

# The impact of work incentives benefits counseling on employment outcomes of transition-age youth receiving Supplemental Security Income (SSI) benefits

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## Abstract.

**BACKGROUND:** Work incentive benefits counseling has been shown to be a promising practice in vocational rehabilitation and has had a demonstrated impact on positive employment outcomes for adults with disabilities (Wilhelm & McCormick 2013).

**OBJECTIVE:** In this study, the Wisconsin Promoting the Readiness of Minors in Supplemental Security Income (PROMISE) demonstration project implemented a new model of work incentive benefits counseling targeting transition-age youth receiving Supplemental Security Income (SSI) benefits including their families.

**METHODS:** PROMISE youth and families received work incentive benefits counseling through a consultative approach and impact on employment outcomes were assessed.

**RESULTS:** Preliminary results indicate that youth who received work incentives benefits counseling ( $N=535$ ) had significantly higher work activity and explored a greater number of job opportunities, than youth who did not receive benefits counseling ( $N=476$ ). Additionally, 81% of PROMISE treatment youth with earnings above the Substantial Gainful Activity (SGA) level had met with a benefits specialist at least once.

**CONCLUSION:** This study contributes to the growing evidence demonstrating that work incentives benefits counseling positively influences employment and earnings outcomes for low-income transition-age youth with disabilities. Youth and families preferred the consultation approach, providing information as needed and meeting families where they were at.

Keywords: Work incentives benefits counseling, transition-aged youth, disability, SSI, employment

## 1. Introduction

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Traditionally, individuals with disabilities have experienced poorer employment outcomes, including lower income and employment rates compared

to individuals without disabilities (Ali, Schur, & Blanck, 2011; Copeland, Chan, Bezyak, & Fraser, 2010). Nationally, 77% of working age people were employed in 2016, compared to a 36% rate of employment for working-age people with a disability (Bureau of Labor Statistics, 2018). This trend of poor employment outcomes has been shown to extend to transition-age youth with disabilities. Young people with disabilities have historically had lower employment rates compared to their counterparts without disabilities (Luecking & Wittenburg, 2009; McDonough & Revell, 2010). This employment gap widens even further when looking at transition-age youth receiving Social Security Administration (SSA) benefits (Kregel, 2012; Luecking & Wittenburg, 2009).

The federal eligibility requirements for youth to receive Supplemental Security Income (SSI) are as follows: the youth must be under the age of 18, they must have been determined eligible by the Social Security Administration (SSA) based on confirmation of significant disability, and family income must be below a set threshold. Young adults receiving SSI payments had an employment rate of only 22% compared to a 69% employment rate for all young adults ages 20–24 (Luecking & Wittenburg, 2007; Rangarajan, Reed, Mamun, Martinez, & Fraker, 2009). In addition, transition-age youth receiving SSI benefits often require additional services and supports – and help coordinating them – to achieve positive employment outcomes into adulthood (Honeycutt, Wittenburg, Luecking, Crane, & Mann, 2018).

A number of factors, including: poverty, globalization, unemployment rate, employer attitudes, and perceived loss of benefits, contribute to the disparity in employment rates between these two groups of individuals (Baldwin, 1999; Bernell, 2000; Burkhauser, Houtenville, & Wittenburg, 2003; Switzer, 2003). Research has shown that many individuals with disabilities want to work in competitive integrated employment but may be afraid of losing public benefits as a result of increased employment activity and income (Hartman, Anderson, Chan, Fried, & Lui, 2015; Lui et al., 2010; McDonough & Revell, 2010; Tremblay, Smith, Xie, & Drake, 2006). Those receiving SSA benefits frequently do not understand how employment will change their benefits or may be unacquainted with the work incentives already built into SSA programs. This uncertainty contributes to underemployment and unemployment within this population (Lui et al., 2010; Tremblay et al., 2006; Tremblay, Smith, Xie, & Drake, 2004).

As a response, work incentive benefits counseling emerged as an important service for individuals with disabilities to help improve employment outcomes. Work incentive benefit specialists provide education about the possible effects employment and increased income may have on the benefits consumers receive through SSA (Delin, Hartman, & Sell, 2012; Luecking & Wittenburg, 2007). This service assists and supports consumers, so they can make educated decisions about work and utilize the existing incentives already established in federal and state programs (Delin et al., 2012; Hartman et al., 2010; Lui et al., 2010; Tremblay et al., 2004).

### *1.1. Work incentives benefits counseling*

Work incentives benefits counseling consists of strategies, supports and services that promote self-sufficiency through work preparation, financial awareness and an understanding of the interplay between earned income and existing benefits (Golden, O'Mara, Ferrell, & Sheldon, 2000). Through the cultivation of this enhanced knowledge and awareness, individuals with disabilities are presented with the opportunity to gain independence from SSI benefits through informed choice, decreasing their reliance on public benefit programs and establishing financial well-being (Golden et al., 2000).

Most individuals who qualify for SSI benefits are also eligible for public Vocational Rehabilitation (VR) services in their state, however these services remain underutilized by this population despite data illustrating a positive correlation between the provision of VR services and employment outcomes. Over 50 percent of individuals with disabilities gained competitive integrated employment after receiving state VR services (Dutta, Gervey, Chan, Chou, & Ditchman, 2008; Leahy et al., 2014). Transition-age youth with autism spectrum disorders and learning disabilities both had higher rates of competitive integrated employment when connecting with vocational rehabilitation services (Kaya et al., 2016). Work incentives benefits counseling provided in conjunction with VR services should be considered a necessary intervention for all people seeking employment who are receiving Social Security Disability Insurance (SSDI), SSI, or public medical benefits such as Medicaid or Medicare (Hartman et al., 2015; Leahy et al., 2014; Lui et al., 2010). Work incentive benefits counseling has been shown to improve employment outcomes for individuals with

disabilities by increasing their employment rates and income (Delin et al., 2012; Hartman et al., 2015; Leahy et al., 2014; Tremblay et al., 2004; 2006). Despite the empirical evidence that work incentive benefits counseling leads to improved employment outcomes for people receiving public benefits, many states still have not fully integrated this service into their VR programs.

Previous research on work incentive benefits counseling confirms the effectiveness of this service on positive competitive employment outcomes for individuals receiving social security benefits. Tremblay et al. (2004; 2006) evaluated Vermont's initiative of providing specialized benefits counseling to SSA beneficiaries. Earned income using Unemployment Insurance (UI) data was examined for three different groups of consumers: 1) those who received benefits counseling in the VR agency; 2) a matched group of consumers currently receiving VR services but not benefits counseling; and 3) a matched group of past VR consumers who had not received benefits counseling. Although all participants received VR services, only the intervention group received additional specialized benefits counseling. Results from this evaluation revealed that all the groups had increased income over time; however, the group that received the specialized benefits counseling had significantly greater increases in mean earnings compared to the other groups even after controlling for previous earnings and other predictors (Tremblay et al., 2004; Tremblay et al., 2006). This study was one of the first to produce empirical data that demonstrated the fact that benefits counseling increased earned income for individuals receiving SSA benefits.

A more recent investigation showed similar outcomes for beneficiaries of SSDI and SSI who received work incentive benefits counseling (Delin et al., 2012). This study not only explored gains in income but also investigated whether the amount of benefits counseling had an increased impact on participant earnings. The results showed that those receiving the most benefits counseling experienced both the largest increase in income and significantly higher earnings compared to participants who received less (Delin et al., 2012). These findings help confirm evidence that more work incentive benefits counseling can lead to better employment outcomes and increased income.

Further research conducted by Wilhelm and McCormick (2013) investigated the impact of benefits counseling by focusing on the impact a written

report had on employment outcomes for consumers written by a vocational rehabilitation specialist. Results found that these written reports led to a better successful closure rate, with more individuals employed after VR services. The study also revealed higher earnings, which is likely attributed to increases in employment.

Along with vocational rehabilitation counselors, benefits specialists have been shown to be an integral part of the VR process in achieving positive employment outcomes for people receiving SSA benefits (Hartman et al., 2015; Lui et al., 2010). Lui et al., (2010) conducted an analysis of the roles and job functions of benefits specialists to further examine their vital role in VR practice. Results reported that benefits specialists execute three main job functions: 1) benefits screening (understanding); 2) benefits advisement (consultation); and 3) benefits management (supporting). The benefits specialists perform these job functions together to give beneficiaries of SSI the best options for employment while working closely with vocational rehabilitation staff to ensure understanding of benefits and how they relate to employment decisions and outcomes. The specialists self-evaluated, reporting themselves as well equipped to execute these crucial job functions despite receiving little to no official preparation.

Hartman and colleagues (2015) performed a similar analysis on benefits specialists' job functions to gauge their experience helping individuals navigate their benefits with respect to employment and increased earnings. Results indicated that the majority of benefits specialists reported their primary job functions as advising consumers on the use of work incentives and educating consumers on how employment might alter their current benefits. Additionally, half of respondents answered that their main goal was to help individuals obtain financial self-sufficiency, so they no longer need to rely on public benefits.

## 1.2. Financial capability training

In comparison to individuals with a higher income, low income and impoverished individuals are more likely to lack relevant information that would enable them to make informed financial choices and help them gain access to traditional banking institutions to begin accumulating assets (Friedman, 2005). Low-income families lacking in financial skills, such as savings, also become more vulnerable to the unpredictable nature of economic turmoil, such as health emergencies or unanticipated employment loss

(Jacob, Hudson, & Bush, 2000). Financial capability training provided in conjunction with benefits counseling can contextualize income, benefits, and assets into a much larger picture, helping to demystify a complex financial system that appears alienating and hostile to many. In order to overcome the barriers that prevent low income individuals from participating in mainstream financial practices, it is important that they are made aware of tools, pertinent information, and supports that enable them to properly utilize the resources available to them. All of these resources can be provided to this population with proper financial capabilities training.

### *1.3. Youth and benefits counseling*

These studies provide evidence that work incentive benefits counseling leads to better employment outcomes; specifically, significant increased income for individuals receiving SSA benefits. However, the previous research focused on the impact of benefits counseling on employment for working adults with disabilities. Little research has been conducted on the effect of work incentive benefits counseling for youth with disabilities. Wittenburg and Loprest (2007) found that only 22% of transition-age youth receiving SSI benefits had learned of work incentives benefits or talked to a professional about the work incentives.

### *1.4. Current study*

The current study aims to illustrate the significant impact that work incentives benefits counseling can have on employment outcomes for transition-aged youth who receive SSI. Researchers examined employment rates and income levels between youth in a treatment group who received work incentives benefits counseling, compared to youth who did not receive benefits counseling.

## **2. Methods**

### *2.1. Participants*

The study was comprised of data collected from Wisconsin youth enrolled in “Promoting the Readiness of Minors in Supplemental Security Income” (PROMISE) grant program. PROMISE is a federally funded demonstration grant performed in a variety of different sites in several states. Youth receiving SSI aged 14–16 were recruited to the program using

eligibility and contact information gained from SSA and Medicaid. Over the course of two years, 2,024 youth were enrolled into PROMISE and all enrollees received two \$15 gift cards to local stores to serve as both an incentive for enrollment and as compensation for time spent filling out the enrollment packet. All youth who enrolled were randomly assigned to either the control group or treatment group using the Random Assignment System (RAS) designed and maintained by Mathematica, the national evaluator of all the PROMISE grant sites.

Youth assigned to the control group ( $N=1,006$ ) had access to services as usual. In the control group, it was the consumer’s responsibility to apply to VR if they chose to do so. Youth assigned to the treatment group ( $N=1,018$ ) were automatically enrolled in VR services and had access to extra PROMISE services, including work incentives benefits counseling using an innovative family-centered consultation approach. Upon enrollment, they were assigned a specifically trained PROMISE Division of Vocational Rehabilitation (DVR) counselor in their area. The youth also received a tablet or iPad including a data plan, access to a family advocate in their area, and a resource team. Additionally, family members of the youth who were 15 or older – and were living in the household – could utilize the PROMISE services as well.

The extra PROMISE services consisted of work incentive benefits counseling, financial coaching and matched saving accounts, soft skills training, health literacy training, self-advocacy training, facilitating a resource team, and family advocacy training, in addition to all the employment services VR already offers. Over the course of the program, seven youth dis-enrolled in the research, bringing the total of youth receiving PROMISE services to 1,011. Of those assigned to treatment group, a little over half of the youth went through work incentive benefits counseling ( $N=535$ ).

All youth in PROMISE completed an intake form upon consenting to and enrolling in the program, which asked basic demographic information about them and their family’s household. Table 1 illustrates the detailed demographic information collected at the time of intake, all youth in the treatment group were between ages 14–16, with the majority of youth age 14. The treatment group included 675 (67%) males and 333 (33%) females. These figures were consistent with gender breakdown of all eligible youth.

Most youth identified as African American, followed by White non-Hispanic, and Hispanic (See Table 1). Primary disability at intake for treatment

Table 1  
Wisconsin PROMISE Demographic Information as Reported on the PROMISE Intake Form ( $n = 1011$ )

Primary disability	Percent	Race/ethnicity	Percent	Other demographics	Percent	Age at Enrollment	Percent
Mental Health or Behavioral	34%	African American	49%	Male	67%	14	41%
Developmental or Intellectual	30%	White non-Hispanic	36%	Single parent/guardian household	66%	15	27%
Other (e.g., learning, speech, ADHD, etc.)	25%	Hispanic	10%	Good overall health	85%	16	32%
Long-term Illness, Physical/Mobility, Sensory, Head Injury, Not Reported	11%	Other, Not Reported	5%	Annual Household Income at or below \$25,000	70%		

youth was Mental Health or Behavioral, followed by Developmental or Intellectual, and Other. Youth who had multiple disabilities often self-reported "other" because they could not identify which disability was considered their primary disability type (See Table 1). Most ( $N=818$ ) reported they had not previously worked for pay but more than half expected to work for pay ( $N=633$ ) and live independently ( $N=550$ ) in the future.

### 3. Measures

Work incentive benefits counseling was tracked by PROMISE counselors marking referral to service date and date the consumers met with the benefits specialist. Wisconsin Division of Vocational Rehabilitation (DVR) PROMISE counselors recorded the activity for the youth on their caseload in the confidential Integrated Rehabilitation Information System (IRIS) which serves as DVR's data management system; benefits specialists also recorded more detailed activities in SharePoint, a confidential data collection and sharing website. PROMISE Work Incentive Benefit Specialists recorded start and end dates, hours of service and travel, information on work incentives, age 18 redetermination, overpayments, and any concerning issues. Employment outcomes were measured by number of jobs since enrollment into PROMISE, active employment, active hours, median weekly earnings, and Substantial Gainful Activity (SGA) earning amounts. SGA earning amounts were calculated by multiplying reported average weekly earnings times 4.3 weeks in a month, and then compared to the SGA amount for that time period. PROMISE youth were required to participate in job exploration and thus were encouraged to work at least two different paid employment experiences throughout the course of the program. After data were

recorded by DVR counselors and uploaded in IRIS, it was then compared to data received from Unemployment Insurance (UI) wage records. Quality reports were utilized to increase the accuracy of the counselor data that was recorded in IRIS, so data recorded by the counselors in IRIS could be used for analysis since more detail and variables were documented in IRIS compared to UI wage data. The work experience data entered by counselors in IRIS was compared against UI wage records to look for possible missing work experiences, as well as, extremely low and high wage exceptions, verifying low wages were at least minimum wage and that unusually high wages were accurate.

#### 3.1. Procedure

As part of PROMISE Services, youth in the PROMISE treatment group were referred to work incentive benefits counseling. The referrals typically occurred prior to the youth starting employment. A total of 608 PROMISE youth were referred to this service, and 535 youth met with a benefits specialist at least once during the program. Work Incentive Benefits Consultation was a service aimed to be the starting point to assist PROMISE grant participants and their families in understanding the benefits that they receive from the federal and local governments, and how their improving financial progress will impact these benefits. This service may be authorized prior to a full benefit analysis and is not intended to replace a full benefits analysis. A consultation period consisted of at least three significant contacts with the participant, family and/or counselor as needed over a three-month period. Following the consultation period, the participant and/or family may be referred for a full benefit analysis. Services included intake of household information,

opportunity for the work incentive benefits specialist to become an authorized representative, obtaining signed releases and verify benefits, sharing information on Student Earned Income Exclusion (SEIE), SSI eligibility and general deemинг, impact on benefits based on time points (youth turning 18, family member change in employment, marriage, new siblings, sibling moves, and new benefits), answering questions regarding public benefits (including SSA benefits, Medicaid, FoodShare, Housing, etc.), and providing consultation as needed. Benefits analyses consisted of providing a full report of all the youth's federal and state benefits, and the impact work could have on these benefits, with information on how the youth can work to increase overall income, while still accessing the services and supports needed for daily living and competitive employment.

Specialists also connected youth to work incentives such as SEIE, Section 301 continuation, Medicaid while working, impairment-related work expenses, and earned income exclusion. Work incentive benefits specialists recorded and tracked the detailed information in a secured data-sharing site. The data was then uploaded and maintained in the Limited Data Set (LDS) system, available to authorized researchers and partners in PROMISE. Counselors recorded all youth and family activities into IRIS, including number of jobs, weekly earning amount, hours worked, work start and end dates, extra PROMISE services, and many other variables.

### *3.2. Data analysis*

Reports generated from the LDS were retrieved and loaded into Excel and SPSS. Various employment outcomes and variables were flagged, including: 1) having met with a benefits specialist at least once; 2) number of jobs since employment; 3) number of youth working; 4) active employment; 5) hours worked; 6) weekly earning amount; and 7) number of youth working at SGA. Researchers then analyzed the recorded data collected throughout the WI PROMISE program. Descriptive statistics on the data collected were run using the Statistical Package for Social Sciences (SPSS) Version 25 and Microsoft Excel programs. Chi-square tests for independence and independent samples *t*-tests were also conducted to see if the differences in employment outcomes were statistically significant between treatment youth who completed benefits counseling compared to treatment youth who did not complete benefits counseling.

## **4. Results**

Of the 544 Promise youth and families who met with a work incentive benefits specialist, most received a benefits consultation, and a handful received a full benefits analysis. Wisconsin PROMISE work incentive benefit specialists recorded an average of four contacts with each PROMISE youth and family, with a total of 533 consultations averaging 5.45 hours per consultation, and a total of 46 analyses averaging 4.91 hours per analysis. A total of 230 youth (43.4 percent) used one or more work incentives during PROMISE. Of those who used a work incentive, SEIE was the most utilized incentive by youth (78.3%), either by itself or combined with another incentive. Youth also utilized the following working incentives either alone or in combination with other incentives, Section 301 continuation of benefits under VR or other similar programs (32.2%), Medicaid while working (5.7%), impairment-related work expenses (3.9%), earned income exclusion (11.3%), and other (1.7%).

The descriptive statistics run on the data revealed that youth who met with a benefits specialist at least once ( $N=544$ ) had three times as many jobs, working 845 jobs since enrollment. Youth who had never met with a benefits specialist ( $N=476$ ) only worked 247 jobs since enrollment. A total of 417 (78%) youth who met with a benefits specialist had at least one job since enrollment into the program. In contrast, 263 (55%) youth who hadn't met with a specialist reported at least one job since enrollment. In addition, 184 (34%) youth in benefits counseling were actively employed at the time of the data pull (See Table 2). This compares to only 63 (13%) of youth – who did not meet with a benefits specialist – actively working. Figure 1 displays employment outcomes using UI wage data for youth who completed work incentive benefits counseling, financial coaching, and participated in a savings account compared to youth who did not complete those services.

The average and median earnings between the two groups of youth were very similar. Youth in benefits counseling averaged a weekly earning amount of \$206 and median weekly earnings of \$159. Youth who did not participate in benefits counseling reported a weekly earning amount of \$191 and weekly median earnings of \$150. Despite the similar weekly earning amount between the two groups, a higher percentage of youth earning over SGA had met with a benefits specialist (81%) than their counterpart who had not met with a benefits specialist (19%).

Table 2  
Wisconsin PROMISE Youth Meeting with a Benefits Specialist and Employment Outcomes

PROMISE Youth	Percent employed since enrollment	Percent actively employed	Percent of youth earning Over SGA
Met with a benefits specialist	78%	34%	81%
Did not meet with a benefits specialist	55%	13%	19%
Chi-Square test of independence	$\chi^2 (1, N=1011) = 58.9$ , $p < 0.001$		

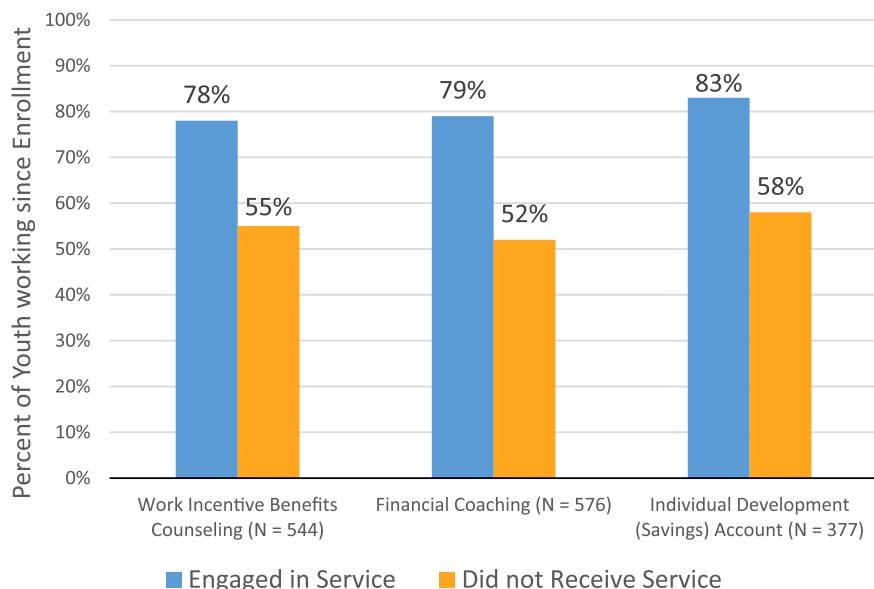


Fig. 1. Work Incentive Benefits Counseling Impact on Employment Outcomes. Percent of PROMISE youth with UI wages in any quarter during PROMISE services from April 2014 to September 2018 for youth by receipt of work incentive benefits counseling, financial coaching or Individual Development (savings) Account. N is the count of PROMISE youth who received the service. The number of youth who did not receive the service can be calculated by subtracting  $1011 - N$ .

A chi-square test of independence was performed, and work incentive benefits counseling had a significant impact on employment rates,  $\chi^2 (1, N=1011)=58.9$ ,  $p < .001$ . Results from the  $t$ -tests also showed a statistically significant difference for number of jobs and number of youth working between the two groups. Those who met with a benefits specialist had significantly more jobs ( $M = 1.57$ ,  $SD = 1.33$ ) than youth who did not meet with a benefits specialist ( $M = 0.54$ ,  $SD = 0.912$ )  $t(939) = 14.55$ ,  $p < 0.001$ . Statistical significance was also found when comparing the number of youth who worked, those who met with a benefits specialist were more likely to work at least one job after enrollment ( $M = 0.76$ ,  $SD = 0.43$ ) compared to those who had not met with a specialist ( $M = 0.34$ ,  $SD = 0.47$ ),  $t(972) = 14.98$ ,  $p < 0.001$ . T-tests were also run using active employment youth job counts, weekly earning amounts, and hours worked per week between the two groups of youth. The results indicated no significant

difference between the two groups for active youth job count,  $t(241) = 0.99$ ,  $p = 0.32$ , weekly earning amounts,  $t(241) = 0.53$ ,  $p = 0.59$ , and hours worked per week  $t(241) = -0.01$ ,  $p = 0.99$  (See Table 3).

## 5. Discussion

While the body of research analyzing the positive relationship between employment outcomes and the delivery of work incentives benefits counseling for individuals with disabilities has grown over the past decade, it has maintained a limited demographic scope. Our analysis sought to better understand the impact that work incentives benefits counseling can have on employment outcomes for transition-aged youth receiving SSI.

The main finding of this analysis is that there are significant increases in employment outcomes for transition-aged youth with disabilities who received

Table 3  
*T-test Summary of Employment Outcomes for Youth Who Did and Did not Meet with a Benefits Specialist*

		Met with a benefits specialist	Did NOT meet with a benefits specialist	t-value	p-value
Count of jobs since enrollment	Mean SD	1.57 (1.33)	0.54 (0.91)	14.55	<0.001
Number of youth working	Mean SD	0.76 (0.43)	0.34 (0.47)	14.98	<0.001
Working youth job count	Mean SD	1.14 (0.40)	1.08 (0.41)	0.99	0.32
Weekly earning amounts	Mean SD	202.99 (160.14)	190.73 (154.63)	0.53	0.59
Hours worked per week	Mean SD	22.10 (15.91)	22.13 (14.72)	−.001	0.99

work incentive benefits counseling services. Not only were youth who received benefits counseling more than twice as likely to secure employment than those who had not, they were also more than four times as likely to earn over SGA. This outcome is significant as it underscores the importance of work incentives focused benefits counseling as an employment intervention for youth. The study illustrates the value that work incentive benefits counseling adds to positive youth employment outcomes, challenging the historically overwhelming employment outcomes for young VR consumers receiving SSI. While this study corroborates previous studies showing the positive impact benefits counseling has on employment outcomes for adults with disabilities (Hartman et al., 2015; Lui et al., 2010), it also aims to shine light on the critical importance of serving this underserved population, including nuances in serving youth with disability within the context of poverty.

The provision of benefits consultations may be most welcomed by youth and families when it occurs as part of a “warm handoff” between the primary VR counselor and the benefits specialist. Some Wisconsin PROMISE youth and families were somewhat reluctant to meet with a benefits specialist for fear it might negatively impact their benefits. A common meeting with their Wisconsin PROMISE DVR counselor and PROMISE Work Incentive Benefits Specialist helped build a relationship and trust with the benefit specialist. The benefit specialist provided the most accurate information in timely manner and, as a result, became a trusted resource for the PROMISE youth and family.

In concert with this, experience in the PROMISE program suggests that consultation seemed to work better for youth and families than a full benefits analysis. Describing in detail all the rules and regulations around work incentives may be overwhelming and end up steering youth and families away from work. In contrast, meeting families “where they are” (e.g., talking about their concerns regarding their Food-

Share or talking about SEIE when the youth is looking for income or talking about the redetermination process when the youth is 17 years old) gives youth and families support to better navigate the benefit system without further overwhelming them with detailed information - and expecting them to remember the correct information at the right time.

In low-income households with children receiving SSI, the SSI payments, on average, provide almost half of their family’s total income (Rupp et al., 2006). An alarming 44.3% of these families live below the federal poverty threshold (Rupp et al., 2006). Among families of children receiving SSI, 81% of parents or guardians reported assets (excluding housing and vehicles) between \$0-\$1000, 50% of families reported having debt, 30% reported having a savings account, and only 3.5% of families reported any type of investment (Rupp et al., 2006).

When expectations of positive employment outcomes are contextualized within this reality, further services are clearly required. PROMISE youth and families needed help navigating their debt, responding to debt collectors, securing more stable housing, steering away from predatory lenders, and establishing local banking practices to help better build assets overtime. Since benefits can be impacted by both income and assets, assistance is often required when families are navigating financial institutions and public benefits. Work incentive benefits specialists provide critical guidance and advice to youth and families trying to negotiate both systems at once. Rising out of poverty requires not only employment and income, but financial capability training as well. PROMISE youth who met with a financial coach had five times the employment rates and earnings compared to youth who did not meet with a financial coach. Employment rates were even higher for youth who reported having a savings account (83%;  $N=377$ ).

While benefits consultation and financial coaching were related to better employment rates and earn-

ings, it is not yet known if this result is because youth who are working or ready to work are more likely to talk with a benefits specialist and financial coach. That said, given the complexities of work incentives and ensuring these are implemented correctly with the responsibility of correctly reporting earnings on the beneficiary, having someone to help navigate this complex system makes sense. It is hypothesized that without these supports, the youth may end up with overpayments (either because work was not reported correctly and/or because work incentives were not implemented correctly). Youth and families may interpret these overpayments as being caused by the youth working, which may stop youth work activity. For these reasons, a work incentive benefits specialist can help youth and families navigate the complex benefits, ensuring the youth gets the supports needed (including healthcare) while working, and learns how earnings can increase their overall income over time leading to increased financial self-sufficiency.

### 5.1. Limitations

Youth and families who signed up for PROMISE were more likely to engage in services and employment, as they self-selected into the program, so the generalizability of this study is limited. Despite this limitation, the results are still of value especially given the sample of PROMISE participants were similar to the SSI youth population as a whole, more specifically 25 percent of the eligible population enrolled in PROMISE and demographics were similar to that of the overall eligible population. Consequently, researchers have confidence these results likely reflect the population of youth receiving SSI, at least those in Wisconsin.

The importance of the monthly SSI payments these families receive cannot be overstated, making it easy to understand why some families are wary of their children working. This may not necessarily be due to a lack of belief in their child's ability to integrate into a workplace, but rather due to the fear and uncertainty of losing the SSI benefits that help sustain their family. Our analysis, focused on transition aged youth receiving SSI, sought to better understand the association between the push and pull relationship of earned income and public benefits and how the perceived tension created by the need to balance the two could be alleviated by a stronger implementation of work incentives benefits counseling.

## 6. Conclusion

This paper adds to the growing body of research illustrating the efficacy of work incentives benefits counseling as a successful employment intervention for individuals with disabilities, particularly transition aged youth receiving SSI. While this correlation is important, it is also necessary to note that increased employment and income alone aren't enough to forge a trajectory out of poverty, they are just one piece of the puzzle. Poverty and disability create a complex set of circumstances for youth and families to overcome. Future research should focus on the relationship of work incentive benefits counseling to financial capability training and financial coaching in and out of the VR system.

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## Conflict of interest

The authors have no conflict of interest to declare.

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