 53 percent reported receiving AFDC during the six months preceding entry to JTHDP). Many women with children also needed skills enhancement and vocational training so they could obtain a job that paid a sufficient wage (and health benefits) so that they no longer had to depend upon public assistance.

Another subpopulation with somewhat of a lower job placement rate was the long-term homeless (i.e., those who had been homeless for more than a year in their lifetime). Of those categorized as long-term homeless who received at least one training service, 41 percent were placed in a job (compared to a 50 percent placement rate for all other JTHDP participants receiving at least one JTHDP training service). In working with their clients, JTHDP sites generally found that prolonged periods of homelessness led to deterioration of job-related skills, diminished self-confidence and self-esteem, and poorer health and appearance -- which, in turn, made finding a job more difficult.

The other two subpopulations profiled had placement rates slightly above the average for all JTHDP participants receiving one or more training services. Job placement rates for unmarried males were the highest (54 percent) among the five subpopulations profiled -- compared to a 42 percent placement rate for all other JTHDP participants). The job placement rate for individuals

with past or present problems with chemical dependency (52 percent) was also relatively high -- compared to a 46 percent placement rate for those not having past or present chemical dependency problems. JTHDP sites reported generally that if homeless individuals were able to bring their substance abuse problems under control and had regular supports in place (such as regularly attending Alcoholics Anonymous or living in a drug rehabilitation facility or halfway house), they were likely to be successful in completing training under JTHDP and finding a job. In fact, some sites indicated that individuals emerging successfully from drug rehabilitation programs were among their most-highly motivated and stable program participants, e.g., were living in a transitional facility (and therefore could enroll in longer-term training) with case managers and a structure that promoted success.

As shown in Exhibit 4-3, there were also some notable differences in placement rates across certain participant characteristics. JTHDP participants were somewhat more likely to be placed if they:

- **were male** -- 54 percent of males were placed compared to 40 percent of females;
- **were non-disabled veterans** -- 58 percent of non-disabled veterans were placed versus 47 percent of non-veterans and 42 percent of disabled veterans;
- **had no dependent children** -- 52 percent with no dependent children were placed versus 41 percent with dependent children;
- **were more highly educated** -- placement rates steadily increased as educational levels increased (e.g., 32 percent of those with six or fewer years of education were placed compared to 54 percent of those completing some college);
- **were living in shelters or transitional housing at the time of intake** -- 52 percent of participants living in emergency shelters and 50 percent of participants living in transitional housing at the time of intake entered employment, compared to 41 percent of participants who were on the street the night before intake;

- **were homeless for four years or less -- placement rates were not all that different for those who indicated they had been homeless for four years or less (48 percent placement rate), but were substantially lower (37 percent) for those indicating they had been homeless for more than four years in their lifetime;**
- **were employed at the time of intake to JTHDP -- though relatively few JTHDP participants were employed at the time of intake, those who were employed were more likely to be placed in another job (60 percent placement rate) than those who were unemployed (52 percent) or not in the labor force (34 percent);**
- **earned some wage income during the six months preceding intake -- 61 percent of participants reporting some wage income, 55 percent reporting Unemployment Insurance Compensation, and 51 percent receiving Veterans Administration Compensation/Benefits in the six months preceding JTHDP intake were placed in jobs; those receiving AFDC (a placement rate of 36 percent), SSI (14 percent), Social Security (24 percent), or SSDI (29 percent) during the six months prior to entering JTHDP were much less likely to be placed; and**
- **had private health insurance or no health insurance at the time of intake -- 55 percent of those with no insurance and 49 percent with private health insurance were placed, compared with 27 percent of those with Medicare and 36 percent of those with Medicaid.**

Generally, there was little variation in placement rates across participants with different reasons for homelessness (where the reason was identified by either the participant or the case manager). Participants (or their case managers) describing the following reasons for homelessness, though, had lower than average placement rates: mental illness (35 percent placement rate), recently released from a mental institution (28 percent placement rate), or physically disabled (37 percent placement rate). Similarly, participants identifying the following obstacles to employment (where the obstacle was identified by either the participant or the case manager) had lower than average placement rates: being pregnant (27 percent placement rate), being mentally ill (34 percent placement rate), and having a learning disability (36 percent placement rate).

The placement rate for participants who received certain types of JTHDP services were significantly different from the overall placement rate of 49 percent among JTHDP participants receiving one or more training service.⁶ The placement rate varied significantly among participants receiving the six different training services. Participants receiving work experience (a placement rate of 37 percent) and participants receiving remedial education services (41 percent) had considerably lower placement rates than those receiving on-the-job training (68 percent), job counseling (58 percent), and occupational skills training (52 percent). The lower than average placement rates for those receiving remedial education or work experience may, in part, be due to the fact that the participants receiving these services had generally lower basic and job-related skills or other disabilities (e.g., mental health problems or learning disabilities). As shown in Exhibit 4-3, placement rates for those receiving one or more support services were relatively similar, but slightly higher (with the exception of those receiving day care services) than the 49 percent placement rate for all JTHDP participants receiving at least one training service.

Overall, while there was some variation in placement rates across certain subpopulations (e.g., placement rates for mentally ill individuals and women with dependent children were generally well below those of other JTHDP participants), demonstration site experience suggests that a broad spectrum of homeless individuals can be effectively served by a comprehensive employment and training program, such as JTHDP. Job placement rates recorded for the most difficult of the five subpopulations profiled (i.e., the mentally ill) indicated that even within this

⁶Considerable caution is necessary in interpreting job placement and retention rates for individuals receiving certain types of services. There is no way of knowing for many services whether the job placement occurred before the service was received or what would have happened to the participant if he/she had not received the service (i.e., there is no comparison group).

group, one in three individuals was able to find employment. JTHDP sites were generally able to individualize service delivery strategies so the varied needs of different subpopulations (e.g., women with dependent children versus single men) could be met, and homeless individuals facing widely varying obstacles to employment could secure jobs.

4. Hourly Wage at Initial Job Placement

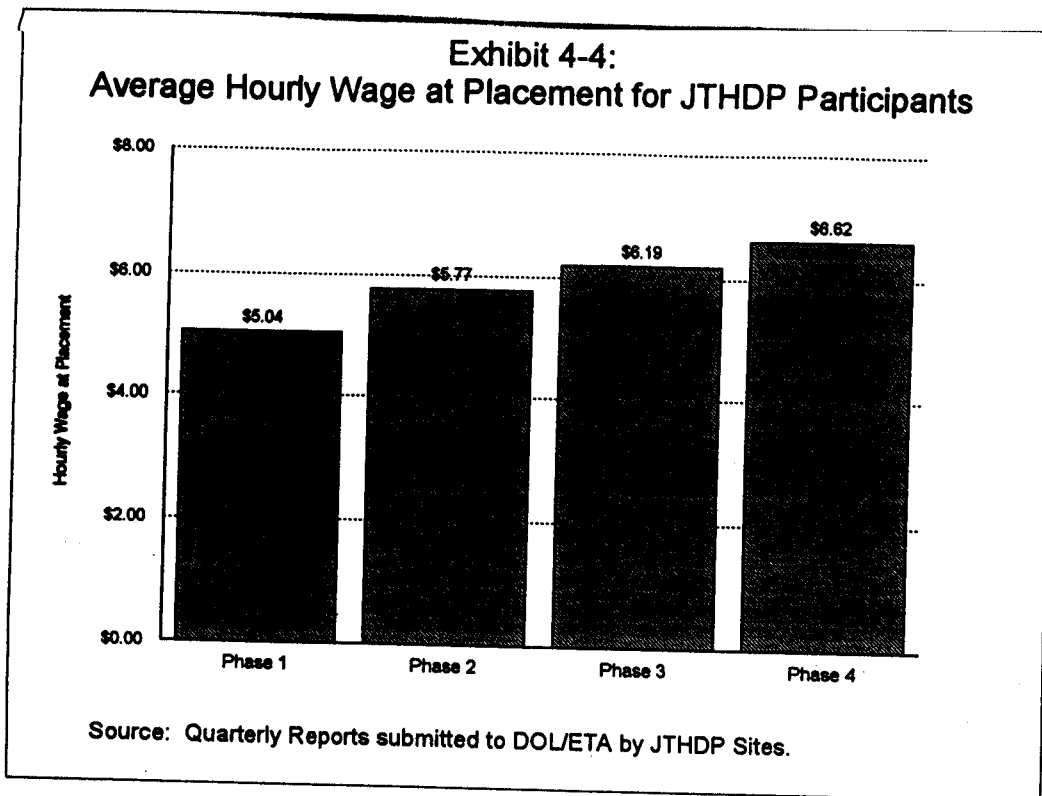
The average hourly wage at placement for JTHDP participants for all phases was \$5.96.⁷ As shown in Exhibit 4-4, the average hourly wage gradually increased throughout the demonstration effort, from \$5.04 during Phase 1 to \$6.62 during Phase 4.⁸ During Phase 4, the average hourly wage at placement for JTHDP participants was somewhat lower (\$6.62) compared to the average hourly wage for JTPA Title II-A homeless (\$7.13) and non-homeless (\$7.05) trainees.⁹ The Phase 4 hourly rate, based on a 40-hour work week, would total \$265 a week (or \$13,770 per year).

Across sites (and within sites, across phases) there was a considerable range of average hourly rates at the time of initial job placement. For example, among the sites participating in Phases 2 through 4, the average hourly wage at placement varied from as much as \$9.42 at Argus

⁷Average hourly wage at placement is based on aggregate data submitted quarterly by JTHDP sites for Phases 2 through 4. Phase 1 wage rates were estimated at \$5.04, based on data submitted by 22 of the 32 JTHDP grantees. For details on Phase 1 wage rates, see: R.O.W. Sciences, Inc., Job Training for the Homeless Demonstration Program: First Year Experience: October 1988 to September 1989, January 1991, p. 2-6.

⁸In inflation-adjusted dollars, this represents about a 4.9 percent increase in wage levels between Phase 1 and Phase 4 (using the Consumer Price Index for All Urban Consumers [CPI-U]).

⁹JTPA Standardized Program Information Report (SPIR), Program Year 1994 (July 1, 1994-June 30, 1995), DOL/ETA.



Community and \$7.81 at the Center for Independent Living to \$4.91 at Knoxville-Knox County CAC (see Exhibit 4-5). Varying wage levels at the time of placement reflected differences in wage rates across labor markets -- e.g., Argus Community and the Center for Independent Living are located in areas where wage rates tended to be higher (New York City, NY and Berkeley, CA, respectively), compared to Knoxville-Knox County CAC (located in Knoxville, TN). They also reflected differences in the types of individuals served and strategies employed by sites. Some sites placed more emphasis on participants securing a higher wage that would promote long-term self-sufficiency, while other sites encouraged participants to take the best job that could be found within a short period of time with the view that this initial job would serve as a “stepping stone” for higher wage jobs.

EXHIBIT 4-5:

**HOURLY WAGES AT INITIAL JOB PLACEMENT FOR
JTHDP PARTICIPANTS, BY SITE, PHASES 2-4**

STATE	ORGANIZATION NAME	PHASE 2	PHASE 3	PHASE 4	PHASE 2-4 AVERAGE
NY	ARGUS	\$11.74	N/A	\$7.87	\$9.42
CA	CIL, BERKELEY	\$6.83	\$8.37	\$7.98	\$7.81
WA	SEATTLE-KING COUNTY PIC	\$6.97	\$7.40	\$8.07	\$7.48
CA	STEP UP ON SECOND	\$6.92			\$6.92
CA	COUNTY OF SANTA CRUZ	\$6.78			\$6.78
MN	CITY OF ST. PAUL	\$6.74	\$6.77	\$6.85	\$6.78
DC	JOBS FOR HOMELESS PEOPLE	\$6.58	\$6.66	\$7.08	\$6.73
MA	COMMUNITY ACTION	\$6.70			\$6.70
DC	ARCH	\$6.87			\$6.67
WA	SNOHOMICH COUNTY PIC	\$5.85	\$6.22	\$10.28	\$6.61
MA	MCDI	\$6.87	\$6.31	\$7.27	\$6.60
MD	BOYS & GIRLS CLUB	\$6.00	\$6.46	\$6.96	\$6.49
MN	HENNEPIN COUNTY TEA	\$5.68	\$6.38	\$7.10	\$6.38
IL	NORTHERN COOK COUNTY PIC	\$6.25			\$6.25
VA	TELAMON	\$6.24			\$6.24
CA	RUBICON	\$6.20			\$6.20
ME	YORK COUNTY SHELTERS	\$6.15			\$6.15
VA	CITY OF ALEXANDRIA	\$6.07			\$6.07
PA	MAYOR'S OFFICE OF COMMUNITY SERVICES	\$6.05			\$6.05
IL	ELGIN COMMUNITY COLLEGE	\$6.08	\$5.95	\$6.19	\$6.03
DC	HOME BUILDERS INSTITUTE (HBI)	\$5.36	\$5.92	\$6.35	\$5.91
NY	CITY OF NEW YORK HRA	\$5.88			\$5.88
OR	SOUTHERN WILLAMETTE PIC	\$5.86			\$5.86
NJ	CET	\$5.81			\$5.81
CA	SAN DIEGO RETC	\$5.55	\$5.88	\$5.80	\$5.80
CT	CITY OF WATERBURY	\$5.94	\$5.64	\$6.20	\$5.79
NY	FRIENDS OF THE NIGHT PEOPLE	\$5.64			\$5.64
MA	EDC	\$5.58			\$5.58
WA	SEATTLE INDIAN CENTER	\$5.50			\$5.50
ME	CITY OF PORTLAND	\$5.49			\$5.49
CA	WATTS LABOR CAC	\$5.44			\$5.44
OH	FRIENDS OF THE HOMELESS	\$5.00	\$5.39	\$6.04	\$5.44
FL	BETA	\$5.40			\$5.40
AZ	JACKSON EMPLOYMENT CENTER	\$4.74	\$5.37	\$5.61	\$5.29
DE	DELAWARE DHSS	\$5.25			\$5.25
AZ	TUCSON INDIAN CENTER		\$5.16	\$5.13	\$5.15
KY	JEFFERSON COUNTY PUBLIC SCHOOLS	\$5.75	\$4.83	\$5.50	\$5.09
NC	WAKE COUNTY	\$5.06			\$5.06
TN	SOUTHEAST TENNESSEE PIC	\$4.74	\$5.05	\$5.61	\$5.05
KY	KDVA	\$4.40	\$5.24	\$5.36	\$5.02
NY	FOUNTAIN HOUSE	\$5.08	\$4.90	\$6.00	\$4.96
TN	KNOXVILLE-KNOX CO. CAC	\$4.31	\$4.92	\$5.18	\$4.91
TX	AUSTIN/TRAVIS COUNTY PIC	\$4.87			\$4.87
FL	BIEDC	\$4.82			\$4.82
NY	CITY OF NEW YORK DOE	\$4.65			\$4.65
OK	HOPE COMMUNITY SERVICES	\$4.29			\$4.29
	TOTAL	\$5.77	\$6.26	\$6.62	\$6.12

Source: Quarterly Reports submitted to DOL/ETA by JTHDP sites.

Data available through the CCIP provide additional information about the wage rates and number of hours worked at the time of job placement. Initial job placements were generally lower paying jobs -- 54 percent of those placed reported wages at placement to be less than \$6.00 per hour during Phases 2 through 4. About one-third (31 percent) of those placed reported wages to be in the \$6.00 to \$7.99 per hour range. About 14 percent of those placed reported their wages to be \$8.00 or above.¹⁰ Two-thirds (68 percent) of all those placed in jobs reported to be working 40 or more hours per week; 96 percent reported to be working 20 or more hours per week.¹¹

5. Types of Jobs Obtained by Participants

As shown in Exhibit 4-6, three occupational categories accounted for about 72 percent of job placements:

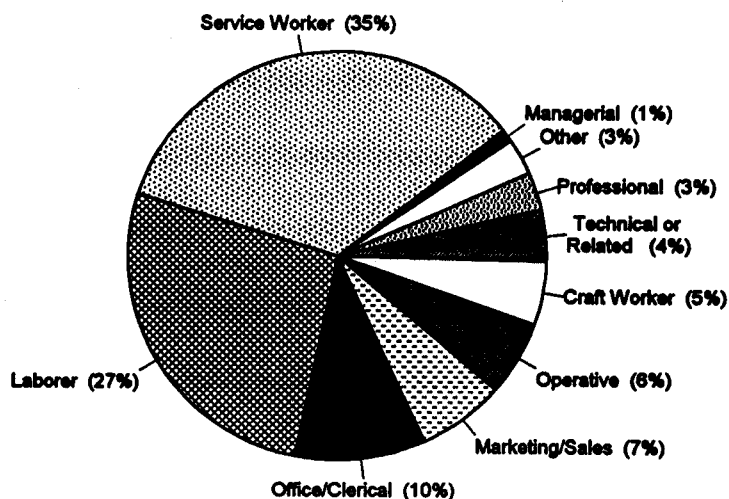
- service worker positions (35 percent);
- laborer positions (27 percent), defined as manual occupations generally not requiring specialized training, e.g., car washers, garage laborers; and
- office/clerical positions (10 percent).

Most of these positions required relatively low skill levels. Of the remaining six occupational categories, two -- operatives (e.g., truck drivers and electronic assemblers) and sales positions -- accounted for 13 percent of placements and also required relatively low skill levels. The

¹⁰The distribution of wages \$8.00 an hour and above was as follows: 8 percent of participants reported hourly wages \$8.00-\$9.99, 5 percent reported wages \$10.00 - \$14.99, and 1 percent reported wages \$15.00 or more per hour.

¹¹See Appendix D for additional breakdowns of data from the CCIP by phase for hourly wages and hours of work.

**Exhibit 4-6:
JTHDP Participant's Occupation at the Time of Job Placement**



Source: CCIP for individuals served during Phases 2-4 (N = 10,665).

moderate- to high-skilled jobs -- including craft workers (e.g., electricians and plumbers), professionals, technicians, and managers -- accounted for the remaining 15 percent of placements. Hence, 85 percent of participants' initial job placements were in low- or semi-skilled jobs. Many of those served had little, if any, income available at the time they entered the program and, according to project staff, were often willing to accept any job that would provide an immediate source of income.

Although occupational classifications vary between JTHDP and JTPA, the percentage of JTPA homeless terminées in low skill jobs was comparable to the percentage of JTHDP participants. Approximately 87 percent of JTPA Title II-A homeless terminées' initial job placements were in low skill jobs, including 32 percent in production, 26 percent in service, 22

percent in clerical, 6 percent in sales, and 1 percent in agriculture.¹²

6. Health Care Coverage at the Time of Initial Job Placement

In terms of health benefits, one-third (34 percent) of those placed in jobs reported that they had some type of health insurance coverage at the time of job placement. At the time of intake, about the same proportion (31 percent) of these same placed individuals had health insurance. The proportion of those placed in jobs reporting to have private health insurance at the time of job placement, though, was 13 percent; at the time of entry into JTHDP only 3 percent of these same placed individuals were covered by private health insurance. Hence, while the majority of JTHDP participants lacked any type of health care coverage at the time of job placement, an additional 10 percent of placed participants had private (e.g., not Medicaid or state-funded) health insurance at the time of initial job placement.

7. Housing Situation at the Time of Initial Job Placement

At the time of initial job placement, participants had already begun to upgrade their housing situations. About one-third of those placed were living in an emergency shelter (33 percent) or on the street (2 percent) at the time they started their jobs. At the time of intake, over half of these same placed individuals were living in an emergency shelter (46 percent) or on the street (6 percent). About one-third (33 percent) of those placed in jobs were living in transitional facilities compared to about one-quarter (23 percent) of these same (placed) individuals at the

¹²JTPA Standardized Program Information Report (SPIR), Program Year 1994 (July 1, 1994-June 30, 1995, DOL/ETA.

time of intake into JTHDP. About the same proportion of those placed indicated they were living with friends or relatives at the time of job placement (16 percent), as at the time of intake into the program. Finally, slightly over one-tenth of those placed in jobs were able to secure either subsidized (4 percent) or unsubsidized (9 percent) permanent housing.

B. JOB RETENTION OUTCOMES UNDER JTHDP

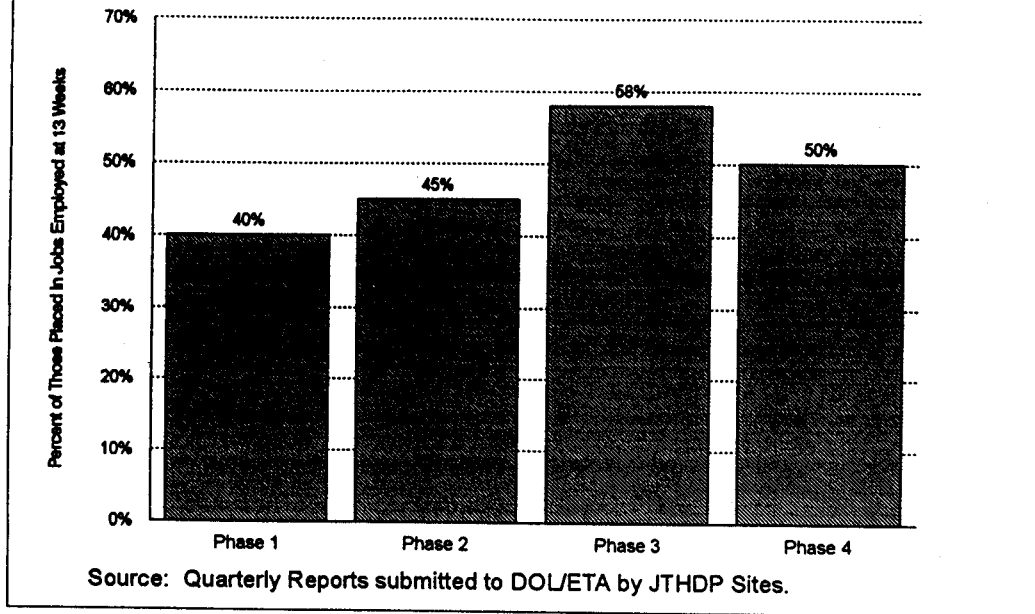
1. Number and Percentage of Participants Employed at the 13th Week After Initial Job Placement¹³

Since JTHDP's inception, 8,171 of the 16,464 participants who obtained work were employed 13 weeks after their initial job placement. This figure represented half of all participants initially placed in jobs. As shown in Exhibit 4-7, the percentage of those placed who were employed at 13 weeks increased substantially from Phase 1 (40 percent) to Phase 3 (58 percent), then dropped off slightly during Phase 4 (50 percent) as grantees began to wind down their programs in anticipation of the end of JTHDP funding.¹⁴ The substantial improvement in job retention between Phases 1 and 3 suggests that sites drew upon their early experiences to enhance their employment retention strategies and responded to DOL/ETA's increased emphasis on job

¹³Employment retention is based on individuals employed in any unsubsidized job, not necessarily with the same employer, 13 weeks after initial job placement. Aggregate placement rates for each phase are based on quarterly reports submitted to DOL/ETA by JTHDP sites. The reader should note that JTHDP sites experienced difficulty in tracking employment outcomes for some homeless participants over the 13-week period between job placement and follow-up. Sites were given credit for job retentions only in cases where they could positively confirm employment during the 13th week with employers or participants. In situations where the grantee lost contact with the client and could not make a positive confirmation of employment during the 13-week, the individual was counted as not being retained.

¹⁴The drop in retention rate in Phase 4 was likely due to grantees phasing out or reshaping their programs, as well as the loss of staff. Because of these factors, during JTHDP's final phase, sites may have been less rigorous both in providing post-placement services and in tracking employment status at 13 weeks after initial job placement.

**Exhibit 4-7:
Percentage of JTHDP Participants Placed in Jobs
Who Were Employed at 13 Weeks**



retention after Phase 1. Many sites intensified their postplacement services to improve employment retention -- for example, the Jackson Employment Center established a team of case managers who visited participants placed in jobs at regular intervals (usually weekly or bi-weekly) for up to a year after initial placement. By Phase 3, nearly all sites encouraged employed participants to attend postplacement support groups or had strong postplacement mentoring components. Some sites reported contacting employers and offering problem-solving and mediation services as needed. Other sites continued their financial support services for participants who began working or tied housing upgrades to continued employment.

Similar to placement rates, there was substantial variation across sites in terms of the percentage of program participants placed in jobs who were employed 13 weeks after placement (see Exhibit 4-8). For example, among the sites who were part of the demonstration during

EXHIBIT 4-8:

**13-WEEK JOB RETENTION RATES
FOR JTHDP PARTICIPANTS, BY SITE, PHASES 2-4**

STATE	ORGANIZATION NAME	NUMBER OF FUNDING CYCLES	TOTAL PARTICIPANTS	NUMBER PLACED IN JOBS	NUMBER RETAINED AT 13 WEEKS	PERCENT RETAINED AT 13 WEEKS
OH	FRIENDS OF THE NIGHT PEOPLE	1	273	57	52	91%
DE	DELAWARE DHSS	1	139	83	71	86%
ME	YORK COUNTY SHELTERS	1	29	11	9	82%
NY	ARGUS	5	735	45	8	80%
VA	CITY OF ALEXANDRIA	1	65	39	30	77%
TN	KNOXVILLE-KNOX CO. CAC	5	1,362	321	246	77%
DC	ARCH	1	136	26	19	73%
NY	FOUNTAIN HOUSE	5	874	119	84	71%
CA	RUBICON	1	426	36	25	69%
VA	TELAMON	1	324	126	87	69%
MA	MCDI	5	1,136	333	224	67%
AZ	TUCSON INDIAN CENTER	4	107	50	33	66%
DC	HOME BUILDERS INSTITUTE (HBI)	5	691	452	279	62%
CA	WATTS LABOR CAC	1	255	48	29	60%
KY	JEFFERSON COUNTY PUBLIC SCHOOLS	5	1,782	402	238	59%
MD	BOYS & GIRLS CLUB	5	645	241	142	59%
WA	SEATTLE-KING COUNTY PIC	5	1,977	963	567	59%
MN	CITY OF ST. PAUL	5	1,273	577	335	58%
DC	JOBS FOR HOMELESS PEOPLE	5	2,395	984	561	57%
WA	SEATTLE INDIAN CENTER	1	83	30	17	57%
CA	SAN DIEGO RETC	5	1,271	776	434	56%
NJ	CET	1	350	121	66	55%
TX	AUSTIN/TRAVIS COUNTY PIC	1	309	159	86	54%
IL	ELGIN COMMUNITY COLLEGE	5	2,752	878	473	54%
CA	COUNTY OF SANTA CRUZ	1	260	85	45	53%
IL	NORTHERN COOK COUNTY PIC	1	19	17	9	53%
NY	CITY OF NEW YORK HRA	1	720	112	59	53%
CT	CITY OF WATERBURY	5	1,241	782	407	52%
KY	KDVA	5	1,520	647	334	52%
AZ	JACKSON EMPLOYMENT CENTER	5	1,799	1,421	730	51%
MN	HENNEPIN COUNTY TEA	5	1,901	818	401	49%
TN	SOUTHEAST TENNESSEE PIC	5	1,169	387	189	49%
OH	FRIENDS OF THE HOMELESS	5	1,144	386	176	46%
PA	MAYOR'S OFFICE OF COMMUNITY SERVICES	1	281	38	17	45%
MA	COMMUNITY ACTION	1	87	27	12	44%
OK	HOPE COMMUNITY SERVICES	1	184	34	15	44%
WA	SNOHOMICH COUNTY PIC	5	192	58	25	43%
OR	SOUTHERN WILLAMETTE PIC	1	265	98	40	41%
CA	CIL, BERKELEY	5	5,316	1,405	490	35%
ME	CITY OF PORTLAND	1	281	73	22	30%
NC	WAKE COUNTY	1	394	179	45	25%
CA	STEP UP ON SECOND	1	273	144	33	23%
NY	CITY OF NEW YORK DOE	1	107	28	5	18%
FL	BIEDC	1	853	201	28	14%
MA	EDC	1	100	20	N/A	N/A
FL	BETA	1	341	192	N/A	N/A
	TOTAL		37,796	14,028	7,197	52%

Source: Quarterly Reports submitted to DOL/ETA by JTHDP sites.

Phases 2 through 4, rates of employment at 13 weeks after initial placement ranged from 80 percent at Argus Community and 77 percent at the Knoxville-Knox County CAC to 35 percent at the Center for Independent Living. The highest retention rate was recorded at Friends of the Night People (91 percent), though this site was a grantee only during Phase 2.¹⁵

2. Retention Rates by Participant Characteristics and Program Services Received

Unlike job placement rates, there were relatively minor differences in employment retention rates (i.e., the percentage of placed participants who were employed 13 weeks after initial job placement) across participant characteristics and population subgroups. Based on participant-level data maintained in the CCIP, Exhibit 4-3 (shown earlier) displays retention rates for various participant characteristics for Phases 3 and 4.¹⁶ This exhibit shows that there were almost no differences in retention rates among the major population subgroups profiled: women with children (63 percent were employed at 13 weeks after initial placement), mentally ill (60 percent), chemically dependent (60 percent), long-term homeless (60 percent), and unmarried males (59 percent). Relatively modest differences demonstrate that JTHDP sites were able to promote job retention equally well for a wide spectrum of the homeless. With respect to participant characteristics, JTHDP participants were somewhat more likely to be employed 13

¹⁵It is not possible to compare JTHDP and JTPA retention rates because the two rates are based on different denominators: where job retention rates under JTHDP are based on only those participants who were placed in jobs, JTPA retention rates are based on terminees.

¹⁶The 13-week job retention rate for Phases 3 and 4 was slightly higher in the participant-level data (59 percent) maintained by sites as part of the CCIP, compared with the retention rate reported by sites in their aggregate quarterly reports (56 percent).

employed 13 weeks after initial placement if they:

- **had more than a 6th grade education at the time of intake** -- 47 percent of those with a 6th grade education or lower were retained in jobs, compared to an overall retention rate of 59 percent;
- **were living with friends and relatives at the time of intake** -- 67 percent of participants living with friends and relatives at the time of intake were retained at 13 weeks after initial placement, compared with 46 percent of participants who indicated they were on the street the night before intake;
- **were employed at the time of JTHDP intake** -- 69 percent of those employed at the time of JTHDP intake were retained 13 weeks after placement, compared with 59 percent of those who had not been employed at the time of intake;
- **had worked more than 10 or more hours during the week preceding intake** -- 70 percent of those who worked 10 or more hours the week before intake were retained at 13 weeks, compared with 59 percent who had worked less than 10 hours the week before intake; and
- **private health insurance** -- those with a private health insurance plan at the time of intake to JTHDP were more likely to be employed at 13 weeks after initial placement (70 percent) than those with no health insurance (60 percent) at the time of intake.

With regard to reasons for being homeless and obstacles to employment, there were only relatively minor differences in retention rates at 13 weeks.

The biggest difference in terms of retention rates emerged with regard to several types of services received by participants.¹⁷ Retention rates at 13 weeks were highest for those receiving permanent housing placements -- 80 percent. Those receiving postplacement services (78 percent), those receiving security deposits/rental assistance (76 percent), those receiving assistance with furnishings/moving (75 percent), and those attending training after placement (72

¹⁷As with placement rates, considerable caution is necessary in interpreting retention rates for individuals receiving certain types of services. There is no way of knowing for many services whether 13-week retention occurred before the service was received or what would have happened to the participant if he/she had not received the service (i.e., there is no comparison group).

percent) also had among the highest retention rates. Above average retention rates were also reported for those receiving day care services, those receiving housing assistance counseling and those attending self-help support groups (all with 67 percent retention rates), those receiving vocational/occupational training and those receiving transitional housing placements (both with 66 percent retention rates), and those receiving advocacy services and those receiving postplacement follow-up services (both with 65 percent retention rates).

With regard to the number of hours of training received, those receiving less than 25 hours of training generally had a lower retention rate (54 percent) than those with 25 or more hours of training (65 percent). Those with 150 more hours of training had a retention rate of 69 percent.

The wage at initial job placement and the number of hours the participant worked per week did not appear to have much affect on whether the participant was employed at 13 weeks. For example, 58 percent of individuals with a wage less than \$6.00 per hour in their initial job placement were working at 13 weeks compared with 60 percent of those with wages of \$6.00 or more. Retention rates were somewhat higher for certain occupational classifications than others, including: professional (69 percent retention rate), office or clerical (69 percent), technical or related support (66 percent), and managerial (65 percent). These rates compared to retention rates of 56 percent for laborers and 55 percent for marketing/sales.

Those with private health insurance at the time of placement did somewhat better in terms of retention rates (67 percent), than those with Medicaid (55 percent). Finally, those with better housing situations at the time of initial job placement appeared to have somewhat higher retention rates. For example, 41 percent of those on the street and 52 percent of those in emergency shelters were retained 13 weeks after initial placement, compared to retention rates of 69 percent

for those in unsubsidized permanent housing.

3. Hourly Wage and Hours Worked 13th Week After Placement

The average hourly wage of JTHDP participants employed in the 13th week after initial job placement was \$6.43 for all phases. This wage represented an 8.9 percent increase over the average wage at initial job placement (\$5.96). As shown in Exhibit 4-9, the average hourly wage of those employed at 13 weeks increased gradually from phase to phase -- increasing from \$5.37 during the first phase to \$7.17 during the final JTHDP phase.¹⁸ Based on a 40-hour work week, the average hourly wage paid during Phase 4 totaled \$287 per week (or \$14,914 on an annual basis).

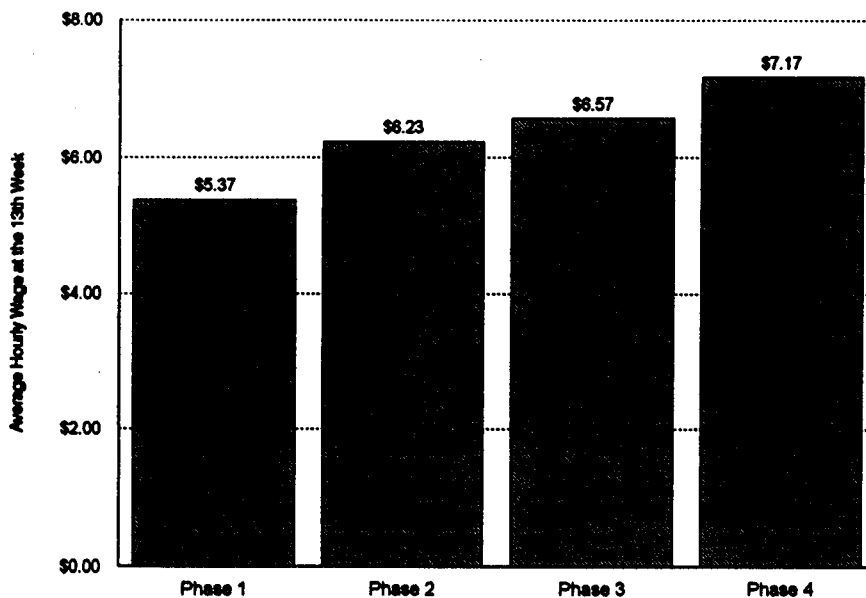
Data available through the CCIP provide additional information about the wage rates, number of hours worked, and the patterns of work during the 13-week post-placement period. As shown in Exhibit 4-10, hourly wage rates remained relatively low and only slightly above what had been reported at the time of initial job placement. At 13 weeks post-placement, 46 percent reported hourly wages to be less than \$6.00 per hour, compared to 49 percent at the time of initial job placement (for these same retained individuals).

Other results from the CCIP reported for those working during their 13th week post-placement included the following (during Phase 3):

- Ninety percent indicated they were working one job during the 13th week after initial placement, 9 percent two jobs, and 1 percent three jobs.

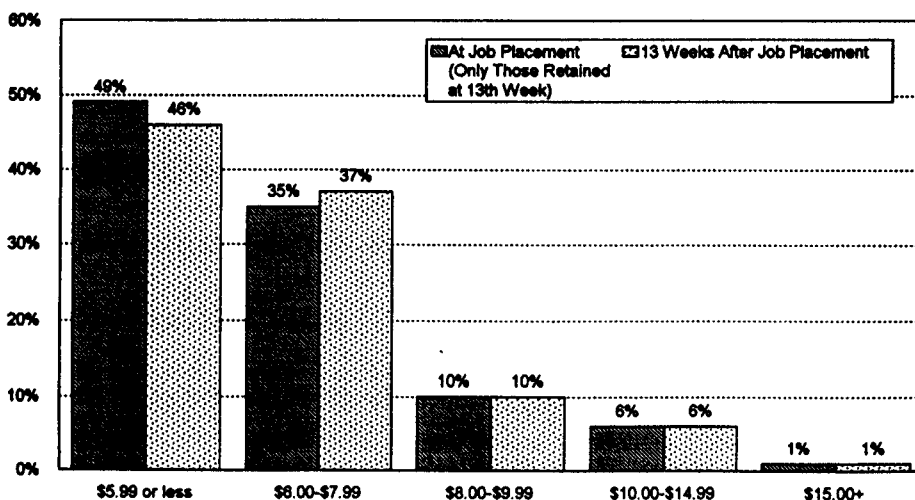
¹⁸In inflation-adjusted dollars, this represents about a 6.6 percent increase in wage levels between Phase 1 and Phase 4 (using the Consumer Price Index for All Urban Consumers [CPI-U]).

**Exhibit 4-9:
Average Hourly Wage at the 13th Week**



Source: Quarterly Reports submitted to DOL/ETA by JTHDP Sites.

**Exhibit 4-10:
Hourly Wage At Job Placement and at the
13th Week After Job Placement**



Source: CCIP for individuals served during Phases 2-4 (N varies by Phase).

- On average, those retained, worked about 37 hours during the 13th week after initial placement (at all jobs); 72 percent reported working 40 or more hours per week; 97 percent reported working 20 or more hours.
- Average weekly earnings during the 13th week totaled \$242; 86 percent earned between \$100 and \$399 per week; 46 percent earned between \$200 and \$299 per week.
- Seventy-eight percent reported working for the same employer during the 13th week as at the time of initial job placement.

4. Health Care Coverage at 13 Weeks After Initial Placement

In terms of health benefits, 38 percent of those retained in jobs had health insurance coverage during their 13th week after initial placement. The percentage of these retained individuals with health insurance increased slightly from intake (32 percent), to initial job placement (36 percent), to retention (38 percent). The proportion of those retained in jobs at 13 weeks after initial employment with private health insurance climbed to 21 percent from 4 percent (for these same retained individuals) at the time of program intake and 14 percent at the time of initial job placement. Hence, while about 6 in 10 JTHDP participants retained in jobs still had no health insurance, the percentage of individuals with private health insurance increased considerably.

5. Housing Situation Among Those Retained at 13 Weeks

The housing situation of those retained in employment for 13 weeks after initial job placement improved from their housing situation at JTHDP intake and initial job placement. Of those employed at 13 weeks after being placed, 46 percent attained permanent housing (42 percent in unsubsidized and 4 percent in subsidized units). In comparison, only 15 percent of

these same retained individuals were in permanent housing at the time of job placement (with the entire 31 percent increase accounted for by individuals obtaining unsubsidized housing); none were in permanent housing at the time of JTHDP intake. Of those employed at 13 weeks after job placement, 7 percent were living in emergency shelters and less than 1 percent on the street. In comparison, at the time of intake into JTHDP, nearly half of these same retained individuals were living in a shelter (43 percent) or on the street (4 percent); at the time of initial job placement, nearly one-third of these same retained individuals were living in a shelter (29 percent) or on the street (1 percent). Finally, about one-quarter (26 percent) of those employed at 13 weeks were living in transitional facilities, about the same percentage as at intake (25 percent), but below that reported at initial job placement (35 percent).

Among those initially placed in jobs, but not employed at 13 weeks, the housing situation was not nearly as good as for those retained. For example, one-fifth of those not retained at 13 weeks were living in permanent housing, compared to 46 percent of those retained at 13 weeks. The housing situation for those not retained, while considerably worse than that for those retained, was still better than their situation at the time of either intake or initial job placement. Only 18 percent of those placed but not retained were living in shelters or on the street during the 13th week after job placement, compared to 56 percent for this group at intake and 42 percent at the time of initial job placement.

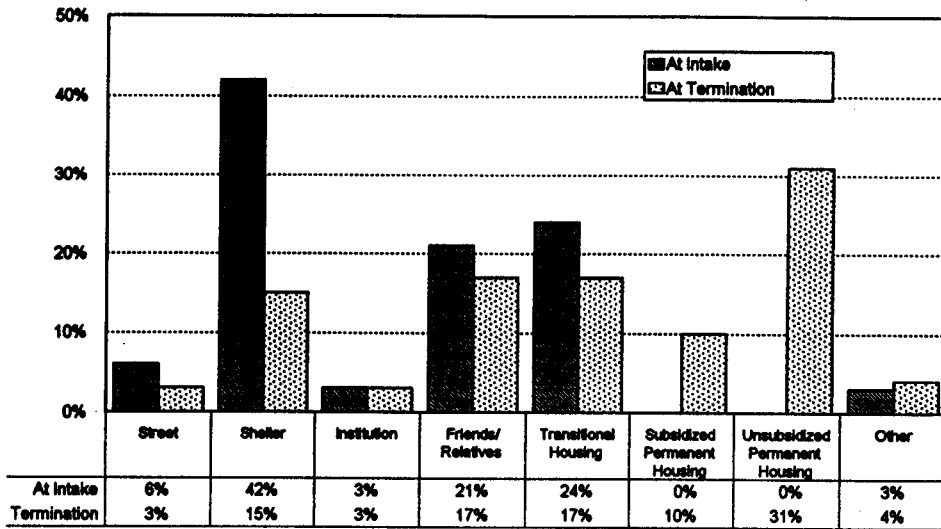
C. HOUSING STATUS OF JTHDP PARTICIPANTS

1. Housing Situation at Exit from JTHDP

Data available through the CCIP for Phases 3 and 4 provide information on the housing situation of JTHDP participants at the time of exit from the program and permit comparisons of the housing status of these individuals at the time of their entry into the program. However, these data should be interpreted with some caution because data were available at the time of exit on only about half of JTHDP participants. As shown in Exhibit 4-11, among those exiting the program (on whom data were available at time of exit), 41 percent were living in permanent housing (31 percent in unsubsidized units and 10 percent in subsidized units). Slightly less than one-fifth (17 percent) were living in transitional housing, 17 percent with friends/relatives, 15 percent in shelters, and 3 percent on the street. Going back to the time of entrance into JTHDP, the exhibit shows (among those for whom there were data on housing status at exit), a substantial proportion improved their housing situation following intake into JTHDP. For example, only 18 percent of those with exit data were living in shelters (15 percent) or on the street (3 percent) at the time of exit versus 48 percent (42 percent in shelters and 6 percent on the street) at the time of intake for the same group.

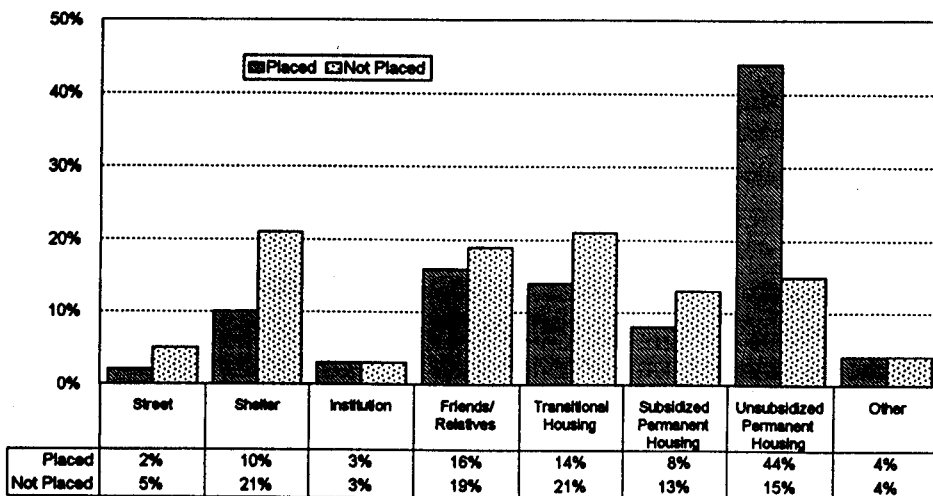
While there was little difference in housing status at the time of intake between those eventually placed in jobs and those not placed, there was a substantial difference in housing status at the time participants exited from the program. As shown in Exhibit 4-12, while 44 percent of those placed in jobs were living in unsubsidized permanent housing at the time of exit from JTHDP, only 15 percent of those who did not find jobs were living in unsubsidized permanent housing at the time of exit from JTHDP.

**Exhibit 4-11:
Housing Status of JTHDP Participants at
JTHDP Intake and Program Termination**



Source: CCIP for individuals served during Phases 3 and 4 (N = 8,223).

**Exhibit 4-12:
Housing Status of JTHDP Participants at Program Termination
for Those Placed and Those Not Placed in Jobs**



Source: CCIP for individuals served during Phases 3 and 4 (N = 8,223).

2. Securing Permanent Housing by Participant Characteristics

Exhibit 4-3 (shown earlier) displays the characteristics of participants who reported securing permanent housing at either 13 weeks after initial job placement or at the time of exit from JTHDP. As with job placement rates, there was considerable variation across the five population subgroups profiled, as well as across some participant characteristics. In particular, among the various subpopulations served, women with dependent children generally were substantially more successful in securing permanent housing than the other four subgroups. About 40 percent of this group secured permanent housing compared to the following percentages for the other four subpopulations: chemically dependent (25 percent), mentally-ill (23 percent), unmarried males (23 percent), and long-term homeless (19 percent). The success of women with dependent children in securing housing appeared to be related generally to greater availability of housing assistance for families versus single individuals.

There were also some differences in rates of securing permanent housing across participant characteristics. As shown (earlier) in Exhibit 4-3, JTHDP participants were generally more likely to have secured permanent housing if they were:

- **American Indian, White, or Asian Pacific Islander** -- 35 percent of American Indians, and 31 percent of whites and Pacific Islanders compared to 25 percent of blacks and 26 percent of Hispanics secured permanent housing;
- **married** -- 37 percent of currently married participants secured permanent housing compared to a range of 25 to 30 percent for those not married;
- **with dependent children** -- 37 percent of participants with dependent children secured permanent housing compared to 23 percent of participants without dependent children;
- **not living on the street at the time of intake** -- only 13 percent of those living on the street secured permanent housing during involvement in JTHDP; 26 percent of

those in shelters, 33 percent of those staying with friends and relatives, and 27 percent of those in transitional housing secured permanent housing;

- **homeless less than six months** -- likelihood of securing permanent housing steadily declined as the months of homelessness prior to intake increased (e.g., 33 percent of those homeless under one month secured permanent housing compared to just 16 percent of those that had been homeless for more than four years); and
- **receiving AFDC in the six months prior to JTHDP intake** -- 41 percent of AFDC participants secured permanent housing; only 18 percent of SSI recipients, 21 percent of Social Security recipients, and 16 percent of SSDI recipients secured permanent housing.

D. AVERAGE TRAINING AND PLACEMENT COSTS

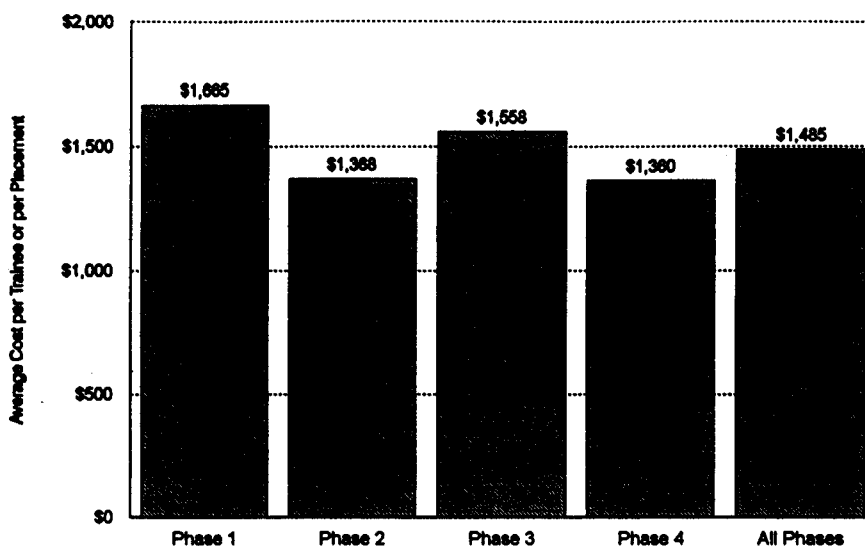
1. Average Training Costs

As shown in Exhibit 4-13, the average training cost per JTHDP participant for all phases was \$1,485. As shown in the exhibit, average training costs were the greatest during Phase 1 (\$1,665), when sites were developing their initiatives.¹⁹ Average training costs varied substantially across sites (see Appendices G and H for details on average training costs per site, per phase).²⁰ For example, among the sites participating in Phases 2 through 4, average training costs per participant ranged from under \$1,000 at four sites -- \$838 at Elgin Community College (in Elgin, IL), \$809 at Jackson Employment Center (in Tucson, AZ), \$741 at Jobs for Homeless People (in Washington, D.C.), and \$717 at Center for Independent Living (in Berkeley, CA) -- to

¹⁹The average costs of training were based on the annual JTHDP grant dollars expended by each site divided by the number of participants trained for Phases 2 through 4. Average training costs for Phase 1 were based on grant amounts awarded, rather than actual expenditures.

²⁰Average training costs are difficult to compare across sites because some sites had access to non-JTHDP funds that were used to provide services for JTHDP participants. In addition, sites differed in the degree to which they referred clients to other service providers.

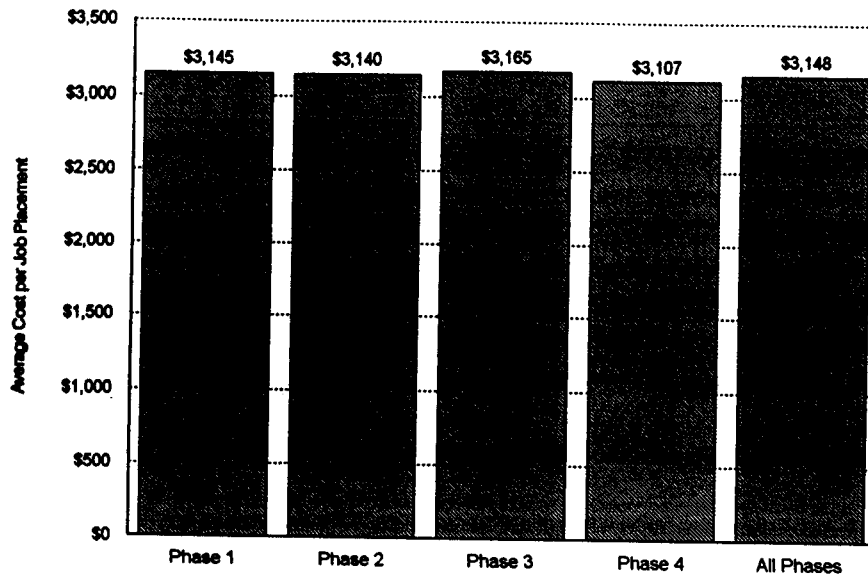
**Exhibit 4-13:
Average Training Costs per JTHDP Participant**



Source: Quarterly Reports submitted to DOL/ETA by JTHDP Sites. Phase 1 costs are based on grant amounts awarded; Phase 2-4 costs are based on expended amounts.

over \$3,000 in four sites -- \$4,765 at the Tucson Indian Center (in Tucson, AZ), \$4,375 at the Snohomish County PIC (in Everett, WA), \$3,904 at the Home Builders Institute (in several locations), and \$3,424 at the Boys and Girls Club (in Washington, D.C.). A number of factors contributed to substantial cross-site differences, including: differences in participant characteristics, differences in the number of participants to spread fixed costs across (i.e., economies of scale), the ability of sites to leverage funds for services through other service delivery providers, and differences in the types, amount, and intensity of training services provided. For example, sites (such as the Jackson Employment Center) providing primarily job search/placement assistance for most of their participants had a substantially lower training cost per participant than sites (such as the Home Builders Institute and the Boys and Girls Club) that provided long-term occupational skills training.

**Exhibit 4-14:
Average Cost per Job Placement**



Source: Quarterly Reports submitted to DOL/ETA by JTHDP Sites.

2. Average Cost per Job Placement

As shown in Exhibit 4-14, the average cost per job placement for JTHDP participants was \$3,148.²¹ The average cost per placement remained relatively stable throughout the demonstration effort. However, average cost per placement varied substantially across sites participating in Phases 2 through 4 (see Appendices G and H for details on average placement costs per site, per phase). For example, average cost per placement ranged from under \$2,000 in three sites -- \$1,796 at Elgin Community College (in Elgin, IL), \$1,407 at Jobs for Homeless People (in Washington, D.C.), and \$1,025 at Jackson Employment Center (in Tucson, AZ) -- to over \$9,000 at five sites -- \$34,331 at Argus Community (in New York City, NY), \$11,240 at

²¹The average cost per placement is calculated by dividing total grantee expenditures by the number of participants placed in jobs.

Snohomish County PIC (in Everett, WA), \$10,198 at the Tucson Indian Center (in Tucson, AZ), \$9,256 at Fountain House (in New York City, NY), and \$9,108 at the Boys and Girls Club (in Washington, D.C.).²² The factors that were cited earlier as affecting training costs also appeared to contribute to substantial differences in cost per placement: differences in participant characteristics, differences in the number of participants (and job placements) to spread fixed costs across (i.e., economies of scale), the ability of sites to leverage funds for services through other service delivery providers, and differences in the types, amount, and intensity of training services provided. All of those grantees with high per placement costs had relatively few placements to spread expenditures across (i.e., fewer than 50 placements per phase for the five sites with costs in excess of \$9,000 per placement).

E. SUMMARY

Job Placement Outcomes. Across all JTHDP phases, slightly more than one-third of JTHDP participants (36 percent) were placed in jobs. Among those receiving one or more JTHDP employment and training services, the job placement rate was 46 percent. The job placement rate increased from one-third of participants in Phase 1 to 43 percent in Phase 4, as sites refined their interventions based on their experience providing employment, training and related services to homeless individuals. There was some variation in placement rates across certain subpopulations (e.g., placement rates for mentally ill individuals and women with dependent children were generally well below those of other JTHDP participants) and receipt of

²²Both Argus Community and Fountain House target special populations -- chronically mentally ill individuals and chronically mentally ill substance abusers. Both these programs are long-term, train few participants in a given year, and do not consider their primary emphasis to be job training or placement.

certain services (e.g., participants receiving work experience and those receiving remedial education services had considerably lower placement rates than those receiving on-the-job training, job counseling, and occupational skills training). Demonstration site experience, though, suggests that a broad spectrum of homeless individuals can be effectively served by a comprehensive employment and training program, such as JTHDP. The average hourly wage gradually increased throughout the demonstration effort, from \$5.04 during Phase 1 to \$6.62 during Phase 4. Hourly wages at placement were generally reflective of the predominance of low- or semi-skilled jobs that most JTHDP participants entered (e.g., 72 percent of placements were as service workers, laborers, or office/clerical workers).

Job Retention Outcomes. The percentage of those placed who were employed at 13 weeks increased substantially from Phase 1 (40 percent) to Phase 3 (58 percent), then dropped off slightly during Phase 4 (50 percent) as grantees began to wind down their programs in anticipation of the end of JTHDP funding. The substantial improvement in job retention between Phases 1 and 3 suggests that sites drew upon their early experiences to enhance their employment retention strategies and responded to DOL/ETA's increased emphasis on job retention after Phase 1. The biggest differences in terms of retention rates at 13 weeks emerged with regard to several types of services received by participants. Individuals receiving permanent housing placements had the highest 13-week retention rate (80 percent). The retention rates were also higher than average for those receiving other types of housing assistance, training after placement, attending self-help support groups, and receiving occupational skills training. The average hourly wage of JTHDP participants employed in the 13th week after initial job placement was \$6.43 for all phases. This wage represented an 8.9 percent increase over the average wage at initial job

placement (\$5.96).

Health Care Outcomes. Although there was not a dramatic increase in the percentage of individuals with health insurance from intake (32 percent), to initial placement (36 percent), to 13 weeks after initial employment (38 percent), the proportion of those with private health insurance (as opposed to Medicaid or state/local-funded medical assistance) increased considerably. The proportion of participants with private health insurance climbed from 4 percent at intake (of those same retained individuals), to 14 percent at initial job placement, to 21 percent at 13 weeks after initial placement.

Housing Outcomes. A substantial proportion of participants improved their housing situation following intake into JTHDP. For example, only 18 percent of those with exit data were living in shelters (15 percent) or on the street (3 percent) at the time of exit versus 48 percent (42 percent in shelters and 6 percent on the street) at the time of intake for the same group. Individuals retained in employment for 13 weeks after initial job placement particularly improved their housing situation. Of those employed at 13 weeks after being placed, 46 percent attained permanent housing, compared to only 15 percent of these same individuals having permanent housing at the time of initial job placement (with the entire 31 percent increase accounted for by individuals obtaining unsubsidized housing); none were in permanent housing at the time of JTHDP intake. Women with dependent children generally were substantially more successful in securing permanent housing (about 40 percent) than the other four subgroups (ranging from 19 percent to 25 percent). Their success in securing housing appeared to be related generally to greater availability of housing assistance for families.

Training and Placement Costs. The average training cost per JTHDP participant for all phases was \$1,485. Average training costs varied substantially across sites -- from under \$1,000 to over \$3,000. The average cost per job placement for JTHDP participants was \$3,148. The average cost per placement also varied substantially across sites -- from under \$2,000 to over \$9,000. A number of factors contributed to substantial cross-site differences in training and placement costs, including: differences in participant characteristics, differences in the number of participants across which to spread fixed costs (i.e., economies of scale), the ability of sites to leverage funds for services through other service delivery providers, and differences in the types, amount, and intensity of training services provided.

CHAPTER 5:

THE CONCLUSION OF JTHDP: PARTNERING AND CONTINUED PROVISION OF SERVICES TO HOMELESS INDIVIDUALS

The final phase of JTHDP -- referred to as the "partnering phase" -- involved a 15-month transition period, which shifted the focus of JTHDP from demonstrating effective models for serving homeless individuals to building, through partnerships, an enhanced capability under JTPA Title II-A to serve homeless individuals. DOL also wanted to give grantees the opportunity to secure other funding, if desired, enabling those grantees to continue to provide services at the end of the demonstration. The 21 Phase 3 grantees were invited to submit proposals to operate a 15-month program (September 1994 through November 1995) which:

...translates the vast experience gained by JTHDP grantees over the past 5-6 years into effective linkages with the JTPA Title II-A delivery system for the provision of services to the homeless.... your proposal shall include a phaseout plan for termination of this 15 month experience (12 months of full program operation and 3 months for an orderly phaseout), and indicate efforts to be undertaken for obtaining replacement funding from sources other than JTHDP monies for continuation of services to the homeless.¹

This chapter examines the efforts of JTHDP sites to "partner" with the JTPA service delivery system during JTHDP's final phase and explores whether grantees were able to continue providing services after the conclusion of the demonstration.

¹Solicitation for Grant Applications, June 14, 1994, DOL/ETA.

A. JTHDP GRANTEE'S EFFORTS TO "PARTNER" WITH LOCAL JTPA TITLE II-A PROGRAMS

1. Description of the Partnerships

With the inclusion of homeless individuals as a "hard-to-serve" target population under the Job Training Reform Amendments of 1992 (Public Law 102-367)² and the Administration's decision in the FY 1995 budget to discontinue JTHDP in favor of "mainstreaming" services to homeless individuals through the JTPA delivery system, DOL determined that the best use of the final funding allocation under the McKinney Act was to share the lessons learned and assist the JTPA Title II-A system in better serving homeless individuals. JTHDP grantees were asked to develop a "partnership" approach whereby:

...each of the current JTHDP grantees would establish a formal cooperative agreement with at least one JTPA SDA/PIC in their area for the purpose of maximizing the experience and expertise developed during the earlier phases of JTHDP to enhance delivery of services for homeless individuals by the JTPA system.³

The 16 JTHDP grantees that were not JTPA SDAs/PICs (including homeless-serving agencies, educational organizations, and mental health organizations) were required to partner with a nearby SDA to facilitate referral and enrollment of JTHDP participants into JTPA-sponsored training. They were expected to negotiate a formal agreement with a SDA to set aside a specific number of JTPA training slots for appropriately-screened JTHDP participants or seek direct funding as a JTPA service provider (i.e., through a nearby SDA's regular procurement

²The Job Training Reform Amendments of 1992 required that not less than 65 percent of JTPA Title II-A participants served by each SDA be individuals who were included in one or more of the following "hard-to-serve" categories: basic skills deficient, school dropouts, recipients of cash welfare payments (including recipients under the JOBS program), offenders, disabled, homeless, or within a governor-approved hard-to-serve category.

³Solicitation for Grant Applications, June 14, 1994, DOL/ETA.

process) to provide employment and training services for JTHDP participants.

The five JTHDP grantees that were JTPA SDAs/PICs faced a different set of requirements from their non-SDA/PIC counterparts. Under the “partnering” initiative, these JTHDP grantees were expected to: (1) partner their regular JTPA Title II-A activities with their JTHDP program to improve access for JTHDP participants to Title II-A services and (2) partner with one or more other SDAs, providing technical assistance to help the other SDAs improve access for homeless individuals to Title II-A services.

Finally, regardless of whether the JTHDP grantee was a JTPA or non-JTPA entity, it was required to continue to serve a similar number of homeless individuals and offer the full range of employment, training, housing, and support services it had during Phase 3.

2. Referral and Enrollment of JTHDP Participants in JTPA

As shown in Exhibit 5-1, the 21 JTHDP grantees referred a total of 953 JTHDP participants or 20 percent of Phase 4 participants to JTPA.⁴ This represented an average of 45 JTPA referrals per grantee. Of those referred to JTPA, 58 percent were enrolled in JTPA. These enrollments in JTPA represented 11 percent of all JTHDP Phase 4 participants.

As illustrated in Exhibit 5-1, there was considerable variation across sites in terms of the proportion of participants both referred and enrolled in JTPA. For example, five sites referred

⁴Because grantees were not required to keep data on the number of JTHDP referrals to JTPA prior to Phase 4, we cannot ascertain whether these figures represent increases or decreases in the numbers served by JTPA.

**EXHIBIT 5-1:
NUMBER AND PERCENT OF JTHDP PARTICIPANTS REFERRED
AND ENROLLED IN JTPA DURING PHASE 4**

Grantee	Type of Grantee	Number of JTHDP Participants	Referred to JTPA		Enrolled in JTPA		
			Number	Percent	Number	As a Percent of Those Referred	As a Percent of JTHDP Participants
Snohomish County PIC	SDA/PIC	25	25	100%	25	100%	100%
Tucson Indian Center	Non-SDA/PIC	11	11	100%	8	73%	73%
Massachusetts Career Development Center	Non-SDA/PIC	119	66	55%	63	95%	53%
Seattle-King County PIC	SDA/PIC	432	150	35%	150	100%	35%
Knoxville-Knox County CAC	Non-SDA/PIC	80	51	64%	21	41%	26%
Home Builders Institute	Non-SDA/PIC	114	28	25%	28	100%	25%
Argus Community	Non-SDA/PIC	165	36	22%	33	92%	20%
Jackson Employment Center	Non-SDA/PIC	313	61	19%	61	100%	19%
San Diego RETC	SDA/PIC	241	47	20%	37	79%	15%
Southeast Tennessee PIC	SDA/PIC	153	88	58%	21	24%	14%
Hennepin County TEA	SDA/PIC	379	25	7%	25	100%	7%
City of Waterbury	Non-SDA/PIC	176	87	49%	10	11%	6%
Jefferson County Public Schools	Non-SDA/PIC	265	47	18%	12	26%	5%
Jobs for Homeless People	Non-SDA/PIC	531	27	5%	17	63%	3%
City of St. Paul	Non-SDA/PIC	190	20	11%	6	30%	3%
Kentucky Domestic Violence Association	Non-SDA/PIC	412	117	28%	13	11%	3%
Elgin Community College	Non-SDA/PIC	264	30	11%	6	20%	2%
Center for Independent Living	Non-SDA/PIC	649	25	4%	14	56%	2%
Fountain House	Non-SDA/PIC	180	2	1%	2	100%	1%
Friends of the Homeless	Non-SDA/PIC	140	10	7%	1	10%	1%
Boys and Girls Clubs	Non-SDA/PIC	123	15	12%	0	0%	0%
TOTAL		4,839	953	20%	553	58%	11%

Source: Quarterly Report submitted to DOL/ETA by JTHDP Sites.

more than half of their participants to JTPA, while 10 sites referred fewer than one-fifth of their participants. With respect to enrollments in JTPA, three sites enrolled more than half of their participants, while 14 sites enrolled fewer than one-fifth of their participants (nine of these sites enrolled five percent or fewer of their participants).

Six JTHDP sites reported that all of the individuals referred to JTPA were enrolled in the JTPA program. Twelve had over half of their referrals enrolled in JTPA. Only six sites reported that fewer than one-fourth of their referrals enrolled in JTPA. JTHDP sites that successfully referred and enrolled a high percentage of participants in JTPA cited three major factors for their success: (1) frequent and on-going communication between the two programs, (2) available resources to stabilize the homeless individual's situation (e.g., transitional housing and transportation assistance), and (3) proper screening of homeless individuals referred to JTPA. Several grantees (and their SDA partners) observed that it was critical for homeless-serving agencies to agree on the criteria for referring individuals to JTPA and for SDAs to provide regular feedback on how referrals worked out and ways in which the screening process might be improved.

JTHDP grantees faced a number of challenges in establishing effective referral arrangements with the JTPA service delivery system under the demonstration, including:

- **Limited Time for Partnering.** The 15-month period for the partnering phase gave grantees little time to develop and implement their partnering plan. JTHDP grantees and their partners were aware that no additional JTHDP resources would be available after the 15 months were completed. With the end of the demonstration approaching, JTHDP sites were looking for new sources of funding and/or winding down their programs. In addition, after having established and refined their service delivery systems over a five-year period preceding Phase 4, some grantees may have been reluctant to invest the time and energy to implement linkages with the JTPA system and changes in participant flow when they were in

their final year of funding under the demonstration.

- **Lack of Resources Devoted to Partnering.** JTHDP grantees received no additional resources to fund their partnering activities. Although some grantees were able to devote financial resources to these activities, most were unable to do so because of the JTHDP requirements to provide the same services for the same number of homeless individuals as the previous year. Also, SDAs received no additional funding through the JTPA program for partnering with JTHDP grantees.
- **Preferences Among Many Homeless Individuals for Jobs Rather Than Occupational Training.** Because of their lack of resources and housing, many homeless individuals had a strong preference for securing a job in the shortest time possible, rather than enrolling in longer-term training. This factor limited the number (and proportion) of JTHDP participants who were willing to be referred to JTPA for training.
- **Lack of a Mandate for SDAs to Partner with JTHDP Grantees and Limited Knowledge of JTHDP.** Although grantees were required by DOL to develop partnering arrangements, SDAs (that were potential partners) did not face similar mandates to coordinate with JTHDP grantees. In addition to the lack of a mandate to coordinate, some SDAs had only limited knowledge about the operations of the JTHDP program. For example, one grantee noted that the beginning of the partnering phase was spent educating JTPA administrators and staff at a nearby SDA about JTHDP. According to the grantee, SDA administrators and staff were “totally unaware” of the partnering initiative and had little or no knowledge of JTHDP.
- **SDA Perceptions that Serving Homeless Individuals May Affect Their Ability to Meet JTPA Performance Standards.** Some SDAs were concerned about the potential impact serving homeless individuals might have on their ability to meet JTPA performance standards. In addition, SDAs were generally already in compliance with JTPA’s 65 percent “hard-to-serve” targeting requirement, and so did not feel the need to serve additional hard-to-serve individuals.
- **Cutbacks in JTPA Program Funding.** A number of grantees indicated that their partnering SDAs had few training slots available because of cutbacks in JTPA funding. Grantees noted that their partners generally faced excess demand for training slots as it was and did not have a compelling need to serve new groups of disadvantaged individuals.

3. Efforts of Non-JTPA Grantees to Secure JTPA Funding or Set-asides of JTPA Training Slots

During JTHDP's partnering phase, non-SDA/PIC grantees were expected to increase access to JTPA training for their homeless participants either through direct funding as a JTPA service provider or through the set-aside of JTPA training slots for JTHDP participants. As illustrated in Exhibit 5-2, among the 16 non-SDA/PIC grantees, about one-third (six grantees) either became JTPA service providers (i.e., received JTPA grants to provide training for JTHDP participants) or negotiated set-asides of JTPA training slots from their partnering SDAs. Several examples of the ways non-JTPA grantees partnered successfully with SDAs follow:

- The Center for Independent Living (CIL) had established linkages with its SDA partner, the Alameda County Private Industry Council, well before Phase 4 of JTHDP. When the Alameda County PIC solicited proposals from service providers through its regular procurement process, CIL submitted a proposal to become a JTPA vendor. CIL was awarded a contract by the Alameda County PIC to serve 16 JTPA-eligible homeless individuals. Under the stipulations of the contract, CIL provided case management and support services and subcontracted the training component to another PIC-approved training organization.
- Knoxville-Knox County Community Action Committee (CAC) and its JTPA partner (the Knoxville SDA) were co-located. As a result of the Phase 4 partnering focus, CAC and its SDA partner initiated regularly scheduled meetings to discuss potential JTPA referrals and the status of JTHDP participants already referred to or enrolled in JTPA, thereby increasing the access JTHDP participants had to JTPA.
- Jobs for Homeless People (JHP) negotiated contracts with both of its SDA partners (the Montgomery County PIC and the District of Columbia Department of Employment Services) to provide commercial driver's license training for JTPA-eligible homeless individuals. In addition, JHP established a referral system that allowed its Day Resource Center to refer JTHDP participants to one of its partnering SDAs for JTPA assessment and, if appropriate, enrollment in JTPA occupational skills training.

**EXHIBIT 5-2:
OVERVIEW OF PARTNERING ARRANGEMENTS AND IMPACTS**

Grantee	SDA Partner	JTPA Provided Direct Funding or Set Aside Training Slots	Grantee Provided Technical Assistance	Grantee Assisted with Creation of Homeless-Serving Network	Other Impacts
Non-SDA/PIC JTHDP Grantees					
Jackson Employment Center	<ul style="list-style-type: none"> ➤ Cochise County PIC ➤ Tucson PIC 		✓	✓	<ul style="list-style-type: none"> ➤ 20 homeless people relocated from partner to grantee county to receive employment and training services.
Center for Independent Living	<ul style="list-style-type: none"> ➤ Alameda County PIC ➤ Oakland PIC 	✓	✓	✓	<ul style="list-style-type: none"> ➤ CIL played a leading role in establishing a Regional Homeless Initiative Employment Collaborative with service providers from six counties, including regional DOL representatives, homeless service providers, PIC representatives, and city and county homeless coordinators. ➤ Increased numbers of African Americans and people with addiction issues served by JTPA Title II-A funds.
City of Waterbury	<ul style="list-style-type: none"> ➤ Regional Workforce Development Board of Waterbury 	✓	✓		<ul style="list-style-type: none"> ➤ JTHDP staff attended weekly JTPA meetings and the JTHDP Job Developer worked part-time at the JTPA office. ➤ JTPA staff decided to provide pre-employment training workshops based on JTHDP grantee's model to all JTPA applicants.
Jobs for Homeless People	<ul style="list-style-type: none"> ➤ Montgomery County PIC ➤ District of Columbia Department of Employment Services 	✓	✓	✓	<ul style="list-style-type: none"> ➤ Facilitated cooperative efforts by public and private employment and training providers in the city.

**EXHIBIT 5-2 (CONTINUED):
OVERVIEW OF PARTNERING ARRANGEMENTS AND IMPACTS**

Grantee	SDA Partner	JTPA Provided Direct Funding or Set Aside Training Slots	Grantee Provided Technical Assistance	Grantee Assisted with Creation of Homeless-Serving Network	Other Impacts
Non-SDA/PIC JTHDP Grantees					
Home Builders Institute	<ul style="list-style-type: none"> ➤Capital Area PIC ➤Nashville PIC ➤Salt Lake County Economic Development and Job Training Department ➤Tri-Valley PIC 		✓	✓	<ul style="list-style-type: none"> ➤Debriefing model developed to bring homeless service providers together to assess needs and coordinate future services to the homeless.
Elgin Community College	<ul style="list-style-type: none"> ➤Kane, DeKalb, Kendall PIC 		✓		<ul style="list-style-type: none"> ➤At weekly JTHDP/JTPA staff training sessions, staff shared information and successful strategies for serving homeless individuals.
Jefferson County Public Schools	<ul style="list-style-type: none"> ➤Louisville/Jefferson County PIC 		✓		<ul style="list-style-type: none"> ➤Bi-weekly meetings between JTHDP and partner staff. ➤The PIC and the housing authority funded a housing manager position to assist homeless JTPA participants to secure housing at the conclusion of JTHDP.
Kentucky Domestic Violence Association	<ul style="list-style-type: none"> ➤Lincoln Trail Development District ➤Louisville/ Jefferson County PIC ➤Purchase Area Development District ➤Mayor of Lexington, Office of Employment and Training ➤Northern Kentucky Area Development District 	✓			<ul style="list-style-type: none"> ➤At two of the seven grantee sites, PICs agreed to set aside JTPA slots for JTHDP clients; the other five had less formal referral arrangements.

**EXHIBIT 5-2 (CONTINUED):
OVERVIEW OF PARTNERING ARRANGEMENTS AND IMPACTS**

Grantee	SDA Partner	JTPA Provided Direct Funding or Set Aside Training Slots	Grantee Provided Technical Assistance	Grantee Assisted with Creation of Homeless-Serving Network	Other Impacts
Non-SDA/PIC JTHDP Grantees					
Massachusetts Career Development Institute	<ul style="list-style-type: none"> ➤Hartford Employment Resources Development ➤Springfield SDA 	✓	✓	✓	➤JTHDP staff served as a resource for JTPA staff, providing assistance in recruiting and finding resources for homeless clients.
Boys and Girls Clubs	<ul style="list-style-type: none"> ➤Montgomery County PIC ➤Prince Georges County PIC 		✓		
City of St. Paul	➤Ramsey County PIC		✓	✓	
Fountain House	➤New York Department of Employment				
Argus Community	➤New York Department of Employment				
Friends of the Homeless	➤Columbus PIC		✓		➤Two of partner's staff now conduct intake and referral at the grantee's emergency shelter.
Knoxville-Knox County CAC	➤Knoxville SDA	✓	✓		<ul style="list-style-type: none"> ➤JTPA staff trained JTHDP staff how to pre-assess homeless individuals for their ability to meet JTPA performance standards. ➤JTHDP staff trained JTPA staff how to more effectively assist homeless individuals to succeed once enrolled in JTPA.
Tucson Indian Center	➤Phoenix Indian Center		✓		➤Provided partner with a Homeless Program Development Manual and a training session.

**EXHIBIT 5-2 (CONTINUED):
OVERVIEW OF PARTNERING ARRANGEMENTS AND IMPACTS**

Grantee	SDA Partner	JTPA Provided Direct Funding or Set Aside Training Slots	Grantee Provided Technical Assistance	Grantee Assisted with Creation of Homeless-Serving Network	Other Impacts
SDA/PIC JTHDP Grantees					
San Diego RETC	↳Orange County SDA	✓			
Hennepin County TEA	↳Minneapolis Employment & Training Program	✓	✓	✓	↳Established a homeless referral service including JTPA training and JTHDP services.
Southeast Tennessee PIC	↳North Tennessee PIC	✓	✓		↳Because of heightened awareness both SDAs offered expanded job training services to homeless individuals through the One-Stop Career Centers. ↳Partner SDA realized a 46% increase in the number of homeless persons served.
Snohomish County PIC	↳Northwest Washington PIC	✓	✓		
Seattle-King County PIC	↳PIC of Portland	✓	✓		↳Held initial meetings with partner, and set up a structure for continued technical assistance. Because of changes within the partner SDA, the TA efforts were put on hold.
TOTALS		11	17	7	

Source: JTHDP grantee final reports submitted to DOL in November 1995 and follow-up telephone interviews conducted by James Bell Associates staff with selected JTHDP grantees in the fall of 1996.

Despite the success of some JTHDP grantees in partnering with the JTPA system, about two-thirds (10 grantees) of the non-SDA/PIC grantees reported that they were unable to negotiate successfully the set-aside of JTPA training slots or to become JTPA service providers. A number of the reasons for their difficulties in establishing successful collaborations with the JTPA system were discussed earlier, including: concerns regarding the SDA's ability to meet JTPA performance standards, lack of a mandate for JTPA SDAs to partner, limited JTPA and/or JTHDP funding to support the partnering effort, and a limited time period to achieve results under the partnering phase.

4. Efforts of SDA/PIC Grantees to Enroll JTHDP Participants in Regular Title II-A Activities

While all five SDA/PIC grantees enrolled some JTHDP participants in their regular Title II-A program, they reported only marginal changes during Phase 4 over previous phases in the extent to which they partnered their JTHDP activities with their regular Title II-A activities. Only one SDA grantee enrolled more than half of its JTHDP participants in its regular Title II-A program -- Snohomish (100 percent of JTHDP participants were enrolled in JTPA). The other four SDA/PIC grantees enrolled 35 percent or less of their JTHDP participants in JTPA -- Seattle King-County PIC (35 percent), San Diego RETC (15 percent), Southeast Tennessee PIC (14 percent), and Hennepin County TEA (7 percent). The constraints to expanding the number of homeless individuals enrolled during the partnering phase were similar to those cited by non-SDA/PIC grantees: concerns over ability to meet JTPA performance standards, limited availability of JTPA funds (and available slots), preferences among many homeless individuals for

immediate jobs rather than longer-term occupational training, and the relatively short time horizon (i.e., 15 months) of the partnering phase.

5. Provision of Technical Assistance to Partnering PICs/SDAs

As illustrated in Exhibit 5-2, four-fifths (17 of 21) of the Phase 4 grantees provided technical assistance to their SDA partner(s) relating to delivery of effective services for homeless individuals and improving access to Title II-A services for homeless individuals. One-third (seven of 21) of the Phase 4 JTHDP grantees provided technical assistance that helped their partnering SDA create or expand the network of human service agencies providing employment, training, housing, and support services for homeless individuals within the partner's community. Several examples of the types of technical assistance provided and the ways in which partners were helped in their efforts to enhance service delivery for homeless individuals follow:

- The partnership between the Seattle-King County Private Industry Council (the JTHDP grantee) and the Private Industry Council of Portland included a contract for the Seattle-King County PIC to provide the following types of technical assistance to the Portland PIC: (1) acquaint staff with best practices for serving homeless individuals, (2) provide staff with a one-day training seminar, (3) assist staff to utilize identified resources and apply best practices to the City of Portland's homeless strategy, and (4) reassess Portland's plan for expanding the number of homeless individuals enrolled in JTPA at the end of the project to determine next steps for serving homeless individuals. Although JTPA funding cuts and resulting program shifts at the Portland PIC precluded successful implementation of the entire plan, a strategy for serving homeless individuals was cooperatively developed and, according to the partner, awareness of homeless issues and needs was heightened in the partner's community.
- The Jackson Employment Center (JEC), in addition to partnering with its local PIC, partnered with the Cochise County PIC. JEC partnered with the Cochise County PIC, in part, because of the lack of homeless-serving agencies in this rural county. JEC staff visited with the Cochise County PIC staff to discuss the steps for mobilizing human service providers to expand services to homeless individuals

in Cochise County.

- The Home Builders Institute designed a workshop for its homeless training sites to promote partnering with JTPA and other homeless service providers. All homeless-serving providers in the community were invited to convene and discuss effective strategies for serving homeless individuals and document future needs for homeless employment and training services. The workshop sessions included discussions on: (1) building coalitions and partnerships, (2) effective relationships with employers, (3) lessons learned from JTHDP participation, (4) demographic characteristics of homeless individuals, and (5) building a successful employment and training program for homeless individuals.
- Although their offices were separated by more than 100 miles, the Southeast Tennessee PIC helped its partner, the North Tennessee PIC, develop and implement a homeless outreach plan and provided technical assistance regarding serving homeless individuals through mutual site visits and participation in local conferences and workshops. The technical assistance provided was credited with enhancing the awareness of the partnering SDA about providing targeted services for homeless individuals. In addition, the North Tennessee PIC experienced a 46 percent increase in the number of homeless individuals served during the year the partnering effort was initiated.

B. TRANSITIONING FROM JTHDP FUNDING

Grantees were encouraged throughout Phase 4 to seek alternative sources of funding for employment and training activities. In addition to stressing the importance of transferring the knowledge learned from the demonstration effort to improve access and services available to homeless individuals through the JTPA program, DOL/ETA sought to support the efforts of grantees to continue to play key roles in the provision of employment and training services for homeless individuals within their communities after the demonstration program had ended.⁵

⁵In 1994, Phase 1 and Phase 2 grantees who did not receive Phase 3 funding were surveyed to determine the status of their employment and training programs for homeless individuals. Thirty-seven of the 42 former grantees were successfully contacted and interviewed. Among the 37 sites surveyed, four-fifths (30 of 37 grantees) continued to deliver employment and training services to homeless individuals in their localities after they no longer received JTHDP funding. Each of the seven programs no longer delivering

1. Status of Phase 4 JTHDP Grantees at the Conclusion of the Demonstration Program (in November, 1995)

As shown in Exhibit 5-3, nearly two-thirds (13 of the 21) of the Phase 4 grantees continued providing employment and training services to homeless individuals after JTHDP funding was discontinued.⁶ Many JTHDP grantees sought additional funding to replace JTHDP funds, but even with additional funding from other sources reported being unable to maintain their JTHDP level of services. Some grantees indicated they lacked funds for support services essential for homeless individuals' success in employment and training activities or had to target their services more specifically to certain populations. For example, at the conclusion of JTHDP, the Jackson Employment Center restricted its basic and vocational training opportunities to homeless AFDC recipients and youth ages 16 to 24. Although continuing to offer employment and training services to homeless women (and their children) at six of seven former JTHDP sites, the Kentucky Domestic Violence Association was no longer able to provide rent deposits, telephone hook-up, school enrollment fees, or other cash assistance to employment and training participants.

The eight programs no longer delivering employment and training services to homeless individuals cited lack of funding as the primary reason. Three SDAs, two educational organizations, two local government agencies, and one community-based organization terminated their programs with the loss of JTHDP funding. Grantees terminating their programs generally used the three-month phase-out period (at the end of Phase 4) to refer their remaining JTHDP

employment and training services to homeless individuals cited lack of funding as the reason.

⁶This information is based on final evaluation reports submitted by grantees to DOL in November 1995 and follow-up telephone calls to selected grantees in the fall of 1996.

**EXHIBIT 5-3:
THE STATUS OF JTHDP PHASE 4 GRANTEES AS OF NOVEMBER, 1995**

Program	Program Operating Nov. 95	Comments
Jackson Employment Center	✓	After JTHDP ended, JEC limited their program to homeless AFDC recipients and youth only.
San Diego RETC	✓	San Diego RETC devotes Title II-A resources, through open competition, to provide services for homeless JTPA-eligible clients.
Center for Independent Living	✓	CIL separated from its parent organization and became an independent nonprofit organization to better respond to the current funding environment. CIL continued to provide the range of services provided under JTHDP and plans to expand their services and number of clients by opening a second office.
City of Waterbury		
Jobs for Homeless People	✓	JHP consistently expanded under JTHDP and now operates four offices. With funding that enabled it to provide increased services to more people, JHP expanded into housing provision for job training participants.
Home Builders Institute	✓	Although HBI's JTHDP training sites closed, they received HUD funds to establish a construction training program for homeless women in Virginia.
Elgin Community College		
Jefferson County Public Schools		
Kentucky Domestic Violence Association	✓	Six of KDVA's seven sites continued to provide employment and training services at the conclusion of JTHDP, although four of these six sites did not obtain replacement funding. The experiences and linkages developed under JTHDP enabled the staff to incorporate training services into their program. Two sites did secure replacement funding and will continue providing services similar to those provided under JTHDP.
Massachusetts Career Development Institute	✓	MCDI plans to provide similar services to a similar number of homeless individuals with HUD and other funding.
Boys and Girls Clubs		
City of St. Paul		Subcontracting organizations formed extensive linkages during the demonstration and agreed to continue to coordinate services.
Hennepin County TEA		
Fountain House	✓	

**EXHIBIT 5-3 (CONTINUED):
THE STATUS OF JTHDP PHASE 4 GRANTEES AS OF NOVEMBER, 1995**

Program	Program Operating Nov. 95	Other Comments
Argus Community	✓	To make up for loss of JTHDP funds, Argus focused more on their work experience program, which generates income from the goods produced through the work experience.
Friends of the Homeless	✓	Friends of the Homeless received a JTPA contract to provide readjustment services to homeless dislocated workers (under Title III). They also opened an employment resource center providing resources, pre-employment training, and information and referral services and, through written agreement, provide clients access to employment services at eleven different agencies.
Southeast Tennessee PIC		Southeast Tennessee PIC helped develop Chattanooga's Comprehensive Housing Affordability Strategy. It also worked with two nonprofits to develop a new housing program for the homeless.
Knoxville-Knox County CAC	✓	JTHDP participants were transferred to a different HUD funding stream under which they continued to receive the same services.
Snohomish County PIC		The PIC's JTHDP housing subcontractor received HUD funds to provide housing, case management, and some employment services to homeless individuals.
Seattle-King County PIC	✓	JTHDP participants were transferred to a new HUD funding stream under which they continued to receive the same services.
Tucson Indian Center	✓	Tucson Indian Center continued to serve homeless Indians and entered into a partnership with the Pasqua Yaqui Tribe to provide housing and employment services.
Total	13	

participants to jobs or to other service providers. Often clients were referred to other programs that offered ongoing case management services. For example, Hennepin County Training and Employment Assistance Office's subcontractor, Catholic Charities, agreed to maintain contact with recently placed JTHDP participants and their employers to mediate any disputes or conflicts that might arise on the job, assist participants in adjusting to work and troubleshooting problems that might arise, and help participants locate affordable housing.

Despite discontinuing specific initiatives to provide employment and training for homeless individuals, several grantees noted that the lessons they had learned and the linkages they had created with other homeless-serving agencies would have long-lasting effects on their service delivery systems. For example, although Jefferson County Public Schools discontinued their employment and training program for homeless individuals at the conclusion of the demonstration, their own involvement and their efforts to bring others into the local homeless coalition during the demonstration resulted in permanent changes at the PIC they partnered with during Phase 4. This PIC and the local housing authority jointly funded a homeless housing manager position (located at the PIC) to assist homeless JTPA applicants and participants to secure housing. Therefore, while some programs terminated, the lessons learned from JTHDP affected the local communities' efforts to serve homeless individuals and families. One grantee noted:

...collaborations built by the program [JTHDP] have a permanent local effect. Nonprofit developers and builders, the private sector, and social service providers have built new professional relationships...and the strong community awareness of homeless issues changed the political climate within which homelessness is discussed and addressed.

2. Funding Sources for Phase 4 Grantees' Continuation of Service

The 13 grantees continuing after the termination of JTHDP funding (in November 1995) received funds from a variety of sources, including: HUD, state and local public sources, JTPA Title II-A and Title III, private foundations, and Ameri-Corps/Vista volunteer programs. A number of grantees reported being part of local teams of human service organizations receiving HUD Supportive Housing Program (SHP) grants. SHP grants were applied for in conjunction with other human service agencies to ensure that a continuum of care, including employment and training services, was provided within localities for homeless individuals and families. Grantees obtaining SHP funds reported that linkages developed with other homeless-serving agencies and experiences with serving homeless individuals during JTHDP, helped to position their organizations to be a part of the local network of organizations responding to the SHP grant request. Other grantees, through their experience with JTHDP, were able to successfully access state or local funds. For example, the Knoxville-Knox County Community Action Committee accessed numerous funding sources for the range of services they hoped to offer. (They anticipated running a program very similar to JTHDP with different funding sources.) State sources (various grant programs offered by the Tennessee Department of Health and Human Services) were used to fund a homeless assistance program, a counseling and recovery program for homeless individuals, and a refugee social service program. CAC's locality provided funding for an emergency service program for homeless individuals.

Grantees that were most successful in obtaining funds to replace JTHDP funds emphasized: (1) being part of a local network of service providers working together to address the problem of homelessness within their locality comprehensively and (2) seeking funding from a

diverse range of sources, including both public and private sources. Examples of two JTHDP grantees that were particularly successful in acquiring additional funds to replace JTHDP grants follow:

- By the conclusion of JTHDP, Jobs for Homeless People (JHP), in Washington, D.C., had received grants or contracts to provide employment and training services for homeless individuals from six different sources: (1) the D.C. Initiative to End Homelessness -- a contract to provide employment and training services; (2) the HUD Supportive Housing Program -- \$474,000 over three years to be part of a network of homeless-serving agencies in the locality; (3) JTPA -- a \$60,000 contract to provide commercial drivers' license (CDL) training; (4) the Agnes E. Meyer Foundation -- a \$20,000 grant to provide employment and training services; (5) the Hattie Strong Foundation -- a \$3,000 grant to provide CDL training; and (6) the Washington Post -- a \$1,000 grant to provide CDL training. A JHP administrator credited the organization's strong and persistent emphasis on seeking funds from a diverse range of sources for the organization's ability to continue to serve homeless individuals after JTHDP funding had concluded: "JHP has made it a priority throughout JTHDP to research and cultivate sources of replacement funding for the DOL grant. JHP has been successful in these endeavors and has ensured the stability of the organization and the continuity of services to participants."
- Similarly, by the conclusion of JTHDP, the Center for Independent Living (in Berkeley, CA) had received funding from nine different sources: (1) a HUD Special Purpose Grant -- \$1.25 million for employment and training services; (2) a Community Development Block Grant -- \$99,983 to hire two job counselors; (3) a HUD Supportive Housing Program grant -- \$457,641 to serve 1,200 disabled homeless persons over three years and \$606,578 to begin a Homeless One-Stop Welfare-to-Work Employment Support System; (4) a grant from the Northern California Grantsmakers Task Force on Homelessness -- \$20,000 to provide housing subsidies for homeless individuals; (5) a J. M. Long Foundation grant -- \$1,300 to upgrade computer software in the Homeless Learning Center; (6) a Lowell Berry Foundation grant -- \$2,000 to provide pre- and post-placement material assistance to participants; (7) a contract from JTPA Title II-A to provide job training; (8) a HUD Regional Homeless Initiative grant; and (9) assignment of seven VISTA volunteers -- three job developers, one grant writer, two literacy volunteers, and one volunteer recruiter.

Hence, beyond their original mandate "to provide information and direction for the future of job training for homeless Americans," many JTHDP grantees have continued to provide

services for homeless individuals within their communities after the conclusion of the demonstration. DOL/ETA's emphasis on: (1) securing alternative funding, (2) building comprehensive case-managed service delivery systems, and (3) linking with networks of homeless-serving providers helped to enable the majority of Phase 4 JTHDP grantees to continue providing employment and training services for homeless individuals even after the available funds through JTHDP had been exhausted.

C. SUMMARY

The final phase of JTHDP involved a 15-month transition period, shifting the focus of JTHDP to building an enhanced capability under JTPA Title II-A to serve homeless individuals. The 21 JTHDP grantees referred 20 percent of Phase 4 participants to JTPA. Of those referred to JTPA, 58 percent were enrolled in JTPA, representing 11 percent of all JTHDP Phase 4 participants. There was considerable variation across sites in terms of the proportion of participants both referred and enrolled in JTPA. Five sites referred more than half of their participants to JTPA, while 10 sites referred fewer than one-fifth of their participants. With respect to enrollments in JTPA, three sites enrolled more than half of their participants, while 14 sites enrolled fewer than one-fifth of their participants. Those sites reporting a high percentage of JTPA-referred JTHDP participants enrolling in JTPA cited two major factors for their success: (1) frequent and on-going communication between JTHDP and JTPA administrators/staff and (2) careful screening of JTHDP participants for referral to JTPA.

Even with good communication and careful screening of referrals, JTHDP grantees faced a number of challenges in establishing effective referral arrangements with the JTPA service

delivery system under the demonstration, including: limited time and resources to implement partnerships, perceptions that serving the homeless may adversely affect the ability of SDAs to meet JTPA performance standards, cutbacks in JTPA program funding, and preferences among many homeless individuals for jobs rather than occupational training.

Nearly two-thirds (13 of the 21) of Phase 4 grantees continued providing employment and training services to homeless individuals after JTHDP funding was discontinued. Many, though, reported being unable to maintain their JTHDP level of services, e.g., fewer support services or targeting their services to certain populations. The eight programs no longer delivering employment and training services to homeless individuals cited lack of funding as the primary reason. Despite discontinuing specific initiatives to provide employment and training for homeless individuals, several grantees noted that the lessons they had learned and the linkages they had created with other homeless-serving agencies would have long-lasting effects on their service delivery systems.

The 13 grantees receiving funding after the termination of JTHDP funding reported receiving funds from a variety of sources, including: HUD (particularly Supportive Housing Program grants), state and local public sources, JTPA Title II-A and Title III, private foundations, and Ameri-Corps/Vista volunteer programs. Grantees that were most successful in obtaining funds to replace JTHDP funds emphasized being part of comprehensive local networks addressing the problem of homelessness and seeking funding from a diverse range of public and private sources.