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# 2-Gen Economic Mobility Programs Report

August 2024



# DEPARTMENT OF TRANSITIONAL ASSISTANCE 2-GEN ECONOMIC MOBILITY PROGRAMS REPORT

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### REPORT OVERVIEW

Pursuant to line item 4401-1003 of the fiscal year 2024 (FY24) General Appropriations Act (GAA), the Department of Transitional Assistance (DTA) is required to report on the status of the administration of a 2-Gen grant program that supports economic mobility among high-risk young parents. The grant program is jointly administered by DTA and the Department of Public Health (DPH) through the Massachusetts Pregnant and Parenting Teen Initiative. Because FY2024 has not concluded before the submission of this report, DTA reported on the previous fiscal year's activities.

### **DEPARTMENT OF TRANSITIONAL ASSISTANCE MISSION**

The Department of Transitional Assistance's; mission is to assist and empower low-income individuals and families to meet their basic needs, improve their quality of life, and achieve long-term economic self-sufficiency. We do this through a comprehensive system of programs and supports, including food and nutritional assistance, economic assistance, and employment supports. DTA serves one out of every six people in the Commonwealth including working families, children, older adults, and people with disabilities.

### **BACKGROUND**

In recent years, DTA has emphasized removing economic mobility barriers through policy reforms and the enhancement of the Department's employment support programming. Part of this barrier removal is exploring new approaches to meaningfully engage with families who receive Transitional Aid to Families with Dependent Children (TAFDC) benefits. Beginning with our Young Parent Program Request for Responses (RFR) in 2018, the Department has implemented a Two-Generational (2-Gen) approach in many of our employment and training programs. The 2-Gen approach recognizes that outcomes for parents and children are intertwined and cannot develop independently of one another. A 2-Gen approach is of the utmost importance as it is necessary to address not only the current economic disparities, but how those disparities will continue to affect future generations.

Additionally, DTA has focused on increasing support and opportunities for parents under 25 in recent years so that they might receive more coordinated and streamlined services. This work is coordinated through the Whole Family Approach to Jobs, with leadership and representation from DTA and the Department of Public Health (DPH). This collaboration supports improving cross-sector service coordination, particularly for high-risk parents under 25 with young children, who often are falling through the cracks of service delivery.

## 2-GEN ECONOMIC MOBILITY PROGRAMS FOR HIGH-RISK YOUTH

Following an investment of \$3.5 million in the state's previous FY23 GAA, DTA entered into an interagency service agreement (ISA) with the Department of Public Health to continue administering a 2-Gen grant program that supports economic mobility and cross-sector service

collaboration among parents under 25 through the Massachusetts Pregnant and Parenting Teen Initiative (MPPTI). For more than a decade, MPPTI has provided multidisciplinary, team-based case management to young parents in Massachusetts; with a goal of increasing life opportunities and enhancing family stability among expectant adolescents and young families in priority populations and communities.

DTA and DPH continued to work with nine community-based agencies to provide targeted support to high-risk expectant and parenting adolescents using the MPPTI model. All funded agencies served at least one community with high teen birth rate (Tier 1 community), while some agencies also served a geographically nearby Tier 2 community with moderate teen birth rates. Please reference (Table 1) for currently funded community-based agencies and T1/T2 priority communities.

Table I  Massachusetts Pregnant and Parenting Teen Initiative Providers					
Priority Community – T1/T2	Agency				
Lawrence/Methuen	Family Services of the Merrimack Valley				
Lowell	Community Teamwork Inc.				
Brockton	Brockton Neighborhood Health Center				
New Bedford	Meeting Street				
Chelsea/Everett	Roca Inc				
Springfield/Holyoke	The Care Center				
Fitchburg	LUK				
Worcester/Southbridge	YOU Inc.				
Greater Boston	BMC				

Since the partnership between DTA and DPH began, MPPTI has served a total of 1,007 parents under age 25. In FY23, MPPTI served 549 participants. Demographics for FY23 program participants can be found in **Table 2**. When the collaboration between DTA and DPH began in FY21, MPPTI participants included COVID-19 response participants who received services 1-3 times to meet urgent needs related to the effects of the COVID-19 pandemic, like housing or rental assistance, utility payment assistance, food, transportation, and assistance with applying for benefits. Beginning in FY22 and continuing into FY23 and FY24, all participants served are MPPTI case management participants, meaning they receive more comprehensive ongoing services, including not only meeting urgent concrete needs, but also case management, health promotion, education/employment, and child health/parenting services and resources.

Table 2									
MPPTI Participant Demographics, FY23									
Age at Intake	Number	Percent		Housing at Intake	Number	Percent			
14-19 years	201	37%		Lives with Parents or Partner's Parents	224	41%			
>20 years	348	63%		In Apartment/House	106	19%			
Sex / Gender*	Number	Percent	At a relative's home		71	13%			
Male	43	8%		At a friend's or other unrelated adult's home	72	13%			
Female	505	91%		Other	76	14%			
Non-binary/Genderqueer	<11	-	_	School Status at Intake	Number	Percent			
Other	<11	-		Enrolled in HiSET program	135	25%			
Sexual Orientation*	Number	Percent		Enrolled in middle school or high school	54	10%			
Straight/Heterosexual	502	91%		Enrolled in a job training program	<11	-			
Gay or Lesbian	<11	-		Enrolled in an institution of higher education	22	4%			
Bisexual	38	7%		Not in school	325	59%			
Something Else / I Haven't Decided	<11	-		On maternity leave	<11	-			
Race / Ethnicity*	Number	Percent		Employment Status at Intake	Number	Percent			
American Indian/Alaska Native	<11	ı		Employed full-time (unsubsidized)	72	13%			
Asian	18	2%		Employed part-time (unsubsidized)	69	13%			
Black	95	14%		Employed full-time (subsidized)	20	4%			
Latinx/Hispanic	475	69%		Employed part-time (subsidized)	13	2%			
White	79	11%		Not Employed	375	68%			
Declined to state	<11	-		Current or Previous Involvement with DCF at Intake	Number	Percent			
Other	18	3%		Yes	154	28%			
Primary Language	Number	Percent		No	316	58%			
	T			Missing	79	14%			
English	268	49%		Pregnancy Status at Intake	Number	Percent			
Spanish	165	30%		Pregnant/Expecting	133	24 %			
Portuguese	13	2%		Parenting/Postpartum	415	76%			
Cape Verdean Creole	<11	-	_	*Total will not add up to 100% because participants could select more than one category.		ints could			
Haitian Creole	10	2%							
Other	<11	-							
Missing	83	15%							
For client privacy, demographic	1.4. 1.1	1 .							

For client privacy, demographic data under 11 is suppressed.

Table 2 continued						
Benefits Received at Intake*	Number	Percent				
Healthy Families Program	88	13%				
Childcare Assistance Program	55	8%				
Early Intervention Program	57	9%				
Early Intervention Partners Program	<11	i				
Early Head Start	<11	1				
Head Start Program	<11	-				
Healthy Steps Program	<11	i				
Parents as Teachers (PAT)	<11	-				
Section 8 or other housing subsidy	17	3%				
SSI	20	3%				
WIC	455	68%				
Transportation benefits	64	10%				
Help with utility bills	<11	-				
Parent Child Home Program	<11	-				
Other	23	3%				
None	141	21%				

For client privacy, demographic data under 11 is suppressed.

Among all 549 FY23 MPPTI participants, 65% have been in the program for 6+ months to date. Among participants who were active in the program for 3+ months during FY23, 96% received concrete supports, defined as assistance with accessing benefits, housing, food, clothing, transportation, or childcare. Fifty-five percent (55%) of participants who were not receiving DTA services at time of intake enrolled in DTA benefits during the program. In addition, 30% of participants who entered the program as unemployed or on maternity leave gained employment during the program. A breakdown of the performance and outcome measure averages across the funded sites can be found in **Table 3**.

Table 3 FY23 MPPTI Program Averages: Performance and Outcome Measures				
Performance Measure	FY23 Progress			
Program sites maintain a caseload of at least 35 active participants per community served	Average of 44 participants served per month			
Participants active in the program for 6+ months	65%			
Participants with at least two monthly visits	78%			
Participants active for 3+ months that receive concrete support services	96%			
Participants not receiving DTA benefits at program intake that receive information on enrollment within 3 months of intake	40%			
Participants with a positive depression screen either receiving or referred to counseling and/or support services	71%			
Outcome Measure	FY23 Progress			
<u>Change in education status/enrollment:</u> percent of participants who were not enrolled in school at the time of intake who enroll during the program	31%			
Change in employment status: percent of participants whose employment	30%			
status was "unemployed" or "maternity leave" at time of intake who gain employment during program				
status was "unemployed" or "maternity leave" at time of intake who gain employment during program  Change in housing status: percent of participants whose housing status was unstable at time of intake who gain stable housing during program	62%			
employment during program  Change in housing status: percent of participants whose housing status was	62% 55%			

### **CONCLUSION**

This DTA and DPH collaboration, along with additional support from Whole Family Approach to Jobs consultants, has led to concrete efforts that support parents under 25. The agencies have partnered with the National Parent Leadership Institute to pilot community-based parents under 25 advisories in New Bedford, Worcester, Lawrence, Boston, Holyoke, and Fitchburg. The importance of their voices in providing quality services and supporting economic mobility has become increasingly clear, and these advisories provide the opportunity for parents under 25 to share their story in a safe, meaningful, and effective way. As leaders of the Young Parents with Young Children Working Group, DTA and DPH are committed to providing all parent under 25 stakeholders an equitable voice in policy and practice. DTA and DPH served as advisors on matters relating to parents under 25 on the STEPS for Youth: Science to Enhance Policy Success from the UCLA Center for the Developing Adolescent. STEPS is an interactive, online tool to inform policymakers and ensure that procurement, programs rules, funding, and policies are aligned to meet the developmental goals of young people. Additionally, DTA and DPH have been collaborating with the Center for Child Well Being and Trauma on the development of a toolkit and community of practice for young parent practitioners. The toolkit is strength-based and racial equity informed, and the workgroup is in the process of training parent practitioners in the

contents of the toolkit. The toolkit draws upon the expertise of many of our organizations and was reviewed by parents. It covers topics such as adolescent brain development, resilience and healing centered engagement, best practices in working with parents under 25; focus on key populations including immigrants; and offers training resources and links to a range of publications nationally focused on parents under 25. Both DTA and DPH value and look forward to this continued partnership.