

## Evaluation Brief

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### Pre-ETS Service Receipt

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The Promoting the Readiness of Minors in Supplemental Security Income (PROMISE) project is a 5-year, two-group, randomized controlled trial funded by the U.S. Department of Education in October 2013. Six sites were awarded funding to test the effectiveness of a multicomponent experimental intervention for improving academic, career, and financial outcomes for youth with disabilities receiving supplemental security income (SSI) benefits and their families. Awardees include Arkansas, ASPIRE (a consortium of six western states), California, Maryland, New York, and Wisconsin.

Promoting Readiness of Minors in Supplemental Security Income (PROMISE) was a joint federal initiative of the Department of Education in collaboration with the Social Security Administration, the Department of Health and Human Services, and the Department of Labor. The initiative was in response to growing concerns over the increasing number of youths who receive SSI benefits, and the subsequent poor employment outcomes achieved as adults (Honeycutt et al., 2018). The Maryland Department of Disabilities (MDOD) was awarded one of six model demonstration grants under this initiative; which required a 5-year randomized controlled study designed to implement and rigorously evaluate innovative educational, employment, and other services for transition-age

youth SSI recipients. The Maryland PROMISE model, a multi-component community-based intervention included assertive case management, work experiences, benefits counseling, and family outreach, and was designed to improve the long-term employment and economic outcomes of the participants. The study was launched in fall of 2013 with Maryland PROMISE intervention services to participating youth and ended on September 30, 2018.

Work experiences and paid employment were central features of the Maryland PROMISE intervention. A key component was to connect youth to existing employment resources, such as the vocational rehabilitation (VR) program, in Maryland called the Division of Rehabilitation Services (DORS), in order to enhance and sustain the career-related opportunities and skills they acquired during their participation in Maryland PROMISE. About midway through the intervention, the implementing regulations of the Workforce Innovation and Opportunity Act (WIOA, Public Law 113–128) were announced, with a provision mandating that state vocational rehabilitation programs reserve 15 percent of their overall funding for pre-employment transition services (Pre-ETS), which included five activities that, in collaboration with local education agencies, provide students with disabilities with an early start at job exploration to assist with transitioning from school to postsecondary education or employment.

In Maryland, historically, youth are referred to DORS two years prior to their high school exit. Most referrals to DORS are made by the school using an on-line or paper

application. A *referral* does not mean the youth is signed up for services rather it only makes the youth known to DORS. Eligibility must be determined before a youth can *receive* vocational rehabilitation services. After the referral is processed, a local DORS counselor is assigned to the “case.” The counselor is responsible for reaching out to the youth and family, typically by letter, to set up a meeting to determine eligibility for services. Once the DORS counselor has reached out, the youth and their family have ten business days to respond. When contact is made, the youth and family meet with the DORS counselor to determine service eligibility or qualification for pre-ETS. If the youth is eligible for DORS services, they then must complete an application for VR services. In instances where youth or their family do not respond to DORS within the ten-day timeframe the referral “times out” and a new referral must be processed.

In order to maximize career opportunities for Maryland PROMISE youth, both during and after the intervention, Maryland PROMISE staff invested considerable effort in assisting youth and their families to apply for DORS services, particularly pre-ETS. The purpose of this *Evaluation Brief* is to compare the extent to which youth enrolled in Maryland PROMISE, both in the treatment and usual services conditions, applied for and received DORS services up to one year after project completion.

Specifically, we addressed three research questions:

- Did the Maryland PROMISE participants differ from usual services participants on rates of referral and application to DORS?
  - *Referral* is defined as completing the necessary paperwork to make oneself known to DORS and trigger the process to determine service eligibility.
  - *Application* is defined as completing the necessary paperwork to receive full VR service, once determined eligible.
- Did the proportion of Maryland PROMISE participants differ from usual services participants on receipt of DORS services (pre-ETS and regular DORS case services)?
- Did Maryland PROMISE participants differ from usual participants on type of pre-ETS services received?

## **Method**

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### *Sample*

Maryland PROMISE enrolled 2008 youth (treatment condition: n = 997 and usual services condition: n = 1,011). In both groups, most of the Maryland PROMISE participants were male (treatment, n = 678, 68.0%; usual services, n = 640, 63.3%), and the profile of primary disabilities across youth in both groups in decreasing order was (a) mental or behavioral health disabilities (974; 48.5%); (b) intellectual or developmental disabilities (538; 26.8%); (c) autism-spectrum disorders (180; 9%); (d) sensory disabilities (112; 5.6%); (e) medical disorders (108; 5.4%); and (f) other (96; 4.8%). The treatment and usual service groups did not differ across gender and disability.

Through a data sharing agreement with MDOD, DORS provided the investigators data on all Maryland PROMISE youth for whom they served as drawn from their electronic case service files

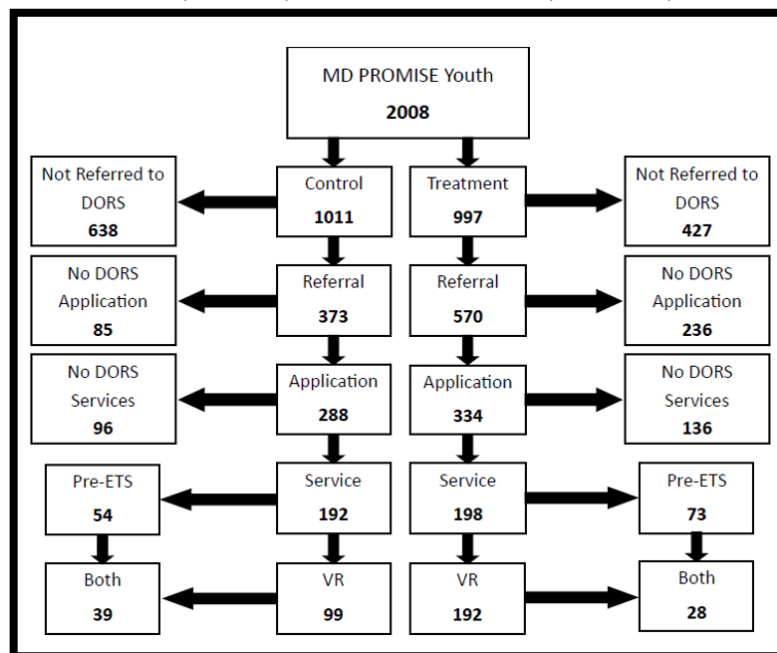
(03/01/2014 to 10/31/2019): (a) date of referral (b) application date; and (c) DORS services provided. Data obtained from the Maryland PROMISE intervention and DORS were merged by Project Identification Number identifier.

## Results

*Rates of referral and application.* Figure 1 displays the flow of referral, application, and receipt of DORS services by study participants enrolled in Maryland PROMISE and usual services (n=997 versus n=1,011, respectively; *second row*). Compared to the usual services participants, rates of referral for Maryland PROMISE participants was higher (57.2% [570/997] versus 36.9% [373 of 1,011], respectively; *third row*). Of those youth referred to DORS, Maryland PROMISE participants completed relatively more applications for services compared to usual services participants (77.2% [288/373] versus 58.6% [334 of 570], respectively; *fourth row*).

*Proportion of participants receiving Pre-ETS services by condition.* Approximately, the same proportion of Maryland PROMISE and usual services participants received either Pre-ETS services, VR services, or both (19.9% [198/997] versus 19.0% [192/1,011], respectively; *fifth row*).

**Figure 1:** Participant Flow through DORS System by MD PROMISE (n = 997) and Usual Services (n = 1011) Conditions.



*Types of Pre-ETS services received by condition.* Table 1 presents the percentages of participants in each condition who received services broken out by specific Pre-ETS service (generally less

than 5%) and specific VR service (generally less than 5%), and the aggregate proportion of Maryland PROMISE compared to usual services participants who received any Pre-ETS service (10.1% versus 9.2%, respectively), any VR service (12.5 versus 13.6%, respectively), and any Pre-ETS or VR service (12.5 versus 13.6%, respectively)(19.9% versus 19.0%). Because a very small proportion of participants in both conditions received any Pre-ETS services, VR services, or both, we cannot draw inferences about which Pre-ETS or VR service was most acceptable to participants or most strongly associated with employment outcomes.

**Table 1:** DORS Services (Pre-ETS and VR) received by participants in the *Maryland PROMISE* and *Usual Services* conditions.

Service	Condition	
	MD PROMISE	Usual Services
	n (%)	n (%)
<b>Pre-ETS</b>		
Counseling on Postsecondary Enrollment Opportunities	5 (0.5%)	3 (0.3%)
Instruction in Self-Advocacy	7 (0.7%)	12 (1.2%)
Job Exploration Counseling	37 (3.7%)	23 (2.3%)
Work-Based Learning Experiences	52 (5.2%)	52 (5.2%)
Workplace Readiness Training	28 (2.8%)	29 (2.9%)
<b>Any Pre-ETS Service</b>	<b>101 (10.1%)</b>	<b>93 (9.2%)</b>
<b>VR</b>		
Basic Academic or Remedial Literacy Training	10 (1.0%)	12 (1.2%)
Benefits Counseling: After Initial Plan for Employment	18 (1.8%)	21 (2.1%)
Hospitalization and Care	16 (1.6%)	15 (1.5%)
Job Readiness Training	19 (1.9%)	18 (1.8%)
Job Search, Placement, & Short-Term Job Coaching	43 (4.3%)	49 (4.9%)
Other Goods and Services	18 (1.8%)	15 (1.5%)
Post-Employment Authorization Codes	93 (9.3%)	89 (8.9%)
Services to Family Members	21 (2.1%)	18 (1.8%)
Transportation	32 (3.2%)	28 (2.8%)
Vocational and Occupational Skills Training	9 (0.9%)	15 (1.5%)
WTC Career and Technology Training	10 (1.0%)	12 (1.2%)
WTC Employment Services	7 (0.7%)	13 (1.3%)
WTC RTS Support	14 (1.4%)	9 (0.9%)
<b>Any VR Service</b>	<b>125 (12.5%)</b>	<b>138 (13.6%)</b>
<b>Any Pre-ETS or VR Service</b>	<b>198 (19.9%)</b>	<b>192 (19.0%)</b>

Note: No statistical differences detected across all services by Maryland PROMISE & usual services conditions.

## Conclusion

Maryland PROMISE was designed to provide a variety of career preparation and employment services to participating youth. Approximately 18 months into the study, there was an opportunity to complement these services as the regulations implementing WIOA were published, requiring state VR agencies to offer Pre-ETS to students with disabilities. As a result, Maryland PROMISE staff facilitated access to these services by connecting youth to DORS. As

revealed by this study, youth who received Maryland PROMISE services were referred to DORS more frequently than those youth receiving usual services, and they completed the application to DORS services at a slightly higher rate. However, the treatment and usual services groups did not differ substantively in receipt of actual services, either full VR or pre-ETS or both. One possible reason for the low take up rate for treatment group youth might be the fact that they were already receiving services through Maryland PROMISE, specifically work experiences, which mirror what they might have received through DORS Pre-ETS. However, that does not explain why the participation of the two groups in DORS services did not differ significantly. Given that Pre-ETS services were relatively new during the latter course of Maryland PROMISE implementation, it is also possible that capacity to serve new applicants was not yet in place for either group of youth SSI recipients. In any case, further study will be necessary to determine reasons for youth receiving SSI to choose or to not choose the pursuit of DORS services.

## References

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Honeycutt, T., Gionfriddo, B., & Livermore, G. (2018). *Promoting Readiness of Minors in Supplemental Security Income (SSI): PROMISE programs' use of effective transition practices in serving youth with disabilities*. Washington, DC: Mathematica Policy Research.

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