



REPORT

Promoting Readiness of Minors in Supplemental Security Income (PROMISE): Arkansas PROMISE Process Analysis Report

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The opinions and conclusions expressed in this report are solely those of the authors and do not represent the opinions or policy of any agency of the state or federal government.

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ACRONYMS AND ABBREVIATIONS

ACTI	Arkansas Career Training Institute
ADE	Arkansas Department of Education
ADWS	Arkansas Department of Workforce Services
ARC	Arkansas Research Center
ARS	Arkansas Rehabilitation Services
CURRENTS	University of Arkansas Center for the Utilization of Rehabilitation Resources for Education, Networking, Training, and Service
CWIC	Community work incentives coordinator
DHHS	U.S. Department of Health and Human Services
DOL	U.S. Department of Labor
ED	U.S. Department of Education
IEP	Individualized education program
MIS	Management information system
NTACT	National Technical Assistance Center on Transition
Pre-ETS	Pre-employment transition services
PROMISE	Promoting Readiness of Minors in Supplemental Security Income
RAS	Random assignment system
SSA	Social Security Administration
SSI	Supplemental Security Income
TEP	Transition Employment Program
TG	Treatment group
UA	University of Arkansas College of Education and Health Professions
VR	Vocational rehabilitation
WIOA	Workforce Innovation and Opportunity Act

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EXECUTIVE SUMMARY

PROMISE—Promoting Readiness of Minors in Supplemental Security Income (SSI)—was a joint initiative of the U.S. Department of Education (ED), the Social Security Administration (SSA), the U.S. Department of Health and Human Services (DHHS), and the U.S. Department of Labor (DOL) to fund and evaluate programs to promote positive changes in the lives of youth who were receiving SSI and their families. Under cooperative agreements with ED, six entities across 11 states enrolled SSI youth ages 14 through 16 and implemented demonstration programs intended to (1) provide educational, vocational, and other services to youth and their families and (2) make better use of existing resources by improving service coordination among state and local agencies. Under contract to SSA, Mathematica Policy Research is evaluating how the programs were implemented and operated, their impacts on SSI payments and education and employment outcomes for youth and their families (using an experimental design under which we randomly assigned youth to treatment or control groups), and their cost-effectiveness. In this report, we present findings from the process analysis of the first three years of the implementation and operation of the Arkansas PROMISE program. The findings are based on data collected through September 2017 via site visits to Arkansas PROMISE, telephone interviews with and social network surveys of program administrators and staff, and the management information system (MIS) that the program’s staff used to record their efforts.

The Arkansas Department of Education (ADE) contracted with the University of Arkansas College of Education and Health Professions (UA) to coordinate and implement Arkansas PROMISE. As the de facto lead agency, UA provided oversight and coordination of the recruitment of youth and families, service delivery, and partner involvement. Four partner organizations provided direct services to participating youth and families, for which they received PROMISE funding through formal contracts. Two additional organizations received funding from Arkansas PROMISE through formal agreements but did not provide direct services; rather, they supported program activities (such as training and technical assistance). Four other organizations partnered with Arkansas PROMISE to support the program in targeted roles but did not receive funding for their participation.

UA and its Arkansas PROMISE partners aimed to improve collaboration and coordination of services for transition-age SSI recipients at both the systems and individual levels. Key services that the program offered included (1) case management and monthly trainings on transition and employment issues provided by 50 case managers (called “connectors”), (2) vocational evaluations and career readiness training provided by up to 10 transition specialists, (3) two paid summer work experiences (including job coaching) of up to 200 hours each, (4) a summer camp to promote academic readiness and social skills, and (5) benefits counseling and financial education. The program also provided education services through the transition specialists, who supported youth in their efforts to graduate from high school and provided them with connections to postsecondary education opportunities. The connectors and transition specialists served treatment group youth and families exclusively.

In the following sections, we summarize key findings about how Arkansas PROMISE engaged with youth, the services the program provided to them and their families in the first three years of program operations, and the collaborations the program fostered to support its

efforts. We also highlight information about the experiences of control group youth that could have implications for the evaluation's impact analysis.

Engaging with youth with disabilities

Arkansas PROMISE achieved its goal of enrolling 2,000 youth in the evaluation of the program, 1,027 of whom were assigned to the treatment group. The program's use of staff whose only role was to conduct outreach to eligible youth and their families was instrumental in its early enrollment success and ultimate attainment of its enrollment target. However, the initial assignment of just one full-time recruiter to each of the program's four regions proved to be insufficient, particularly because one of the regions had an enrollment goal that was twice that of the others. The program addressed its recruitment challenges by leveraging other direct services staff within and across regions, seeking and receiving technical assistance from Mathematica Policy Research, and developing creative approaches to outreach.

Three years into program operations, Arkansas PROMISE had engaged 92 percent of treatment group youth as participants in the program. Youth were considered to be participants if they or their parents or guardians had met in person with a PROMISE staff member or had attended a monthly training after they enrolled in the evaluation. To facilitate its achievement of this rate of participation, the program converted its recruitment staff to retention staff following the completion of recruitment and enrollment activities and tasked them with conducting outreach to youth and families not engaged in services. The program also developed an incentive system for treatment group members to encourage their engagement in program services.

Services provided to treatment group youth and their families

Arkansas PROMISE delivered intensive case management services to youth, consistent with its program design, primarily through its connectors. These services included periodic contacts, identification and documentation of participants' goals, monthly trainings, summer camps, and resource development. In total, from October 2015 (the earliest date the MIS data allowed) through August 2017 (the last full month of MIS data), participating youth and families had an average of 18 in-person meetings with program staff and received an average of 22 contact attempts of other types during the observation period, though both were below the program's stated goals of monthly in-person meetings and weekly contacts. By August 2017, 90 percent of participating youth had a PROMISE plan, which identified career and education goals as well as the steps needed to achieve them. On average, participating youth attended 22 percent of the monthly trainings available to them, which Arkansas PROMISE used to provide program-specific information and information about transition and employment issues. The program offered participating youth the opportunity to attend a week-long residential summer camp on a college campus; 29 percent attended the camp in either or both of the first two years it was offered. Connectors assisted youth and families with developing resources in two ways: (1) by accessing the program's discretionary case management funds and (2) by making referrals to community resources. Through August 2017, the families of 59 percent of participating youth had received case management funds; those that did so received an average of \$546 in total. Among the organizations specifically identified in the program's referral records, connectors most frequently referred participants to the state's vocational rehabilitation (VR) agency.

Although the Arkansas PROMISE connectors worked primarily with participating youth, they also worked with parents or guardians and other family members, depending on how receptive those individuals were to the program's services. By August 2017, the parents or guardians of 87 percent of participating youth had developed their own PROMISE plans, and the parents or guardians of 15 percent of participating youth had been referred to either education or employment services. Arkansas PROMISE viewed attendance by parents and guardians at the program's monthly trainings as important to their ongoing engagement with the program. The percentage of monthly trainings attended was slightly lower for parents and guardians (19 percent) than for participating youth.

Career exploration and work-based learning experiences were important components of Arkansas PROMISE. Almost all of the program staff who worked with participants had some responsibility for promoting or supporting these components. The program contracted with the state's VR agency for transition specialists who served program participants exclusively by providing career exploration services, related assessments, and work-based learning experiences. The program relied on local workforce investment boards to facilitate summer work experiences for youth. More than two-thirds of youth participating in the program had a work experience in at least one summer between 2015 and 2017; almost one-quarter had work experiences in two or more summers.

Participating youth also received access to benefits counseling and financial education as part of their involvement with Arkansas PROMISE. The program provided information about benefits and financial education to participating youth and their parents or guardians through its monthly trainings. As of August 2017, slightly more than half of participating youth had attended at least one monthly training involving benefits counseling; almost half had attended at least one monthly training involving financial planning. Participating youth also received individualized benefits counseling through referrals to community work incentive coordinators as they encountered issues regarding their SSI benefits or achieved milestones such as summer employment or the age-18 redetermination for SSI eligibility.

Program partnerships

The administrators of the partner organizations in Arkansas PROMISE who responded to our social network surveys regarding their interactions with each other had varying levels of contact among themselves during program implementation; their collaborations focused on service delivery activities. Communication and effective working relationships at the administrative level pertaining to youth with disabilities increased among the partner organizations as the program initially rolled out, but those increases were not sustained as the program matured. This pattern might reflect a greater need for cooperation among the partner organizations during enrollment in the evaluation and the initial rollout of services. The relationships between UA and the partner organizations were strong even before the program began and were sustained throughout implementation, likely reflecting UA's planning activities before services started and its lead coordination roles throughout program operations.

Collaboration by the frontline staff of Arkansas PROMISE with their counterparts in the other partner organizations generally increased as the program matured. During early implementation, frontline staff most often collaborated across the partner organizations to refer

youth and families to services and conduct joint trainings. As the program matured, frontline staff increasingly collaborated across organizations with respect to these same activities, as well as all of the other activities assessed during the social network surveys: discussing clients' needs, goals, and services; data sharing; transition planning; and receipt of referrals from the partner organizations. The Arkansas PROMISE connectors reported communicating frequently with frontline staff at an increasing number of partner agencies as implementation progressed. In contrast, the number of partner agencies with frontline staff with whom the transition specialists communicated frequently remained steady over time.

Services available to the control group and implications for the impact analysis

The intensive case management and individualized employment services that Arkansas PROMISE provided constituted the primary distinction between the services available to the treatment group versus the control group. No comprehensive case management services similar to those provided by the program were available to youth with disabilities in the state; however, various community service providers did offer elements of what the program provided. Because Arkansas PROMISE primarily delivered unique services to its participants, rather than relying on existing programs and providers, control group youth did not have access to many of the services to which treatment group youth had access. Examples of such services include the program's summer camp, monthly trainings, and discretionary case management funds. Certain other Arkansas PROMISE services were potentially available to control group youth through existing providers, such as summer work experiences and benefits counseling. However, without one central entity facilitating their access to those services and coordinating the efforts of multiple providers, control group youth might have had difficulty in accessing them.

The process analysis suggests that the conditions were favorable for finding positive impacts of Arkansas PROMISE on youth and families. Evidence in three areas implies a marked contrast in the service experiences of treatment and control group youth. First, a large share (92 percent) of treatment group youth participated in the program, and most of them had received key services three years into program operations, as had their parents or guardians. Second, control group youth had only limited access to services similar to the intensive case management and employment services that Arkansas PROMISE provided. Third, there is virtually no risk that control group youth received services from the program; the program staff served treatment group youth exclusively and had no way of identifying control group youth for the purpose of serving them if they had been so inclined.

I. INTRODUCTION

PROMISE—Promoting Readiness of Minors in Supplemental Security Income (SSI)—was a joint initiative of the U.S. Department of Education (ED), the Social Security Administration (SSA), the U.S. Department of Health and Human Services (DHHS), and the U.S. Department of Labor (DOL) to fund and evaluate programs to promote positive changes in the lives of youth who were receiving SSI and their families. Under cooperative agreements with ED, six entities across 11 states enrolled SSI youth ages 14 through 16 and implemented PROMISE demonstration programs intended to (1) provide innovative educational, vocational, and other services to youth and their families and (2) make better use of existing resources by improving service coordination among multiple state and local agencies. Under contract to SSA, Mathematica Policy Research is evaluating how the programs were implemented and operated, their impacts on SSI payments and education and employment outcomes for youth and their families (using an experimental design under which we randomly assigned youth to treatment or control groups), and their cost-effectiveness.¹ In this report, we present findings from the process analysis of the first three years of the implementation and operation of the Arkansas PROMISE program.

A. Research objectives, data sources, and methods for the process analysis

Given their substantial investment in PROMISE and the pressing needs of transition-age SSI youth and their families, the federal sponsors of this initiative are keenly interested in whether the PROMISE programs were implemented in ways consistent with their requirements.² The sponsors had three key requirements for the programs. First, they required that all programs enroll a minimum of 2,000 youth in the evaluation. Second, they required that all programs include four core services that research suggests are the foundation for good transition programs—case management, benefits counseling, career and work-based learning experiences, and parent training and education. Third, they required that the programs develop partnerships among agencies responsible for providing services to SSI youth and their families. The programs had the liberty to develop their own approaches to implementing these components. This process analysis documents their choices and resultant experiences with respect to enrollment, service delivery, and agency partnerships. Specifically, it addresses the following four broad research objectives and several specific questions within each:

1. **Documenting the PROMISE program—intended design and fidelity to the model.** How did the program conduct outreach to eligible youth and enroll them in the evaluation, and what were the characteristics of enrolled youth and their families? What was the basic structure and logic model for the program? What were its plans for service provision? How closely did the program adhere to its logic model and service plan, and how consistently was the model implemented across local sites?

¹ Each of the PROMISE programs also conducted its own formative evaluation.

² These requirements are specified in the request for applications for PROMISE demonstration programs (ED 2013).

2. **Assessing partner development, maintenance, and roles.** Who were the primary and secondary partners in the program, and what were their roles? What were the contractual or other forms of agreements between the lead agency and its partners? How and how well did the partners communicate, collaborate, and work toward program goals?
3. **Supporting the impact analysis.** To what extent did treatment group members engage in program services, and what might the timing and intensity of services imply for the interpretation of the study's future estimates of program impacts at 18 months and five years after youth enrolled in the evaluation? What was the contrast between the program's services and the counterfactual services (that is, the services available to the control group)? To what extent might the services and partnerships developed through PROMISE have benefited the control group and thus diluted the program's impacts?
4. **Identifying lessons and promising practices.** What lessons can we learn from the process analysis about the factors that facilitate or impede successful implementation of programs for youth with disabilities and their families? What can we learn about the efficacy of certain program components regarding their likely contributions to impacts? What are the lessons about strategies or program components to replicate or avoid in future interventions? What are the lessons for sustaining services once federal funding for the program has ended?

To answer the research questions for the process analysis of Arkansas PROMISE, Mathematica collected and analyzed data from multiple sources, described in the following paragraphs, using protocols that may be found in the *PROMISE National Evaluation Data Collection Plan* (Fraker et al. 2014).

Interviews and site visits. We conducted a one-hour telephone interview with the Arkansas PROMISE program director approximately one month after program implementation. We then conducted visits to Arkansas PROMISE sites 6 and 24 months after program implementation. The visits entailed interviews with administrators and staff of organizations serving treatment and control group youth, a review of program documents and case files, observations of program activities, and focus groups with treatment group youth and their parents or guardians. The focus groups conducted 6 months after program implementation included 19 families (20 youth and 20 parents and guardians); the groups conducted 24 months after program implementation included 12 families (11 youth and 12 parents and guardians). Finally, we conducted telephone interviews with a subset of respondents from the site visits 36 months after program implementation.

Trained Mathematica researchers and analysts facilitated telephone and site visit interviews, as well as focus groups using semi-structured discussion guides that were flexible enough to stimulate free-flowing conversation but structured enough to capture consistent information across respondents. Each interview lasted between 60 and 90 minutes, and each focus group lasted 90 minutes. We used well-established methodologies to analyze the data from these qualitative sources, including preparing narrative descriptions of the interviews and focus groups, and identifying key themes within each; distilling the data into topics bearing on the evaluation's research questions; identifying and interpreting patterns and discrepancies in the data; and triangulating information from different data sources to ensure that the findings from the process analysis were based on mutually confirming lines of evidence.

Social network surveys. We conducted two social network surveys of the administrators and staff of Arkansas PROMISE organizations and partners during the site visits (6 and 24 months after program implementation). Surveys took the form of self-administered hard-copy questionnaires that asked respondents about their relationships with colleagues in other organizations. Using Excel and specialized network analysis software (UCINET 6 and NetDraw), we analyzed data from the social network surveys to document communication and cooperation among organizations involved in Arkansas PROMISE. More details about the surveys are provided in Chapter IV.

The Random Assignment System (RAS). The RAS was a web-based system Mathematica designed and maintained to complete the enrollment of youth in the evaluation of Arkansas PROMISE and assign them either to a treatment or control group. It was accessible to authorized users with personal computers from any location through a high-speed Internet connection. Program staff entered data about an enrolling youth and the enrolling parent or guardian into the RAS. The system first validated the data against lists of eligible youth that SSA provided to Mathematica quarterly to ensure that the fields required for program enrollment and random assignment were complete and that appropriate formats and value ranges for variables such as ZIP codes, dates of birth, and Social Security numbers (SSNs) were used. The RAS then randomly assigned the youth to a study group according to customized algorithms and generated a personalized letter that the program could use as is or customize to notify the applicant of the study group assignment results.

The Arkansas PROMISE management information system (MIS). The MIS contained data on both the program's recruitment and enrollment efforts and its delivery of services to treatment group youth. The program contracted with the Arkansas Research Center (ARC), a state entity that assists agencies with their data needs, to create its web-based MIS, with input from program staff. It continued to modify and improve the system (for instance, by developing reporting options, adding fields to better capture service delivery, and adding checks on data entry) throughout the service period. For example, in September 2015, fields were added to the system to provide additional details on individual and group meetings between program participants and program staff, and in fall 2016, management reviews of system data led program staff to back-enter data about service plans for parents and guardians that they had inadvertently failed to record in the system at the time of service delivery. Data entered into the system before these changes may not be as accurate or comprehensive as data entered after.

Mathematica analyzed data on program services entered through August 2017, three years into program operations. Although the results presented in this report reflect program service delivery as of that time, they captured the experiences of treatment group youth and their families at different stages of their involvement in the program; as of August 2017, the earliest enrollees had been in the program for three years, but the latest enrollees had been in the program for only 16 months. The program intended to deliver services through September 2018 and received a no-cost extension to deliver some services after that date. Using statistical software (Stata), we tabulated data from the MIS and then identified key results pertinent to the research questions.

Monthly calls with ED, SSA, and Arkansas PROMISE program managers. Mathematica participated in monthly calls, during which program managers updated ED and

SSA on program activities, progress toward benchmarks, and challenges and plans for addressing them. We considered information obtained from all calls that occurred during the first 36 months of program operations.

B. Overview of Arkansas PROMISE

The Arkansas Department of Education (ADE) contracted with the University of Arkansas College of Education and Health Professions (UA) to coordinate and implement the Arkansas PROMISE program. ADE was formally the lead agency for the program cooperative agreement, but it functioned in a limited, advisory role. UA was the de facto lead agency, providing oversight and coordination of the recruitment of youth and families, service delivery, and partner involvement.

Five partner organizations provided substantive program services, for which they received PROMISE funding through formal contracts:

1. The Arkansas Department of Workforce Services (ADWS) contracted with local workforce investment boards and other work-related service providers to deliver summer work experiences to youth and—in the first year of the program—job coaching services. UA managed ADWS' involvement through two intergovernmental agreements—one to cover youth wages, payroll taxes, and workers' compensation benefits and another to cover all other activities.
2. Arkansas Rehabilitation Services (ARS), through an intergovernmental agreement, provided transition specialists who offered vocational and education services to Arkansas PROMISE youth. It also used its funding from other sources to pay youth's wages during their work experiences; Arkansas PROMISE passed these funds from ARS to ADWS.
3. Sources for Community Independent Living Services (Sources), through a professional consultant services contract, provided benefits counseling services individually and in groups through its community work incentives counselors and managed funds that participating families used to meet basic needs. The role of Sources in Arkansas PROMISE was expanded midway through the program period to include the administration of payments to providers of job coaching services.
4. The University of Arkansas Center for the Utilization of Rehabilitation Resources for Education, Networking, Training, and Service (CURRENTS) provided technical assistance and training to Arkansas PROMISE staff and developed group training activities on transition issues for program youth. CURRENTS also conducted orientation for new program staff, biannual professional development trainings, and staff webinars on topics pertaining to the delivery of services to youth with disabilities. Finally, CURRENTS planned and implemented the program's first summer camp. Because it is a UA department, UA did not need to develop a formal agreement for CURRENTS' participation in Arkansas PROMISE. UA worked with CURRENTS to specify program activities and develop a budget annually.
5. The University of Arkansas Partners for Inclusive Communities (Partners) hired a recruitment coordinator and four recruiters (later repurposed as retention specialists) for the program. Similar to CURRENTS, Partners is a department within UA and so did not require

a formal agreement to participate in Arkansas PROMISE; UA worked with Partners to specify program activities and develop a budget annually.

Two other types of partner organizations also received payments from Arkansas PROMISE to support program activities through formal agreements. UA developed an interagency agreement with ARC to create and maintain the program's MIS and facilitate the transfer of administrative data for the evaluation. In addition, UA established memoranda of understanding with 11 postsecondary education institutions for the program's use of office and meeting space.

Several other organizations also partnered with Arkansas PROMISE but did not receive funding for their participation. These organizations had memoranda of understanding with UA regarding their roles in the program. The Arkansas Department of Health provided health and wellness curricula to youth and technical assistance to Arkansas PROMISE staff on health issues. The Arkansas Department of Human Services offered program staff access to its services through a department help desk accessible via telephone. The program participated in the Clinton Foundation's health matters initiative; the foundation also provided media support and assistance with employer connections. Finally, the Arkansas Hunger Relief Alliance helped to address youth's food and hunger issues by providing a monthly training on nutrition, food shopping, and food preparation.

Arkansas PROMISE convened an advisory council composed of administrators or participating staff from all partner agencies three times each year. It used these meetings to monitor the program's progress, discuss organizational barriers to service delivery, address service challenges, and make modifications to the service model.

UA and its Arkansas PROMISE partners provided comprehensive case management, employment, and other services with the goal of improving collaboration and coordination of services for transition-age SSI recipients at both the systems and individual levels. The program's logic model (Figure I.1) shows the inputs and activities it originally proposed to achieve this goal. Some of the key service activities included the following:

- Case management and monthly trainings on transition and employment issues provided by 50 case managers (called "connectors") with low staff-to-client ratios
- Vocational evaluations and career readiness training provided by up to 10 transition specialists
- At least two paid summer work experiences (including job coaching) of up to 200 hours each
- A two-week summer training to promote academic readiness and social skills (during implementation, the program developed a one-week summer camp in place of the two-week summer training)
- Benefits counseling and financial education

As shown in the short- and mid-term outcomes columns of the logic model, these inputs and activities were designed to increase knowledge and change behaviors, eventually leading to the

long-term impacts of increased educational attainment, employment, and household income and decreased reliance on SSI among youth in the treatment group.

Not reflected in the logic model are the services the program began providing with supplemental funding it received from ED in 2015. Specifically, the program (1) hired retention specialists to engage disconnected youth and their families; (2) hired staff to provide technical assistance to connectors, transition specialists, job coaches, and employers on workforce development; and (3) added personal attendant services and expanded job coaching services.

Arkansas PROMISE operated in 25 of the state's 75 counties, which it initially grouped into four administrative regions. These regions consisted of one largely urban area containing almost half of all PROMISE youth (central), one area described as resource rich and economically advantaged relative to the other regions (northwest), and two rural areas that were relatively resource poor (eastern and southern). To manage the PROMISE staff across these areas, UA employed a principal investigator, a program director, an assistant program director (beginning on January 1, 2017), and a supported employment director (beginning in fall 2017), along with four regional managers. In 2017, the program subdivided the central region into two regions, one for Pulaski County (the county containing the state's capital city, Little Rock) and one for the remaining central region counties; each of these regions had its own manager. In 2017, UA also hired a director to oversee the program's summer camp activities.

One of the program's challenges involved the training and management of staff who were dispersed across wide geographic areas and who resided under different agencies. For example, transition specialists reported to an ARS supervisor and also worked under the regional managers, thus raising a question as to who directly supervised their delivery of project services. To address this challenge, program managers conducted frequent staff meetings, either in person or by telephone, at the regional and state levels to discuss project services; they also held periodic trainings to ensure consistent approaches to service delivery and improve staff knowledge.

C. Roadmap to the report

The rest of this report presents findings from the process analysis of Arkansas PROMISE. It documents program operations at roughly midway through the five-year PROMISE cooperative agreement period. Five analogous reports will present findings from the process analyses of the other PROMISE programs. This report is organized around the federal sponsors' key requirements of the programs. Chapter II describes Arkansas PROMISE's efforts to enroll youth into the evaluation and the results of those efforts. Chapter III describes the core program services as designed and actually implemented, and how they differed from preexisting services in the community. (Preexisting services are those that were available to both treatment and control group members; we refer to these services throughout the report as counterfactual services.) Chapter IV assesses the quality of the partnerships Arkansas PROMISE facilitated. Chapter V presents lessons learned from the process analysis of Arkansas PROMISE (including promising practices for possible expansion or replication of the PROMISE program) and provides information that will be useful for interpreting findings from the evaluation's impact analysis, to be presented in two future reports.

Figure I.1. Arkansas PROMISE logic model

Inputs	Outputs		Outcomes	
	Activities	Short-term (learning and knowledge)	Mid-term (action and behavior)	Long-term impact
<p>Collaborative of state agencies, higher education, Clinton Foundation to support grant activities</p> <p>50 case managers with a caseload size of 1:20 families</p> <p>Case management budget of \$400 per family per year to address emergency needs</p> <p>Employers willing to provide work experience to participants</p> <p>2- and 4-year colleges providing office space, training space, access to computer labs</p> <p>Distance learning technology</p> <p>Incentive point program tied to financial literacy training</p>	<p>Memorandum of understanding and governor-appointed advisory committee facilitate service coordination, information sharing, and barrier removal</p> <p>Treatment group (TG) child recipients and families set and achieve goals for education, asset building, self-efficacy, and employment</p> <p>Monthly trainings during school year provided to TG recipients and families through mixture of face-to-face and distance learning strategies</p> <p>Two-week training for TG child recipients (summer)</p> <p>Benefits counseling and financial training provided to all TG recipients and families at least once per year</p> <p>Develop agreements for sharing information</p> <p>Peer support and mentoring for TG students and families</p> <p>Vocational evaluation, career exploration, job-shadowing provided to TG recipients and families</p> <p>At least two paid work experiences (targeted for the summer that TG child recipient is 16)^a</p> <p>Additional work experiences paid for by employer</p>	<p>TG child recipients and families gain knowledge and awareness of and are connected to community resources</p> <p>TG child recipients and families develop self-efficacy: confidence to move to new lifestyle, ability to do it, willingness to take risks</p> <p>TG child recipients and families increase computer literacy</p> <p>TG child recipients and families understand the advantages of employment and the supports provided through SSA to transition from SSI to employment</p>	<p>TG child recipients graduate high school</p> <p>TG families (adults) obtain high school equivalent degree or continue education</p> <p>TG families begin to build financial assets</p> <p>State agencies identify and modify policy and infrastructure barriers to service coordination and information sharing</p> <p>Families are engaged in transition planning for TG child recipients</p> <p>Schools engaged and supportive; counselors sharing info</p>	<p>Increased educational attainment for the child SSI recipients and their parents</p> <p>Improved rates of employment, wages/earnings, and job retention for the child SSI recipients and their parents</p> <p>Increased total household income</p> <p>Long-term reduction in SSI payments</p>

Source: ADE’s application to ED for a cooperative agreement.

^a The logic model in ADE’s application indicated that participants would have at least one paid work experience, but the application narrative states an expectation of at least two paid work experiences.

TG = treatment group.

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II. ENROLLMENT AND PARTICIPATION IN ARKANSAS PROMISE

Arkansas PROMISE conducted the recruitment of youth and their enrollment in the evaluation from August 2014 through April 2016. Although enrollment could have begun in April 2014, it was delayed by UA's complex hiring process and an SSA security process that took up to six weeks and was longer than Arkansas PROMISE planned. In this chapter, we describe the recruitment and enrollment process and summarize the results of Arkansas PROMISE's efforts based on data from the PROMISE RAS, SSA lists of PROMISE-eligible youth, and the MIS that the program used to track its efforts. We also present the number and characteristics of those youth assigned to the treatment group who actually participated in the program.

A. Outreach and recruitment

Arkansas PROMISE conducted direct outreach to youth on SSA lists of PROMISE-eligible youth to recruit them into the evaluation. In total, 9,943 youth appeared on the SSA lists, which SSA provided quarterly to Arkansas PROMISE; however, the program attempted to recruit only 75 percent (7,459) of them (Table II.1). The program prioritized outreach to areas of the state with the highest density of eligible youth to reduce the travel that would be required for case management staff to meet with treatment group participants. It further prioritized youth who would soon age out of eligibility (those within 30 days of their 17th birthday). This strategy stemmed from the program's recognition that it would need to recruit youth before they became age ineligible to meet its enrollment target of 2,000 youth.

Table II.1. Arkansas PROMISE recruitment efforts over time

Recruitment effort	Calendar quarter since program's start of recruitment								Total
	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	
Number of youth									
Newly eligible on the SSA lists	6,027	743	609	595	659	682	568	60	9,943
Targeted for recruitment	843	4,940	691	260	600	101	24	0	7,459
Number of:									
Initial letters mailed to youth	843	4,843	659	256	615	84	0	0	7,300
Follow-up letters mailed to youth	8	129	37	4,406	117	40	11	3	4,751
Telephone calls made to youth	9	780	1,038	1,084	1,060	1,221	1,047	6	6,245
Emails sent to youth	0	10	1	0	1	2	3	0	17
In-person visits made to youth	1	40	89	166	70	164	51	0	581

Sources: The Arkansas PROMISE MIS and PROMISE RAS.

Notes: The number of youth targeted for recruitment includes one record for each youth recorded as receiving a contact in the MIS data. The table shows all attempted contacts (that is, successful contacts in addition to (1) messages left, no answers, hang-ups, and wrong numbers for telephone attempts; and (2) no answers, wrong addresses, and eligible youth or parents or guardians not at home for in-person attempts) by quarter. All quarters correspond to calendar quarters starting August 1, 2014 and ending April 12, 2016.

Arkansas PROMISE mailed enrollment packets containing an introductory letter, enrollment and consent forms, a self-addressed postage-paid envelope for returning the completed forms, and a promotional flyer to each targeted youth. Recruiters then conducted follow-up outreach primarily through telephone calls and additional mailings but with some in-person visits and

emails.³ About one in four enrolled youth received only an initial mailing and required no follow-up (Table II.2). On average, it took 2.5 actual or attempted contacts, including mailings, to enroll a youth in the evaluation.

Table II.2. Arkansas PROMISE recruitment efforts, by evaluation enrollment status (percentages unless otherwise indicated)

	All	Evaluation enrollees (A)	Evaluation non-enrollees (B)	Difference (A - B)	p-value of difference
Youth sent an initial mailing	97.9	95.7	98.6	-2.9	0.000***
Average number of initial mailings per youth sent mailing	1.0	1.0	1.0	-	-
Youth sent a follow-up mailing	60.7	49.6	64.7	-15.1	0.000***
Average number of follow-up mailings per youth sent mailing	1.1	1.1	1.0	0.1	0.000***
Youth contacted by telephone	51.6	55.5	50.2	5.4	0.000***
Average number of telephone calls per youth called	1.6	1.6	1.6	-0.1	0.155
Youth contacted by email	0.2	0.7	0.1	0.7	0.000***
Average number of emails per youth emailed	-	-	-	-	-
Youth contacted in person	7.0	11.6	5.4	6.2	0.000***
Average number of in-person contacts per youth contacted	1.1	1.1	1.1	0.0	0.237
Number of contacts (including initial mailing):					0.001***
1 contact	23.0	25.5	22.2	3.3	
2-5 contacts	73.5	71.5	74.3	-2.8	
6-10 contacts	3.4	2.9	3.6	-0.6	
11 or more contacts	0.0	0.1	0.0	0.1	
Average number of contacts (including initial mailing) per youth	2.5	2.5	2.5	0.0	0.806
Average time between initial mailing and first contact (days) ^a	131.8	120.4	135.6	-15.2	0.000***
Average time between initial mailing and enrollment (days) ^a	NA	182.39	NA	NA	NA
Number	7,486	2,000	5,486	NA	NA

Sources: The Arkansas PROMISE MIS and PROMISE RAS.

Notes: The universe for this table is youth targeted for recruitment (that is, logged in the MIS as having received a contact) or enrolled in the evaluation without contacts logged in the MIS. The table includes all attempted contacts (that is, successful contacts in addition to (1) messages left, no answers, hang-ups, and wrong numbers for telephone attempts; and (2) no answers, wrong addresses, and eligible youth or parents or guardians not at home for in-person attempts). For a continuous or dichotomous variable, the *p*-value represents a *t*-test. For a polychotomous variable, a single *p*-value is presented that represents a chi-square test for the entire distribution of the variable across the various categories. Numbers in the Difference column may differ from the values calculated as A - B due to rounding.

*/**/** Statistically significant difference from zero at the 0.10/0.05/0.01 level.

^a The average time between the initial mailing and first contact excludes individuals who received the mailing after the first contact. The average time between the initial mailing and enrollment excludes individuals who received the mailing after enrolling. Individuals may have received the initial mailing after the first contact or after enrolling if they proactively contacted Arkansas PROMISE before receiving an initial mailing or if the program started other recruitment efforts before sending an initial mailing.

NA = not applicable.

The Arkansas PROMISE recruitment staff consisted of four recruiters (one for each of the program's original four regions) and a statewide recruitment coordinator. These staff were employees of Partners, which had overall responsibility for recruitment activities. Some of the PROMISE connectors also participated in outreach to eligible youth to supplement the recruiters' efforts.

³ The SSA lists of eligible youth did not provide email addresses. Recruiters sometimes requested these addresses when they made contact with youth through other methods and then used them for follow-up contacts.

Arkansas PROMISE implemented the following strategies to maximize the success of its recruitment efforts:

- **Community-based enrollment events.** The PROMISE recruiters attended transition fairs, resource fairs, and other community events for high school youth with disabilities. They also invited eligible youth and their parents to attend the program's own community enrollment events, which were promoted through targeted mailings, supplemented with newspaper and radio advertisements. The program held 14 such events, which provided venues for the recruiters and other program staff to educate youth and parents about the program and to collect completed enrollment forms.
- **Agency outreach.** Because Arkansas PROMISE was a new program, the principal investigator, the program director, the recruitment coordinator, recruiters, and connectors conducted outreach to state and local agencies, schools, and community-based organizations. This outreach served three purposes: (1) it educated the staff of those entities about the program, its target population, and its services; (2) it encouraged those entities to refer potentially eligible youth to the program; and (3) it put the staff of those entities in a position to confirm the program's legitimacy and promote it if their clients inquired about it.
- **Geographic targeting.** Arkansas PROMISE set region- and county-specific enrollment goals that aligned with both the size of the target population and the projected number of PROMISE connectors in those areas. Toward the end of the recruitment period, the recruiters and other program staff conducted in-person outreach in more narrowly defined areas (by ZIP code) in the program's central and eastern regions, where large numbers of eligible youth lived and enrollment was lagging. This outreach included the distribution of pies the weekend before Thanksgiving 2015 and cupcakes the weekend before Valentine's Day 2016 as icebreakers to introduce the program and its staff.
- **Weekly monitoring.** Throughout the recruitment period, the recruitment coordinator held weekly meetings with the recruiters to monitor their efforts and to review progress toward enrollment goals.

B. Enrollment and random assignment

Enrollment in the PROMISE evaluation and random assignment occurred through the PROMISE RAS. Arkansas PROMISE recruiters had access to the RAS from the field via an Internet connection. If a youth and parent or guardian completed the enrollment and consent forms in the presence of a recruiter, that recruiter could enter the required data from the forms into the RAS and conduct random assignment on the spot, although more typically they sent the forms to the program's central office at UA. Other youth and parents or guardians completed the forms without the presence of a recruiter and then mailed them to UA. A project specialist at UA received the completed forms, entered the data into the RAS (usually within one or two days), and conducted random assignment. The program notified all families of their random assignment results by mail and also notified some families by telephone. For families in the control group, the mail notification included a resource list of community providers and services they could access.

Arkansas PROMISE met its enrollment target on schedule; recruitment efforts ceased on April 12, 2016 when 2,000 youth had enrolled in the evaluation.⁴ This number represented 20 percent of all eligible youth and 27 percent of all eligible youth targeted for recruitment (Table II.3). The pace of enrollment was relatively steady throughout the recruitment period, except during the earliest and latest months (when recruitment was ramping up and winding down, respectively) and the third quarter of 2015 (when the pace was slower), as shown in Table II.4.

Table II.3. Summary of final recruitment results for Arkansas PROMISE

Recruitment result	Number or percentage
Number of eligible youth on the SSA lists	9,943
Number of eligible youth recruited	7,459
Number of youth enrolled in evaluation	2,000
Percentage of eligible youth enrolled in evaluation	20.1
Percentage of recruited youth enrolled in evaluation	26.8

Sources: The Arkansas PROMISE MIS and PROMISE RAS.

Table II.4. Rate of enrollment in the Arkansas PROMISE evaluation

Quarter	Number of youth enrolled	Cumulative number of youth enrolled	Percentage of enrollment target achieved
Aug–Sep 2014	36	36	1.8
Oct–Dec 2014	462	498	24.9
Jan–Mar 2015	327	825	41.3
Apr–Jun 2015	424	1,249	62.5
Jul–Sep 2015	158	1,407	70.4
Oct–Dec 2015	300	1,707	85.4
Jan–Mar 2016	275	1,982	99.1
Apr 2016	18	2,000	100.0

Source: The PROMISE RAS.

On some but not all of the characteristics we measured, the enrollees in the evaluation of Arkansas PROMISE differed from PROMISE-eligible non-enrollees (Table II.5). Enrollees were similar to non-enrollees in their age at the end of the recruitment period, sex, and primary disabling condition. However, enrollees differed from non-enrollees in their racial and ethnic composition (most notably, enrollees were more likely to be black non-Hispanic and less likely to be white non-Hispanic or of unknown race and ethnicity), primary language (enrollees were more likely to speak Spanish), and age as of their initial SSI eligibility determination.

⁴ The enrollment window for all PROMISE programs was April 2014 through April 2016.

Differences in racial and ethnic composition are hard to interpret, given the substantial proportion of youth for whom this information was unknown.⁵ Given the self-selection of enrollees into the evaluation, it is likely that they differed from non-enrollees on certain unobserved characteristics not captured in the SSA data, such as youth motivation and resilience; parents' expectations of the youth; or family characteristics, including parents' own employment status or whether the family received other public assistance. Thus, we caution against generalizing the results from the impact evaluation of the program to all PROMISE-eligible youth. However, even though the impact findings may not be strictly generalizable, it is likely that the impact estimates would be broadly applicable to those youth who would choose to participate in a hypothetical voluntary future intervention resembling Arkansas PROMISE.

Data from the RAS on study group assignment indicate that random assignment worked as intended for Arkansas PROMISE. Of the 2,000 youth Arkansas PROMISE enrolled in the evaluation, 1,805 were classified as research cases and the remaining 195 as nonresearch cases because they were siblings of previously enrolled youth or had enrolled as wild cards.⁶ Among the research cases, 904 youth were assigned to the treatment group and 901 to the control group (Table II.6). This distribution was consistent with the 50/50 random assignment design. Among all youth enrolled in the evaluation (including nonresearch cases), 1,027 youth were assigned to the treatment group.

Data on the characteristics of treatment and control group youth confirm that random assignment worked as intended. Table II.6 summarizes sample baseline characteristics across treatment and control group youth in the research group, illustrating that overall there were no systematic differences. Regression models for the impact analysis will control for baseline characteristics that are significantly different between the treatment and control groups, as well as additional baseline characteristics identified at the time of that analysis.

⁵ SSA discourages researchers from using the race variable in its administrative data system for analysis. SSA discontinued the publication of data by race for the SSI program after 2002 in response to changes it made to the process for assigning new SSNs. Most SSNs are now assigned to newborns through a hospital-birth registration process or to lawful permanent residents based on data collected by the Department of State during the immigration visa process. Neither process provides SSA with race and ethnicity data. For the relatively few individuals who apply for an original Social Security card at an agency field office, providing race and ethnicity information is voluntary. "Consequently, the administrative data on race and ethnicity that SSA does collect comes from a self-selecting sample that represents an ever-dwindling proportion of the population" (Martin 2016). Field experience also suggests that many individuals identify as biracial; lack of a biracial category may contribute to the substantial percentage of "other/unknown" responses.

⁶ If data were entered into the RAS for a PROMISE applicant who was a sibling of a previously enrolled youth, the system assigned the applicant to the same research group as the previously enrolled sibling. We employed this approach because program services were provided to family members, including siblings, as well as youth. PROMISE programs were also able to assign a maximum of five youth to the treatment group nonrandomly using a wild card system. Arkansas PROMISE exercised this option for one youth. For information on wild cards, see Fraker and McCutcheon (2013).

Table II.5. Characteristics of youth eligible for Arkansas PROMISE, by evaluation enrollment status (percentages unless otherwise indicated)

Characteristic	All eligible youth	Enrolled in PROMISE evaluation (A)	Not enrolled in PROMISE evaluation (B)	Difference (A – B)	p-value of difference
Average age at end of recruitment period (years)	15.8	15.7	15.8	0.0	0.216
Male	67.0	66.5	67.1	-0.7	0.579
Race/ethnicity					0.000***
White (non-Hispanic)	8.6	5.1	9.5	-4.4	
Black (non-Hispanic)	17.2	22.6	15.9	6.7	
Hispanic	1.0	1.3	1.0	0.3	
Asian	0.1	0.1	0.1	0.0	
American Indian/AK/HI/Pacific Islander	0.1	0.1	0.1	0.0	
Other/unknown	73.0	70.8	73.5	-2.7	
Spoken language					0.001***
English	98.5	97.7	98.7	-1.0	
Spanish	1.3	2.2	1.0	1.1	
Other	0.1	0.1	0.1	0.0	
Missing	0.2	0.1	0.2	-0.1	
Primary disabling condition					0.316
Intellectual or developmental disability	38.9	40.9	38.4	2.5	
Other mental impairment	46.7	45.7	47.0	-1.3	
Physical disability	9.8	9.1	9.9	-0.8	
Speech, hearing, or visual impairment	1.2	1.1	1.2	-0.2	
Other	3.5	3.3	3.5	-0.2	
Average age at most recent SSI eligibility determination (years)	6.9	6.6	6.9	-0.3	0.003***
Number of youth	9,943	2,000	7,943	NA	NA

Sources: The PROMISE RAS and SSA lists of PROMISE-eligible youth.

Notes: The universe for this table is all youth on the SSA lists of PROMISE-eligible youth. For a continuous or dichotomous variable, the *p*-value represents a *t*-test. For a polychotomous variable, a single *p*-value is presented that represents a chi-square test for the entire distribution of the variable across the various categories. Numbers in the Difference column may differ from the values calculated as A - B due to rounding. The primary disabling condition categories correspond to SSA's Listing of Impairments. Other mental impairments include disabilities such as chronic brain syndrome; schizophrenia; borderline intellectual functioning; and affective, anxiety, personality, substance addiction, somatoform, eating, conduct, oppositional/defiant, and attention deficit hyperactivity disorders.

*/**/** Statistically significant difference from zero at the 0.10/0.05/0.01 level.

NA = not applicable.

Table II.6. Characteristics of randomly assigned Arkansas PROMISE treatment and control group members (percentages unless otherwise indicated)

Characteristic	All research cases	Assigned to treatment group (A)	Assigned to control group (B)	Difference (A - B)	p-value of difference
Youth					
Average age at enrollment (years)	15.0	15.0	14.9	0.0	0.375
Male	66.8	67.3	66.4	0.0	0.690
Race/ethnicity					0.709
White (non-Hispanic)	5.2	4.7	5.8	-1.1	
Black (non-Hispanic)	22.6	23.5	21.6	1.8	
Hispanic	1.3	1.2	1.4	-0.2	
Asian	0.1	0.1	0.1	0.0	
American Indian/AK/HI/Pacific Islander	0.1	0.1	0.0	0.1	
Other/unknown	70.8	70.5	71.0	-0.6	
Spoken language					0.567
English	97.6	97.7	97.6	0.1	
Spanish	2.3	2.2	2.3	-0.1	
Other	0.1	0.1	0.0	0.1	
Missing	0.1	0.0	0.1	-0.1	
Primary disabling condition					0.521
Intellectual or developmental disability	40.9	41.2	40.6	0.5	
Other mental impairment	45.2	44.5	45.8	-1.4	
Physical disability	9.5	9.2	9.9	-0.7	
Speech, hearing, or visual impairment	1.1	1.1	1.0	0.1	
Other	3.4	4.1	2.7	1.4	
Average age at most recent SSI eligibility determination (years)	6.7	6.7	6.7	0.0	0.836
Parent or guardian					
Relationship to youth					0.229
Parent or step-parent	88.9	87.9	89.9	-2.0	
Grandparent	7.8	8.2	7.4	0.7	
Brother or sister	0.2	0.4	0.0	0.4	
Aunt or uncle	1.4	1.3	1.4	-0.1	
Other relative	0.4	0.6	0.2	0.3	
Other	1.3	1.6	1.0	0.6	
Average age at enrollment (years)	41.5	41.5	41.5	0.0	0.966
Male	7.3	8.1	6.6	1.5	0.213
Number of youth	1,805	904	901	NA	NA

Sources: The PROMISE RAS and SSA lists of PROMISE-eligible youth.

Notes: 195 enrolled cases are excluded from this table because they did not go through random assignment. For a continuous or dichotomous variable, the *p*-value represents a *t*-test. For a polychotomous variable, a single *p*-value is presented that represents a chi-square test for the entire distribution of the variable across the various categories. Numbers in the Difference column may differ from the values calculated as A - B due to rounding. The primary disabling condition categories correspond to SSA's Listing of Impairments. Other mental impairments include disabilities such as chronic brain syndrome; schizophrenia; borderline intellectual functioning; and affective, anxiety, personality, substance addiction, somatoform, eating, conduct, oppositional/defiant, and attention deficit hyperactivity disorders.

*/**/** Statistically significant difference from zero at the 0.10/0.05/0.01 level.

NA = not applicable.

C. Participation in Arkansas PROMISE

Mathematica advised all of the PROMISE programs about how the rate of participation in the program among members of the treatment group could affect the national evaluation's impact analysis. For evaluation purposes, a treatment group youth was considered to be a participant in PROMISE if he or she had at least one substantive interaction with the program. Based on conversations with Arkansas PROMISE program managers, Mathematica considered a treatment group youth to be a participant in Arkansas PROMISE if the youth or the youth's parent or guardian participated in an in-person (face-to-face) meeting with a PROMISE staff member or attended a monthly training after enrolling in the evaluation. The program expected the first contact attempt with members of the treatment group to occur within 3 days of enrollment so the staff could engage them as participants in the program as quickly as possible. The program expected the initial face-to-face meeting to occur within 7 days of enrollment. Considering all 1,027 youth assigned to the treatment group (including both research and nonresearch cases), on average, it took about 11 days after enrollment in the evaluation for program staff to make the first contact attempt with a youth and family, with a median time of 4 days (Table II.7, top panel). The Arkansas PROMISE MIS did not allow us to identify the timing of either the initial in-person meeting or the initial monthly training for the full sample of treatment group youth.

Among all treatment group youth, we classified 92 percent (940) as program participants based on either the youth or their parents or guardians having met in person with a PROMISE staff member or having attended a monthly training (Table II.7, top panel). About 89 percent of these youth completed an intake interview and 76 percent attended a monthly training; the rates for their parents and guardians were similar (89 percent and 71 percent, respectively).

Although the limitations of the MIS data precluded us from identifying the timing of the initial in-person meeting or initial attendance at a monthly training for the entire sample, we could identify the timing of in-person meetings (but not the timing of attendance at trainings) for the subsample of 326 treatment group youth who enrolled in the evaluation on or after September 5, 2015 (the date on which the program updated its MIS to include additional data elements). We cannot presume that these statistics reflect the timing of initial meetings for the full sample, but this analysis does provide a snapshot for those who enrolled toward the end of the program. For this subsample, youth rates of meeting in person with program staff (88 percent) and attending a monthly training (70 percent) were slightly below those for youth in the full sample (Table II.7, bottom panel). These youth had an initial in-person meeting an average of 72 days after enrollment, with a median number of 25 days. Ninety percent of the parents or guardians of these youth met in person with program staff, and the timing of the initial meeting (an average of 67 days and a median of 22 days after enrollment) was slightly quicker than for the youth. For both groups, the timing of initial meetings with program staff was substantially delayed relative to the program's objective that these meetings occur within 7 days of enrollment. A slightly smaller proportion of the parents and guardians of the youth in this subgroup attended a monthly training (64 percent) than was the case for the parents and guardians of youth in the full sample. The proportion of youth in this subsample who met the criteria for classification as participants (91 percent) was similar to the proportion for the full sample (92 percent).

Table II.7. Efforts to engage treatment group youth as participants in Arkansas PROMISE as of August 2017

	Number or percentage
All treatment group youth	
Number of days from evaluation enrollment to first contact attempt by program staff ^a	
Average per youth	10.7
Median per youth	4.0
Percentage of youth who had at least one in-person meeting ^b	88.5
Percentage of youth who attended at least one monthly training ^c	75.9
Percentage of youth whose parents or guardians had at least one in-person meeting ^b	89.0
Percentage of youth whose parents or guardians attended at least one monthly training ^c	71.0
Percentage of youth classified as Arkansas PROMISE participants (youth or parent/guardian had an in-person meeting or attended a monthly training)	91.5
Number of youth	1,027
Treatment group youth who enrolled in the evaluation on or after September 5, 2015	
Percentage of youth who had at least one in-person meeting ^b	88.0
Number of days from evaluation enrollment to first in-person meeting ^e	
Average per youth	72.2
Median per youth	25.0
Percentage of youth who attended at least one monthly training ^c	70.2
Percentage of youth whose parents or guardians had at least one in-person meeting ^b	89.6
Number of days from evaluation enrollment to first in-person meeting ^e	
Average per youth	66.8
Median per youth	21.5
Percentage of youth whose parents or guardians attended at least one monthly training ^{c, d}	63.5
Percentage of youth classified as Arkansas PROMISE participants (youth or parent/guardian had an in-person meeting or attended a monthly training)	91.1
Number of youth	326

Sources: The Arkansas PROMISE MIS and PROMISE RAS.

Notes: Contact attempts may have taken any form (that is, telephone, text, email, home visit, and so on) and may or may not have resulted in actual interaction between Arkansas PROMISE and a youth.

^a Arkansas PROMISE intended the average time between enrollment in the evaluation and first contact attempt to be three days.

^b Arkansas PROMISE intended that 100 percent of treatment group youth and their parents or guardians would have an in-person meeting.

^c Arkansas PROMISE intended that 100 percent of treatment group youth and their parents or guardians would attend a monthly training.

^d Arkansas PROMISE had no expectations regarding the time between enrollment in the evaluation and the first attendance at a monthly training.

^e Arkansas PROMISE intended the average time between enrollment in the evaluation and the first in-person meeting to be seven days.

The characteristics of participating and nonparticipating treatment group youth differed in several ways (Table II.8). Participating youth more often enrolled in the evaluation during the second and fourth six-month periods in the enrollment window than did nonparticipating youth. The racial and ethnic composition of the two groups differed, but as noted previously, SSA discourages researchers from using the race variable in its administrative data system for analysis

given the substantial proportion of youth for whom this information is unknown. Youth in the central region were much less likely to participate in Arkansas PROMISE than youth in other regions, suggesting that the program may have had more difficulty engaging youth in and around Little Rock than in less urban areas. Finally, the enrolling parents or guardians of participating youth were, on average, 2.4 years older than the enrolling parents or guardians of nonparticipating youth.

Table II.8. Arkansas PROMISE participant characteristics at enrollment (percentages unless otherwise indicated)

Characteristic	Assigned to treatment group	Participated in PROMISE services (A)	Did not participate in PROMISE services (B)	Difference (A - B)	p-value of difference
Youth					
Average age at enrollment (years)	15.3	15.3	15.4	-0.1	0.622
Enrollment timing					0.000***
First 6 months	29.7	28.4	43.7	-15.3	
Second 6 months	35.3	36.7	20.7	16.0	
Third 6 months	24.6	23.9	32.2	-8.3	
Fourth 6 months	10.3	11.0	3.4	7.6	
Male	66.7	66.6	67.8	-1.2	0.817
Race/ethnicity					0.004***
White (non-Hispanic)	4.5	4.3	6.9	-2.6	
Black (non-Hispanic)	23.2	22.4	31.0	-8.6	
Hispanic	1.2	1.3	0.0	1.3	
Asian	0.1	0.1	0.0	0.1	
American Indian/AK/HI/Pacific Islander	0.1	0.0	1.1	-1.1	
Other	71.0	71.9	60.9	11.0	
Spoken language					0.353
English	97.9	97.7	100.0	-2.3	
Spanish	2.0	2.2	0.0	2.2	
Other	0.1	0.1	0.0	0.1	
Missing	0.0	0.0	0.0	0.0	
Average age at most recent SSI eligibility determination (years)	6.6	6.6	6.8	-0.2	0.707
Primary disabling condition					0.301
Intellectual or developmental disability	41.5	42.3	32.2	10.1	
Other mental impairment	44.6	43.6	55.2	-11.6	
Physical disability	8.9	9.0	6.9	2.1	
Speech, hearing, or visual impairment	1.1	1.1	1.1	0.0	
Other	4.0	3.9	4.6	-0.7	
Arkansas PROMISE region					0.001***
Central	45.0	43.3	63.2	-19.9	
Eastern	21.9	22.0	20.7	1.3	
Northwest	16.0	16.9	5.7	11.2	
Southern	17.1	17.8	10.3	7.5	

Table II.8 (continued)

Characteristic	Assigned to treatment group	Participated in PROMISE services (A)	Did not participate in PROMISE services (B)	Difference (A - B)	<i>p</i> -value of difference
Enrolling parent or guardian					
Relationship to youth					0.536
Parent or step-parent	87.8	87.6	90.8	-3.2	
Grandparent	8.3	8.6	4.6	4.0	
Brother or sister	0.4	0.3	1.1	-0.8	
Aunt or uncle	1.4	1.4	1.1	0.3	
Other relative	0.5	0.4	1.1	-0.7	
Other	1.7	1.7	1.1	0.6	
Average age at enrollment (years)	41.9	42.1	39.7	2.4	0.020**
Male	8.9	9.3	4.6	4.7	0.144
Number of youth	1,027	940	87	NA	NA

Sources: Italics signify data elements from the Arkansas PROMISE MIS. Data elements not in italics are from the PROMISE RAS or SSA lists of PROMISE-eligible youth.

Notes: Participation in PROMISE services was defined as having an initial substantive interaction with PROMISE. (In Arkansas PROMISE, an initial substantive interaction was defined as the youth or parent or guardian having an in-person meeting with program staff or attending a monthly training). For a continuous or dichotomous variable, the *p*-value represents a *t*-test. For a polychotomous variable, a single *p*-value is presented that represents a chi-square test for the entire distribution of the variable across the various categories. Numbers in the Difference column may differ from the values calculated as A - B due to rounding. Enrollment in the evaluation of Arkansas PROMISE began in August 2014 and ended in April 2016. The primary disabling condition categories correspond to SSA's Listing of Impairments. Other mental impairments include disabilities such as chronic brain syndrome; schizophrenia; borderline intellectual functioning; and affective, anxiety, personality, substance addiction, somatoform, eating, conduct, oppositional/defiant, and attention deficit hyperactivity disorders.

*/**/** Statistically significant difference from zero at the 0.10/0.05/0.01 level.

NA = not applicable.

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III. SERVICES FOR YOUTH WITH DISABILITIES AND THEIR FAMILIES

The actual implementation of program services may or may not conform to their design, and the program inputs identified in the logic model (presented in Figure I.1) may or may not result in the anticipated outputs and, ultimately, short-term, mid-term, and long-term outcomes. Various contextual factors (such as staff competencies, program management, and the policy environment in which the program operated) may have affected the fidelity of implementation to the program design and mediated the relationships among inputs, outputs, and outcomes. Further, program services could be expected to have yielded outcomes other than those that would have resulted in the absence of the program only if they differed enough from the counterfactual services that were available to control group members. In this chapter, we describe the counterfactual services, how program services were designed, key aspects of how Arkansas PROMISE operationalized the services in practice, utilization of those services, and implications of the program's implementation and utilization for its potential to generate the intended outcomes. Each of sections A through E focuses on a core PROMISE service component. The last section discusses the potential for control group members to receive Arkansas PROMISE services.

The national evaluation's process analysis relied on Arkansas PROMISE MIS data to describe program service utilization among youth in the treatment group who participated in the program. Our main aim was to document the services Arkansas PROMISE provided. Thus, to fully document the program's efforts, we included in the service utilization analysis those nonresearch cases who participated in the program, even though they will not be included in the impact analysis. We computed the statistics presented in this chapter for the participant sample (that is, the youth and other household members in the 92 percent of treatment group families who had an in-person contact with staff or participated in a monthly training). The statistics reflect service utilization from enrollment start through the third year of program operations (August 2014 through August 2017).

A. Case management

The federal PROMISE program sponsors required that each program provide case management to ensure that PROMISE services for participants were appropriately planned and coordinated, and to assist participants in navigating the broader service delivery system. They expected that case management would also include transition planning to assist participating youth in setting post-school goals and facilitate their transition to appropriate post-school services. In this section, we describe counterfactual services with respect to service coordination and transition planning in Arkansas and the services Arkansas PROMISE provided in this area.

1. Counterfactual services

According to Arkansas PROMISE staff and other staff we interviewed, no agency or organization in the state offered comprehensive case management for youth with disabilities similar to that provided by PROMISE. The service providers with whom we spoke stated that outside of PROMISE, comprehensive case management simply was not available for youth with disabilities in Arkansas. Just one entity, a developmental disability center, provided comprehensive case management services, which were funded by Medicaid home and

community-based waivers. The center served few youth, and interviewees reported that the wait time for waiver services was 10 years.

Various community providers offered elements of the comprehensive case management that Arkansas PROMISE provided, although none was intensive or specific to youth with disabilities. Arkansas Support Network, a nonprofit disability services agency, provided families with services such as acute mental health services, interpreters, and transportation for employment. Many organizations offered mental health counseling and medical assistance, which may have incorporated a case management component. Other examples of community services that may have incorporated elements of case management included legal aid services and utility and housing assistance programs. PROMISE staff reported having referred program participants to these providers to address their specific needs. In addition, ARS sponsored two summer opportunities for youth with disabilities, neither of which were reported to serve many youth: a summer forum on youth leadership and a filmmaking camp. The availability of these services may have differed across the Arkansas PROMISE regions.

Other providers included case management in their services targeted to specific populations. These providers included (1) United Family Services (a community organization that focused on alternatives for out-of-home placements), which offered an array of services for youth with or without disabilities who were involved in the justice system and (2) Pathfinders, Inc., (an organization that offered a range of services for people with developmental disabilities) and the Arkansas Division of Developmental Disabilities Services (a state agency that funded various programs targeted to people with developmental disabilities), which offered transportation and behavioral health services for people with developmental disabilities. The Arkansas Division of Developmental Disabilities Services' case management services might have been provided in tandem with individuals' involvement with subminimum wage employment.

2. Arkansas PROMISE services

The Arkansas PROMISE program intended that its connectors be the participants' primary point of contact with the program. The connectors were responsible for case management but also assisted with school and employment services and worked collaboratively with an integrated PROMISE resource team. They also performed advocacy roles for participants and families by accompanying them to meetings with schools, community organizations, and agencies. In addition to connectors, a resource team consisted of transition specialists who focused on education and employment issues, workforce investment board staff and job coaches who supported participants during their summer work experiences, and benefits specialists who provided financial literacy counseling. The roles of these other team members are described in more detail in subsequent sections.

Connectors used a range of approaches to interact with the youth and families on their caseloads. They tried to meet with participants frequently in locations convenient for families: in their homes, in public places such as libraries or schools, or in restaurants. They also kept in contact with youth and families by telephone, email, and text message, as well as by mail (to notify them of special events). In addition to working with participants and families during meetings and organized PROMISE events, many of the connectors were well integrated into the participants' lives, attending their activities such as band performances and cheerleading and Special Olympics events.

The program design called for each connector to have a caseload of no more than 20 youth, but this expectation was sometimes not met in practice. Some connectors were assigned more than 20 youth because of geographic considerations or staffing fluctuations. More frequently, though, the number of active cases for connectors was fewer than 20 youth, as some families were not engaged in services and others had moved out of the program's catchment area. The MIS data showed that connectors had a median of 21 youth (including active and inactive participants and nonparticipants) on their caseloads, with a range of 14 to 30 youth.

In the remainder of this section, we provide details on five aspects of connectors' involvement with youth and family participants: (1) program engagement, (2) assessments and service plan development, (3) monthly trainings, (4) resource development, and (5) summer camps.

Program engagement. Arkansas PROMISE connectors were expected to engage consistently with treatment group youth and their families as an integral part of the program's services. After the initial in-person meetings, connectors were expected to have monthly in-person meetings with youth and families. Program managers reported emphasizing this goal during new hire orientations and through training materials and ongoing staff trainings. With the MIS data, we analyzed the frequency of in-person meetings with youth and families, contacts with youth and families (whether they were successful or not), and contacts with other entities about issues pertaining to youth and families.

The program achieved its goal of having an in-person meeting with a youth or family every month during the observation period for 3 percent of the participants included in the analysis (Table III.1). On average, participants had an in-person meeting with program staff in 51 percent of the months during the observation period.⁷ Youth and families received an average of 18 in-person meetings during the observation period.

In practice, 18 percent of participating youth and their families received staff contact attempts outside of in-person meetings in each of the months during the observation period. On average, participants received contact attempts in 70 percent of the months in the observation period and had an average of 22 contact attempts during the observation period.

When contacts with other entities (such as service providers or school staff) are included in the analysis of program engagement, the level of communication that PROMISE connectors had increases, reflecting the efforts they made pertaining to youth and families outside of direct communication with them. On average, program staff made contact attempts directly with youth and families or with other entities about youth and families in each month during the observation period for 33 percent of participants, and they made such contact attempts in an average of 82 percent of the months in the observation period. Overall, program staff conducted an average of

⁷ The observation period for this analysis began with whichever was later: October 2015 (the month in which staff began to consistently record data about in-person meetings in the MIS) or a youth's evaluation enrollment date. It ended in August 2017 (the last month for which the MIS extract provided to us by Arkansas PROMISE has complete data).

36 contact attempts with or about youth and families, which is about 60 percent higher than the number of direct contact attempts with youth and families.

Table III.1. Case management: Program engagement with Arkansas PROMISE participants as of August 2017 (percentages unless otherwise indicated)

	Number or percentage
In-person meetings with participating youth and families ^a	
At least one meeting every month	3.4
Average percentage of months with at least one meeting	51.3
Total number of in-person meetings with participating youth and families	
Average number of meetings	17.5
Median number of meetings	17.0
Other contact attempts with participating youth and families ^a	
At least one contact attempt every month	17.9
Average percentage of months with at least one contact attempt	70.0
Total number of contact attempts with participating youth and families ^a	
Average number of contact attempts	22.3
Median number of contact attempts	17.0
Other contact attempts with or about participating youth and families ^a	
At least one contact attempt every month	33.0
Average percentage of months with at least one contact attempt	81.9
Total number of contact attempts with or about participating youth and families ^a	
Average number of contact attempts	35.6
Median number of contact attempts	29.0
Program's assessment of the engagement of participating youth and families as of August 2017 ^b	
Engaged	27.0
Partially engaged	38.2
Not engaged	34.8
Number of participating youth	940

Source: The Arkansas PROMISE MIS.

Notes: Contact attempts may have taken any form (that is, telephone, text, email, in person, mail, note, and other) and may or may not have resulted in actual interaction between Arkansas PROMISE and an intended respondent. In-person meetings involved a face-to-face meeting between an Arkansas PROMISE staff and a youth participant and/or parent or guardian.

^a Analysis was based on contact attempts from October 2015 (or the month after the youth's enrollment in the evaluation if it occurred after October 2015) through August 2017 (up to 23 months) with participants, their family members, or others (such as partner organizations or providers) to facilitate linkages to community resources or paid or unpaid work experiences for participants. Arkansas PROMISE intended that connectors make weekly contact with youth and families and conduct at least one in-person meeting with them monthly.

^b According to the program's specifications, engaged youth and families were those who, in the last two months, had one in-person staff meeting AND either participated in at least one monthly training or started a work experience. Partially engaged youth and families were those who, in the last two months, had one in-person staff meeting OR either participated in at least one monthly training OR started a work experience. Not engaged youth were those who were not assessed as either engaged or partially engaged (that is, had not had an in-person meeting, participated in a monthly training, or started a work experience) in the last two months.

Staff in the northwest region engaged with participating treatment group families more frequently than staff in the other regions (Appendix Table A.1).⁸ This pattern was consistent for

⁸ As will be noted throughout this chapter, youth in the northwest region frequently had more intensive service delivery than their counterparts in other regions. Because we did not interview many staff from the northwest region, we are uncertain about the reasons behind these differences. Potential reasons include greater experience or

all three types of contact assessed: the averages in the northwest region were 24 in-person meetings with youth and families, 35 other contact attempts with youth and families directly, and 46 other contact attempts with or about youth and families. The averages for the northwest region were more than twice those of the regions with the lowest averages for in-person meetings and other contact attempts with youth and families, and almost twice the average for other contact attempts with or about youth and families.

Connectors perceived the key barriers to youth and family engagement in the program to be transportation problems, fear of loss of SSI benefits, low family resources, unstable addresses and telephone numbers, weak family buy-in to the program, and incarceration. In 2016, Arkansas PROMISE made three changes designed to address some of these barriers and thereby improve youth engagement in program services:

1. To identify youth who had never engaged in the program or were once engaged but had become disengaged, the program added a tracking component to its MIS that assigned youth to one of three categories, based on their involvement in the program during the previous two months:
 - *Engaged* (met in person with an Arkansas PROMISE staff member and either attended a monthly training or started a work experience in the last two months)
 - *Partially engaged* (met in person with an Arkansas PROMISE staff member, attended a monthly training, or started a work experience in the last two months)
 - *Not engaged* (had no in-person meetings, monthly trainings, or work experiences started in the last two months)

The regional managers reported that they found the tracking system to be a valuable tool for reviewing connector caseloads and developing ways for the program to reconnect with youth who were not engaged. As of August 2017, 27 percent of participating youth were classified in the MIS as engaged, 38 percent as partially engaged, and 35 percent as not engaged (Table III.1).⁹ This latter category included youth who were no longer engaged because they had moved out of the area, died, or refused services. The central and Pulaski regions had the highest proportion of participating youth who were not engaged (45 percent and 38 percent, respectively); the northwest region had the lowest proportion (26 percent) (see Table A.1 in Appendix A).

2. Following the completion of recruitment and enrollment, Arkansas PROMISE used the supplemental funding it had received from ED to convert the program's recruitment coordinator and four recruiters into a retention coordinator and retention specialists. These

education level of staff, a larger worker base from which to hire experienced staff, subtle differences in program management and training strategies, and the strong counterfactual environment in that region (due to presence of the University of Arkansas and Walmart's corporate headquarters). To investigate the last potential reason, we reviewed unemployment rates for Arkansas from 2014 through 2018 as published by the U.S. Bureau of Labor Statistics (2018). This assessment confirmed that the metropolitan area that included Fayetteville in the northwest region had consistently lower unemployment rates than the state as a whole and other metropolitan areas within the state, though we could not assess all of the program's regions with this method because of a lack of comparable data.

⁹ The number of participating youth classified as not engaged as of August 2017 might have been higher than typically observed because the program did not offer monthly trainings during the summer.

staff were tasked with conducting outreach to youth and families not engaged in the program. One tactic they used was obtaining updated address information from local offices of the Arkansas Department of Human Services. After making contact with the youth and families, they tried to identify the root cause of their lack of involvement and encouraged them to come to monthly meetings. The retention specialists either quickly reunited the youth and families with their connectors or managed the cases themselves for an interim period before transferring them to the connectors.

3. The program developed an incentive system to encourage participation. When completing or attending program activities, youth and families earned points they could redeem for prizes, ranging from travel bags and headphones to Xbox consoles and iPads. The program rolled out this system in fall 2017—too recent for staff to report on their experiences with it during our final interviews with them. The implementation of this system took considerable time because program managers wanted to ensure that (a) the incentives were based appropriately on services recorded in the MIS, (b) the program staff understood the need for timely and accurate MIS data entry, and (c) the rules were easy and transparent for youth and families.

From our interviews with connectors and retention specialists, we identified three important themes in the program’s engagement efforts. First, many youth and families who were classified as not engaged had not been contacted because they had moved and the program no longer had accurate contact information for them. Obtaining updated data on addresses and telephone numbers from the Arkansas Department of Human Services helped to address this issue. Second, among the youth and families who were not engaged were those who simply refused to participate in the program. According to the retention specialists, some of these families were concerned about losing SSI benefits, others were too busy to participate and did not want “one more thing to do,” and still others closely guarded their privacy and did not want program staff involved in their lives or those of their children. Third, we heard mixed opinions from connectors regarding the efforts of the recruitment specialists; some thought the specialists did not help at all, whereas others thought they helped with engagement, although not to a great extent. Individual connectors might not have perceived large effects from the retention specialists’ work because each specialist was responsible for an entire region of the program and worked to engage youth and families in the caseloads of multiple connectors.

Assessments and service plan development. Connectors conducted a structured assessment of each youth participant to better understand his or her needs and strengths. The assessment included a resource mapping exercise to identify personal and service networks and the development of the participant’s social history. It also included the administration of a self-determination scale developed by Michael Wehmeyer and Kathy Kelchner at the Arc of the United States with funding from ED. The program expected connectors to complete the initial assessment shortly after a participant’s enrollment in the evaluation and administer the self-determination scale an additional two times during a youth’s participation in the program (to facilitate an assessment of the youth’s growth over time). The program’s MIS showed that 62 percent of participating youth had completed the self-determination scale at least once (Table III.2). The program had administered the scale a second time as of the date of the MIS extract used in our analysis, but this information was not included in the data provided to Mathematica.

The connectors reported using information from the assessment to work with participants in developing PROMISE plans, which identified career and education goals as well as the steps needed to achieve them. The plans were intended to be evolving contracts that would be updated every six months. They served as a resource in meetings between participants and program staff and as a guide for service provision. The connectors entered the information from the plans into the program's MIS, thus allowing other staff to access it. Our site visit interviews revealed that, although the connectors often found the plans useful, some believed they emphasized long-term objectives at the expense of more immediate concerns unrelated to either work or school, such as housing security. By August 2017, 90 percent of participating youth had a PROMISE plan (Table III.2). Eighty percent had a plan that included at least one career goal and 85 percent had a plan that included at least one education goal. The plan completion rate varied across the program's regions, ranging from 80 percent in the eastern region to 96 percent in the northwest and Pulaski regions (Appendix Table A.1). During the focus groups we conducted, many youth participants commented that their involvement with PROMISE, including the development of these plans, had helped them set and achieve goals.

Table III.2. Case management: Assessments and service plan development among Arkansas PROMISE participants as of August 2017

	Percentage
Completed the self-determination scale	62.0
Developed a PROMISE plan ^a	
Any PROMISE plan	89.5
A PROMISE plan that included at least one career goal	79.5
A PROMISE plan that included at least one education goal	84.6
Number of participating youth	940

Source: The Arkansas PROMISE MIS.

^a Arkansas PROMISE intended that 100 percent of youth would develop PROMISE plans.

Monthly trainings. Arkansas PROMISE used monthly trainings during the academic year (September through May) to provide youth and families with program-specific information (such as updates on summer activities and events) and information about transition and employment issues. Although attendance at the trainings was voluntary, program staff encouraged youth and family participation by providing transportation and refreshments, distributing attendance incentives (such as Bluetooth speakers, cameras, and travel mugs) through random drawings, and publicly recognizing youth and parent or guardian accomplishments (such as completing work experiences). For participants who attended the trainings, connectors reinforced the information provided during subsequent one-on-one meetings.

Over the course of its operation, Arkansas PROMISE covered a range of topics in the monthly trainings, such as federal disability benefits (including work incentives and benefit interactions with employment), financial education, and personal and service resource mapping. Each academic year, the program also delivered multisession trainings based on two curricula: a self-advocacy curriculum on the seven habits of highly effective teens (Covey 1998) and a curriculum on independent living skills. CURRENTS developed these curricula in consultation with the program's management and service staff and conducted annual trainings to prepare connectors and other program staff to lead the trainings. During the interviews we conducted in

conjunction with our site visits, program staff described the self-advocacy curriculum as being too complicated, explaining that youth (as well as parents and guardians with less advanced reading and comprehension skills) had difficulty with its content. The staff had more positive views of the curriculum on independent living skills, which they believed to be easier for youth and parents or guardians to understand and more useful to them when they completed the program. Topics covered in that curriculum included job interviewing skills, budgeting, supported living, and community resources.

The monthly trainings posed a logistical problem for Arkansas PROMISE. The program originally planned to conduct four trainings per month (one in each of the original four regions, each covering the same topic or topics). However, the program staff found it necessary to hold meetings at more locations within each region to improve participant attendance. PROMISE management told us that eventually the program was conducting 17 to 22 trainings each month at different locations, resulting in increased costs because of more staff involvement in planning and delivery and additional meeting spaces and refreshments.

The program expected youth to attend 75 percent of monthly trainings, but only 13 percent of youth participants met this target (Table III.3). On average, participants attended 4.9 trainings between either October 2015 or their enrollment in the evaluation (whichever date was later) and August 2017; this number constituted 22 percent of the trainings offered during the period. Eighteen percent of participants never attended a training, whereas 31 percent attended at least half of the trainings. In 2016, the program began using incentives to encourage attendance at monthly trainings; however, we found no substantive differences in monthly attendance rates for youth between the periods before and after implementation of the incentive system. Participation across four of the program's regions was largely similar (with youth attending between 21 and 28 percent of trainings, on average), whereas participation in the Pulaski region was substantially lower (with youth attending 15 percent of trainings, on average) (see Table A.1 in Appendix A).

Table III.3. Case management: Participation in monthly trainings among Arkansas PROMISE participants as of August 2017 (percentages unless otherwise indicated)

	Number or percentage
Monthly trainings attended	
Average number	4.9
Average percentage ^a	22.4
Percentage of participating youth who attended monthly trainings:	
No monthly trainings	17.8
1 percent to 25 percent of monthly trainings	28.9
26 percent to 49 percent of monthly trainings	22.4
50 percent to 74 percent of monthly trainings	17.6
75 percent or more of monthly trainings	13.3
Number of participating youth	940

Source: The Arkansas PROMISE MIS.

^a Arkansas PROMISE intended that youth would attend 75 percent of monthly trainings. Participation in training is calculated from the month after enrollment (or October 2015 if the youth enrolled before that date) through August 2017.

Resource development. One of the primary roles of the connectors in Arkansas PROMISE was to assist youth and families with developing resources. They did so in two ways: (1) by

accessing the program's discretionary case management funds and (2) by making referrals to community resources.

The connectors accessed discretionary case management funds (up to \$400 annually per participating family) to cover emergency or unique expenses for the youth and families on their caseloads. For example, the connectors used the funds to cover participants' utility and telephone bills, transportation expenses (such as gas and bus passes), tuition and the costs of tutoring services, computers, and school supplies. These funds were intended to be used after existing community resources had been exhausted, and the program restricted their use for some purposes (such as rental assistance, food, and branded clothing and footwear). Connectors varied in how they presented these funds to participants. Some staff informed participants about the funds as part of the initial and ongoing engagement process and during their face-to-face meetings. Other connectors raised the availability of funds as barriers to participation with program services arose. Still other connectors mentioned the funds only when youth and families had an explicit need that could not be met through existing resources. Some PROMISE staff members told us it would have been preferable to limit the use of these funds to emergency situations only to prevent overuse and discourage youth and families from participating in the program just to gain access to the funds, which they sensed that some families did.

Through August 2017, 59 percent of participating families had accessed the case management funds; those that did so had received an average of \$546 in total (Table III.4). The proportion of participating families that accessed case management funds in a fiscal year increased over the three years of the evaluation's observation period (from 22 percent in 2015 to 42 percent in 2017). The average annual amount received by those who accessed the funds also increased (from \$285 to \$318). There was wide variation across the PROMISE regions in the share of participating families that ever accessed case management funds, ranging from 41 percent in the southern region to 78 percent in the northwest region (Appendix Table A.1). Several of the parents and guardians who attended our focus group sessions cited the potential availability of these funds as a motivation for their ongoing involvement in the program. Sources managed these funds, and the PROMISE regional managers monitored their distribution.

As a supplement to the discretionary case management funds, the program paid for the graduation expenses of participants who were high school seniors. These payments, which were in addition to the \$400 annual family allotment of case management funds, covered graduation clothes, caps and gowns, and yearbooks. Although these payments were included in the program's MIS, we could not separate them from the entries for the allocation of case management funds; thus, the statistics presented in Table III.4 for the receipt of case management funds also include payments for graduation expenses.

In addition to distributing discretionary funds, the connectors referred participating youth and their families to community resources to address their needs. The connectors recorded their referrals in the program's MIS. Among the organizations specifically identified in the referral records, participants were most frequently referred to ARS (57 percent of participants). ARS referrals likely increased as Arkansas PROMISE approached its end date because the program's management encouraged connectors to refer participating youth to that agency to increase the chances that transition services would continue for them after the program ended. Fewer than 20 percent of participants were referred to each of four other organizations, including the Arkansas

Department of Health and the Arkansas Department of Human Services. A catchall category, “other referral sources,” was the most commonly recorded category of organizations to which the PROMISE connectors made referrals. They referred 65 percent of participating youth to these other organizations, which included those that provided advocacy services, computer services, food assistance, legal services, and voter registration. Appendix Table A.1 provides statistics by PROMISE region for organizations to which the connectors directed referrals; the rate of referrals to ARS was highest in the northwest region (71 percent) and lowest in the central region (34 percent).

Table III.4. Case management: Resource development for Arkansas PROMISE participants as of August 2017 (percentages unless otherwise indicated)

	Number or percentage
Receipt of case management funds by families (through August 31, 2017)	
Percentage of families that ever received funds	59.0
Average total amount ever received by recipient families	\$546
Percentage of families that received case management funds, by program fiscal year	
Fiscal year 2015	22.2
Fiscal year 2016	39.7
Fiscal year 2017 (through August 31, 2017)	42.2
Average amount of case management funds received by recipient families, by program fiscal year	
Fiscal year 2015	\$285
Fiscal year 2016	\$314
Fiscal year 2017 (through August 31, 2017)	\$318
Percentage of families referred to:	
Arkansas Department of Human Services	11.8
Arkansas Department of Health	5.1
Arkansas Rehabilitation Services	56.7
Higher education	16.3
Job services (such as Workforce Investment Act and Job Corps)	19.0
Other referral sources	64.7
Number of participating youth	940

Source: The Arkansas PROMISE MIS.

Note: A fiscal year for Arkansas PROMISE ran from October 1 through September 30. Case management funds included graduation expenses.

Summer camps. The program first offered a week-long, all-expenses paid, residential summer camp on a college campus in 2016, inviting participants not involved in summer work experiences, and did so again in 2017. Program managers reported that in 2016, 163 of the 450 youth who were invited to the camp attended (a rate of 36 percent); in 2017, 170 of the 550 invited youth attended (a rate of 31 percent). According to data in the MIS, 29 percent of participating youth attended the summer camp in either 2016 or 2017 (some participants attended in both years). The program managers expected that by 2018 all youth would have received at least one invitation to attend the summer camp.

At camp, the attendees received training on self-advocacy, college preparation, and employment; participated in sports and a talent show; and made friends with their peers from across the state. Program staff told us that the logistics of running the camp for the first time were daunting and placed unusual demands on them. They included providing transportation for

the attendees and ensuring round-the-clock staff coverage at the camp. The staff used words such as “burdensome” juxtaposed with words like “most fulfilling” to describe their roles in implementing the camp in 2016. For 2017, the program hired a camp director and supplemented their own staffing resources with staff from outside Arkansas PROMISE. The program also changed the location of the camp to another college campus, which the program staff described as having better facilities and more accommodating policies. During our final interviews with program staff (by telephone), they reported that the camp was better planned and implemented in 2017 than in the previous year. During both our second site visit and the final telephone interviews, staff also reported that the youth who attended the camp in either year loved the experience and looked forward to returning, a view confirmed by youth in the second round of the evaluation’s focus groups.

B. Benefits counseling and financial education services

ED and its federal partners required that each PROMISE program provide counseling for treatment group youth and their families on SSA work incentives; eligibility requirements of various other assistance programs; as well as rules governing earnings and assets and their implications for benefit levels. They also required that the programs provide financial education. Education may cover a range of topics related to promoting families’ financial stability, such as budgeting, saving and asset building, tax preparation, consumer credit, and debt management. In this section, we describe counterfactual services in these areas for youth with disabilities and their families in Arkansas and the services Arkansas PROMISE provided.

1. Counterfactual services

Sources, Arkansas’s Work Incentives Planning and Assistance project, offered benefits counseling to any SSA beneficiary through its community work incentive coordinators (CWICs). This was the same service, from the same organization, that Arkansas PROMISE provided to its participants. The staff at Sources reported to us that they had served few youth before PROMISE began. During our final telephone interviews, they mentioned that of the 40 to 50 youth a typical CWIC worked with per year when Arkansas PROMISE was operating, about half were not involved with the program; of those, few were in secondary school (that is, the CWICs tended to work with non-PROMISE youth who were 18 years or older). The CWICs at Sources described their work with youth as primarily addressing the reporting of earnings to SSA and the development of Plans to Achieve Self-Support (approximately one per month per CWIC and mainly for youth involved with ARS). They mentioned that they attended secondary school transition fairs but rarely worked directly with secondary school staff on student-specific issues.

The staff at ARS told us that they referred their typical (non-PROMISE) clients to Sources for benefits counseling, but those clients rarely included youth. On the rare occasions when they referred youth (and their parents or guardians) from their standard caseloads to Sources, they reported the clients seldom attended the scheduled meetings.

Other benefits counseling through CWICs was available through Ticket-to-Work employment networks, but Arkansas PROMISE staff described those services as limited.¹⁰

¹⁰ An employment network is an entity that enters into an agreement with SSA either to provide or coordinate the delivery of services to Social Security disability beneficiaries.

Moreover, these services would not be accessible to most PROMISE evaluation enrollees because the Ticket-to-Work program is available only for individuals ages 18 and older.

Our data collection efforts did not reveal the existence of any stand-alone financial education services for youth; however, it is possible that some youth received such services as part of their secondary school curriculum or from other sources.

2. Arkansas PROMISE services

Arkansas PROMISE provided benefits counseling and financial literacy services primarily through monthly trainings and the CWICs at Sources. As mentioned previously, the program leveraged existing CWICs at Sources to serve participants; it did not hire staff specifically for this service, nor did it expand its staffing, and the CWICs were not dedicated solely to serving PROMISE participants.

The monthly trainings (described in general terms in Section A of this chapter) provided opportunities for the CWICs and Arkansas PROMISE staff to educate participants and their families on specific issues concerning benefits and earnings. Monthly training topics in this area included an overview of benefits counseling, issues regarding the reporting of earnings to SSA, and financial literacy and money management. The program used two curricula for the financial literacy and money management training during its first three years: Money Matters and Reality Fairs.¹¹ These hands-on, experiential curricula relied on role-playing exercises in asset building and money management. They were used in alternate years, so youth could encounter one curriculum in one year and the other curriculum in the next. About half of participating youth (55 percent) and their families (48 percent) attended at least one monthly training involving benefits counseling; almost half of participating youth (46 percent) and 38 percent of their families attended at least one monthly training involving financial planning (Table III.5).

Arkansas PROMISE participants received individualized benefits counseling as they encountered issues regarding their SSA benefits or achieved milestones such as summer employment or the age-18 redetermination for SSI eligibility. According to program and Sources staff, common issues presented by participating youth involved the SSI student earned income exclusion, earnings reporting requirements, notifications from SSA about benefits termination due to a medical cessation, and the Section 301 waiver. The CWICs at Sources reported that their work with youth participants in Arkansas PROMISE often resulted in additional counseling with parents or guardians on their own benefits and resources issues or with older siblings on their own age-18 redetermination concerns. CWICs' involvement with participants was concentrated in the spring in conjunction with preparation for summer work experiences and usually occurred during the program's monthly trainings. They rarely met with participants during other seasons of the year; some of the CWICs reported having met with roughly two PROMISE youth per month. The CWICs also mentioned that they occasionally fielded calls from PROMISE connectors on benefit issues. They anticipated receiving more requests from the program

¹¹ In its final academic year (2017–2018), Arkansas PROMISE switched to a different financial literacy and money management curriculum: Money Management. This curriculum focused on independent living because many of the participating youth and their families had already covered the topics taught in the previous financial education curricula.

participants for individualized counseling as the participants approached their age-18 redetermination.¹²

Table III.5. Take-up of benefits counseling and financial education services among Arkansas PROMISE participants as of August 2017

Service	Percentage of participating youth who received service	Percentage of participating youth whose family received service
Attended any benefits counseling training	55.0	48.2
Attended January 2016 training	60.5	59.6
Attended April 2016 training	60.7	59.6
Attended April 2017 training	50.7	50.3
Attended any financial planning monthly training	46.1	38.2
Attended February 2016 training	60.5	62.7
Attended February or March 2017 training	68.1	65.5
Number of participating youth	940	940

Source: The Arkansas PROMISE MIS.

C. Career exploration and work-based learning experiences

The federal sponsors stipulated that each PROMISE program was to ensure that participating youth had at least one paid work experience in an integrated setting while they were in high school. They also required that other work-based experiences be provided in integrated settings, such as volunteer activities, internships, workplace tours, and on-the-job training. In this section, we describe counterfactual services with respect to career exploration and work-based learning experiences for youth with disabilities and their families in Arkansas and the services Arkansas PROMISE provided in this area.

1. Counterfactual services

In theory, youth with disabilities had access to existing vocational services and programs through Arkansas workforce investment boards, VR, and schools. In practice, however, the extent of their use of such programs was unknown, although anecdotal evidence suggests few youth accessed them, particularly before leaving high school. In this section, we describe these programs as part of the counterfactual environment for Arkansas PROMISE.

The Arkansas workforce investment boards operated year-round employment programs to help youth find jobs. The services associated with these programs included job search, job preparation, and paid employment experiences. These programs may have had declining enrollment before the Workforce Innovation and Opportunity Act (WIOA) began taking effect in 2015.¹³ For example, during our first site visit to Arkansas PROMISE in August 2014, an

¹² We could not use the Arkansas PROMISE MIS data to confirm the reports by the CWICs noted in this paragraph because the data would not consistently allow us to distinguish between referrals to the CWICs and attendance at monthly trainings.

¹³ WIOA, which superseded the Workforce Investment Act of 1998, was passed by Congress in July 2014 and began taking effect from 2015 through 2017. WIOA is “designed to help job seekers access employment, education,

employment program of a board in PROMISE's eastern region was serving just 100 youth annually, whereas it had served 1,000 youth annually a few years previously. Moreover, the staff of several workforce investment boards told us that their programs served few youth with disabilities, even though having a disability was one of several eligibility categories for the programs. Staff members at ARS underscored this point when they told us that they frequently referred their adult clients to the workforce investment boards for employment services but seldom referred youth.

ARS provided employment services through standard VR counselors and a number of programs that were either targeted to specific subpopulations of youth or offered distinctive services. The standard VR services included rehabilitation counseling, work experiences, permanent job placement, job coaching, and job training. Some areas of the state had VR counselors who specialized in serving transition-age youth; the other VR counselors served a mix of youth and adult clients. ARS did not begin working with youth until they were 17 years old or were in their final year of high school (whichever came later); high school staff who worked with students with disabilities typically did not refer those students to the agency until that time. Although Arkansas PROMISE already was in operation and in response to WIOA, ARS expanded its services for high school students. As described by PROMISE and ARS staff, and as detailed in ARS documents, ARS administered six special programs for transition-age youth concurrent with Arkansas PROMISE.

- Before Arkansas PROMISE began, ARS funded four ARS transition specialists in specific locations to provide targeted services to older students in 11 of the state's 305 high schools. ARS staff viewed the transition specialists as complementing rather than substituting for PROMISE. A few PROMISE treatment group youth received services from the transition specialists; ARS staff reported that, in those cases, the PROMISE staff were regarded as the primary service providers. ARS discontinued funding for the transition specialists in 2016.
- ARS ran the Arkansas Career Training Institute (ACTI), a residential technical school that concurrently served up to 300 youth referred by ARS, Disability Services for the Blind, or the Arkansas Spinal Cord Commission. Enrollees could choose from among 11 vocational programs (such as culinary arts and pharmacy technology) or participate in short-term vocational classes (such as training for working in a call center or operating a fork lift). Enrollees also could access supports that included medical services, counseling, and assistive technology. In 2016, ACTI implemented a requirement that enrollees be able to read at the 5th-grade level, which limited the types of individuals who could attend.
- In 2016, ARS began piloting a five-week residential program that youth entered upon completing the 11th grade. The Transition Employment Program (TEP) was based in Hot Springs and affiliated with ACTI. Its services included assessment, self-advocacy training, a

training, and support services to succeed in the labor market and to match employers with the skilled workers they need to compete in the global economy" (DOL). It coordinates and regulates the employment and training services for adults, dislocated workers, and youth administered by DOL and the adult education, literacy, and VR state grant programs administered by ED. During PROMISE implementation, state entities—particularly workforce organizations, VR agencies, and local education agencies—began planning for and implementing practices to address WIOA requirements. We did not obtain any information about enrollment in employment programs operated by workforce investment boards since WIOA's enactment.

\$1,000 stipend, three internship experiences, and (after high school graduation) a 100-hour paid work experience. TEP served 49 youth in its first year, including at least 4 PROMISE treatment group youth from one PROMISE region (and possibly more youth from the other regions), and 115 youth in 2017. It was slated to serve 300 youth in 2018.

- ARS expanded its Project Search sites from two to five while PROMISE was operating, and had plans to expand the program to five more sites. Project Search is implemented at the work sites of participating employers; it integrates education, employment, and VR services. Most of the Arkansas sites served individuals with disabilities ages 18 to 35, but at least one site served high school youth exclusively.
- ARS partnered with Job Path, a job placement agency, to deliver WIOA pre-employment transition services (pre-ETS) to students and young adults with disabilities.¹⁴ These services included transition and job placement services, along with referrals for benefits counseling.
- ARS implemented school-based transition programs (called “Opportunities for Work-Based Learning”) at 17 high schools in fall 2017, with expansion planned to an additional 15 local education agencies. These year-round programs offered students work-based learning experiences, training on soft skills and independent living, transition classes, and referrals to Sources for benefits counseling. PROMISE participants were among the students served by these programs. In some areas, the staff of these programs reached out to their PROMISE counterparts to encourage referrals to their programs.

Despite ARS’s standard VR counselors and special programs for youth, the staff of Arkansas PROMISE told us that few treatment group youth and families were aware of them; control group youth and their families similarly might have been unaware.

In addition to the services and programs of the workforce investment boards and ARS, Arkansas youth with disabilities had access to other sources of employment services. Employment service providers for people with disabilities included Easter Seals, independent living centers, Goodwill Industries (which served specific populations, such as adults who had not completed high school and youth with autism), and the Arkansas Division of Developmental Disabilities Services.

2. Arkansas PROMISE services

Career exploration and work-based learning experiences were important components of Arkansas PROMISE. Almost all of the program staff who worked with participants had some responsibility for promoting or supporting these components. Recruiting staff regarded employment opportunities as a key selling point for the program in the pitches they made to both youth and their parents or guardians. The youth who participated in our focus groups mentioned that work opportunities were the primary reason they had enrolled in the program. It was primarily through summer work experiences that the program provided participating youth with career exploration and work-based learning experiences.

¹⁴ WIOA required that state VR agencies spend at least 15 percent of their funding on pre-ETS for students with disabilities. These services include job exploration counseling, work-based learning experiences, postsecondary education counseling, workplace readiness training, and self-advocacy instruction.

Arkansas PROMISE contracted with ARS for transition specialists who provided program participants with career exploration services, related assessments, and work-based learning experiences. A manager at ARS oversaw the work of these specialists and met with them monthly.¹⁵ Initially there were 8 transition specialists at ARS supported by the program, but this number expanded to 10 in 2016. The transition specialists served PROMISE participants exclusively and, based on data in the September 2017 MIS extract, their caseloads ranged from 70–158 youth, with an average of 82 (data not shown).

Although transition specialists' caseloads were much larger than those of the PROMISE connectors, they were much smaller than those of the ARS VR counselors not dedicated to PROMISE (ranging from 240–300 individuals). Nevertheless, the caseload size was challenging; according to the transition specialists, it often precluded them from spending sufficient time with participants and completing their work in a timely fashion. A key factor contributing to this challenge was the large geographic areas for which transition specialists were responsible, which required a substantial portion of their working hours be spent traveling to meet with participants.¹⁶ The connectors responded to this situation by assisting the transition specialists with some of their tasks, such as finding employers for summer work experiences and helping participants complete employment applications. Some program staff noted that an additional challenge created by their large caseloads was that it impeded the development of strong professional relationships between the transition specialists and the connectors.

Summer work experiences. Arkansas PROMISE expected that each participating youth would have two summer work experiences of 200 hours each that paid competitive wages, were integrated into the community, and reflected the youth's interests. The program's transition specialists and connectors helped participants identify their goals for summer employment and potential worksites through the development of employability plans that listed the youth's goals, interests, and potential positions. The transition specialists used tools such as interest and career assessments and career exploration exercises to identify employment options and delivered soft-skills training to prepare participants for their work experiences.

Initially, the program expected participants to complete work experiences in their first and third summers after enrolling in the evaluation, and to attend the program's summer camp in the interim summer. However, as of summer 2016, older youth (those approaching their final year of high school) were allowed to engage in work experiences in sequential summers to improve their human capital and prepare for independent, competitive employment after graduation. Although youth targeted for summer work experiences each year were not flagged in the program's MIS, the managers of Arkansas PROMISE provided a written report in September 2017 that

¹⁵ In addition, some of the PROMISE regional managers held monthly, in-person meetings with connectors and transition specialists to review cases, service provision, and community resources. Through these meetings, the managers addressed the challenge of overseeing staff dispersed across wide geographic areas. Other regional managers relied more on telephone check-in meetings to minimize face-to-face meetings, given staff time constraints.

¹⁶ According to data we collected for a different component of the evaluation, program staff spent about 20 percent of their time on travel.

documented the percentage of youth expected to work each summer. The program targeted 80 percent of treatment group youth in 2015, 58 percent in 2016, and 50 percent in 2017.

The program relied on local workforce investment boards to facilitate summer work experiences for participants. Arkansas PROMISE contracted with ADWS, which in turn contracted with nine local boards. Each summer, the workforce investment boards were expected to offer each program participant who was ready for a job a 200-hour work experience, even if the youth did not choose to work all 200 hours. In some cases, participants worked at more than one job during a summer to achieve the 200-hour target. The staff of the workforce investment boards reviewed participants' interests and needs and identified potentially matching worksites. Arkansas PROMISE paid the boards for each youth they engaged in a work experience. ARS paid the wages of the summer workers from non-PROMISE funds as one of a number of ways that it met its WIOA spending requirements for pre-ETS.

For each Arkansas PROMISE participant slated for a summer work experience, a member of the program staff assessed the youth's need for job coaching services and passed that information on to the job coach providers. Local workforce investment boards, in collaboration with program staff, conducted paid job readiness training for youth. Job coaches attended the training with the youth and then were present at the work sites to provide the youth with guidance and resolve problems as needed. The job coaches decreased their involvement with youth at job sites as they became more comfortable with their work responsibilities and environments.

Each year after the completion of the summer work experiences, Arkansas PROMISE held events for the participants and their families to celebrate their accomplishments. Also, the program staff from all of the organizations involved met to debrief on the summer employment successes and challenges and share ideas for potential improvements for the following summer. Those improvements included the following:

- The workforce investment boards required each program participant to attend 10 hours of pre-employment training before starting a 2016 summer work experience. This training included information on topics such as what to expect in a worksite, how to dress, and how to address sexual harassment in a worksite. Youth were paid for their attendance at the same hourly rate as for the summer work experiences.
- The program made several substantial revisions to the structure of job coaching. For the 2015 summer work experiences, the boards were expected to provide job coaching as needed by the youth participants; however, the actual provision of those services did not meet the program's expectations. For the 2016 experiences, the program increased its funding for job coaching and contracted for those services with individual local providers through Sources, rather than the workforce investment boards. Also, beginning in February 2017, the program provided annual training to job coaches to prepare them for working with participants.

- For the 2017 summer work experiences, the program added incentive bonuses for participants who achieved 50, 100, 150, and 200 hours of work during their experiences. The dollar value of a bonus was \$1 for each hour worked.¹⁷
- In fall 2017, the program hired a director of supported employment to oversee the summer work experiences for 2018. To address the transportation problems that some youth experienced in getting to and from their worksites, the program revised its policies to pay job coach providers to deliver transportation services to participants during their 2018 summer work experiences.

Our analysis of MIS data on the summer work experiences of youth participants in Arkansas PROMISE points to the program's success in delivering this core service (Table III.6). More than two-thirds of youth participants in the program (69 percent) had a work experience in at least one summer between 2015 and 2017. Almost one-quarter (24 percent) had work experiences in two or more summers, and 7 percent had work experiences in two or more summers working at least 200 hours in each experience. In each of the three years, between 29 and 34 percent of participating youth had summer work experiences that averaged between 145 and 164 hours.¹⁸ Also in each of those years, between 42 and 46 percent of the youth who had summer work experiences completed at least 200 hours of work, not including the 10 hours of training the program provided for those who participated in the 2016 and 2017 experiences.

A larger proportion of Arkansas PROMISE participants in the program's northwest region had summer work experiences than was the case for their peers in the other regions (Appendix Table A.2). As noted in footnote 8, the economic environment (as indicated by the low unemployment rate) may have been better in the northwest region than in the other regions. More than three-fourths (78 percent) of participants in the northwest region had at least one summer work experience and 29 percent had at least two. The eastern region had the lowest percentage of participants with at least one summer work experience (61 percent), and the Pulaski region had the lowest percentage with two summer work experiences (21 percent). Examining the trend over time in the yearly rate of engagement in summer work experiences, Pulaski was the only region in which program participants' engagement rate in summer employment increased annually from 2015 to 2017. The other regions experienced an increase in this rate from 2015 to 2016; for 2017, however, their rates declined to levels similar to (for one region) or below (for three regions) those for 2015.

¹⁷ One of the workforce investment boards augmented the hourly wage it paid participants by a dollar, rather than offering incentive bonuses.

¹⁸ The statistics reported in Table III.6 on participation and hours for the 2017 summer work experiences may be slightly biased downward because the Arkansas PROMISE staff may not have fully completed the data entry on those experiences in the MIS by the date of our extract from that system (September 15, 2017). However, the statistics reported in the table are similar to those the program reported to its federal partners.

Table III.6. Take-up of career exploration and work-based learning experiences among Arkansas PROMISE participants as of August 2017 (percentages unless otherwise indicated)

Service	Number or percentage
Had a summer work experience in any year, 2015–2017	68.5
Had a summer work experience in two or more years, 2015–2017 ^a	24.3
Had a summer work experience in two or more years, 2015–2017, with at least 200 hours of work each ^b	7.4
Had a summer work experience in 2015	31.0
Average number of hours worked	145.0
Percentage who completed at least 200 hours of work	44.3
Had a summer work experience in 2016	33.6
Average number of hours worked	154.8
Percentage who completed at least 200 hours of work ^b	42.4
Had a summer work experience in 2017	28.7
Average number of hours worked	164.1
Percentage who completed at least 200 hours of work ^b	46.3
Completed an O*NET assessment	46.8
Engaged in a career exploration event or activity	26.1
Number of participating youth	940

Source: The Arkansas PROMISE MIS.

^a Arkansas PROMISE intended that 100 percent of youth would have two summer work experiences by the end of program operations.

^b The assessment of the 200 hour period excludes the 10 hours of training that was a part of the 2016 and 2017 experiences.

During our site visit interviews, program staff told us that many of the youth participants had successfully completed work experiences and some had subsequently secured permanent employment. They also mentioned that some of the youth had developed new career interests as a result of their work experiences and some parents or guardians had changed their expectations regarding the employment potential of their children after observing their successful summer work experiences.

Arkansas PROMISE encountered some challenges in implementing the summer work experiences, including the following:

- **Difficulty aligning work placements with youths' interests.** Not all of the PROMISE participants who had summer work experiences were placed in jobs that aligned with their interests. Although the staff of the workforce investment boards tried to make good matches, some of the youth had interests the staff considered to be unrealistic (such as playing professional football, designing video games, or working in a biology laboratory) or presented logistical challenges (for example, minimum age requirements for certain jobs, such as massage therapist). The PROMISE connectors were sometimes able to find jobs that matched youths' interests by reaching out to employers with which the workforce investment boards had not been previously involved; however, the board staff were cautious about making placements into those jobs because they wanted to ensure that the employers

met the boards' criteria for the work experience provision. The program cut its ties with one board in the eastern region following the 2016 summer work experiences because of the poor quality matches between student interests and work placements. The program opted to use another vendor (not a workforce investment board) in that region for the 2017 summer work experiences, resulting in fewer placements but better matches (Appendix Table A.2). The program parted ways with two other boards following the 2017 summer work experiences due to the poor alignment of work placements with participants' interests.

- **Poor communication between a workforce investment board and Arkansas PROMISE.** The staff of Arkansas PROMISE experienced poor communication with the staff of a central region workforce investment board when the board's liaison to the program left without being replaced and without any notification to the program. This situation contributed to fewer work placements in the corresponding PROMISE region in summer 2017.
- **Unrealized expectations of the workforce investment boards for their involvement.** Fewer youth participated in the summer work experiences than Arkansas PROMISE anticipated, resulting in lower overall payments by the program to the boards. Those payments did not adequately compensate the boards for their efforts in identifying work experiences. In response, the program offered funds to each board to support a year-round, full-time PROMISE liaison within their organizations to assist with planning the summer work experiences; though most boards accepted the additional funding, some did not and subsequently did not fill this position. (For the program's 2018 summer work experiences, all boards employed either a full-time or part-time liaison.)
- **Delays in executing contracts.** Contracts between ADWS and the workforce investment boards for the 2015 and 2016 summer work experiences were not completed until late in the spring of each year, leaving the boards with less time to prepare than was reported by PROMISE staff as optimal. This delay resulted in lapses in coordination among PROMISE staff, board staff, and job coaches. Some of the PROMISE participants learned of their job placements only a week before their jobs were to start. In response, the program worked with ADWS to accelerate the contracting process in subsequent years.
- **Appropriateness and quality of job coaching.** The Arkansas PROMISE connectors and transition specialists reported concerns about the quantity and quality of the job coaching provided to program participants during their summer work experiences. Specifically, during the 2016 summer work experiences, these PROMISE staff perceived that job coaching services were overprescribed; some of the youth did not need coaching or did not require as many hours or weeks of coaching as prescribed. In addition, turnover among the job coaches was high and, according to program staff, some of the coaches were not prepared to work with youth with disabilities and some did not perform up to the program's expectations. Arkansas PROMISE responded to these issues by terminating contracts with some vendors of job coaching services and (as previously noted) by providing annual training to the job coaches.

Other employment-related services. The connectors and transition specialists at Arkansas PROMISE provided services to help participants prepare for and grow from their summer work experiences. They provided career exploration activities and career assessments and worked with school district staff to help participants access school-related job shadowing and career exploration experiences. About half of participating youth (47 percent) completed an O*Net

assessment, a career exploration tool (Table III.6). About one of every four participating youth (26 percent) engaged in a career exploration activity (such as completing a college tour, participating in a job shadowing experience, or attending a career fair) independent of the summer work experiences. PROMISE staff also referred participants to ARS for standard VR services; however, most of those youth had to wait until their senior year of high school for their cases to be opened (the usual time of VR service provision for youth). During the interviews we conducted in the fall of 2016 and 2017, program staff reported that few participants had active VR cases. Local ARS staff coordinated with Arkansas PROMISE staff in serving the few cases they had in common. During the program period, PROMISE connectors referred some participants to ARS's residential training program (ACTI) as a means for them to receive services and gain access to practical training and work experience in selected specific vocational areas, such as auto repair and culinary arts.

D. Parent training and information

The federal sponsors specified two areas in which they expected PROMISE programs to provide training and information to the families of youth participants: (1) the parents' or guardians' role in supporting and advocating for their youth to help them achieve their education and employment goals; and (2) resources for improving the education and employment outcomes of the parents or guardians, and the economic self-sufficiency of the family. In this section, we describe counterfactual services in this area for families of youth with disabilities in Arkansas and the services Arkansas PROMISE provided.

1. Counterfactual services

Although some parent training might have occurred through the programs mentioned elsewhere in this chapter, Mathematica's primary data collection efforts did not identify any services specifically for parents of youth with disabilities that were similar to the parent training and information offered through Arkansas PROMISE. The Center for Exceptional Families was ED's parent training and information center in Arkansas; although it provided training to parents and guardians regarding their youth, it was not mentioned as a resource during our site visit interviews. PROMISE staff who were familiar with secondary school programs and policies told us that the schools were not very proactive in communicating and building connections with parents, particularly with respect to raising parent expectations regarding their children's academic engagement and performance. Parents did have access to existing state and local programs for their own education, employment, and self-sufficiency needs.

2. Arkansas PROMISE services

Arkansas PROMISE connectors primarily worked with participating youth but also with their parents or guardians and other family members, depending on how receptive those individuals were to the program's services. During interviews, service professionals outside of PROMISE described the program's attention to family members as a unique strength—a feature that other entities, including secondary schools, could emulate. Program staff, however, described the parents and guardians as being more difficult to engage than youth. Some of the connectors mentioned that many parents perceived Arkansas PROMISE as being primarily for their children and so were disinclined to engage in program services themselves.

The connectors worked with parents and guardians to develop their own PROMISE plans (analogous to the plans developed with participating youth). During our two site visits to the program in 2015 and 2016, the connectors with whom we spoke estimated that the parents or guardians of between one-third and one-half of youth participants had their own PROMISE plans. Subsequent to our second visit, the program made a concerted effort in the fall of 2016 to ensure that parents and guardians completed plans, both to encourage their pursuit of their own educational and vocational goals and to improve the general household environment (thus benefiting the youth participants). Those efforts proved to be successful; according to data in our August 2017 extract from the program's MIS, 87 percent of participating youth had parents or guardians with their own plans, which roughly equaled the percentage of participating youth who had plans (90 percent). (Parent and guardian percentages are in Table III.7.) The parents or guardians of about 75 percent of participating youth had plans that included career goals; a similar percentage had plans that included education goals.

The connectors met with parents and guardians during case management meetings and provided them with referrals to employment or educational services, as well as to organizations that could help them meet their basic household needs, such as for food and housing. Fifteen percent of participating youth had parents or guardians who were referred to either education or employment services (7 percent to education services and 11 percent to employment services) by August 2017 (Table III.7). Arkansas PROMISE anticipated referring the parents or guardians of 35 percent of participating youth to either of these services by the end of program operations, and thus was approaching half of that goal with about a year of program operations remaining.

Arkansas PROMISE viewed attendance by parents and guardians at the program's monthly trainings as important to their ongoing engagement. During those trainings, the parents and guardians received information about the transition process, how to support their children through that process, and the services offered by Arkansas PROMISE and other providers. They also had the opportunity to network with their peers who were dealing with issues similar to those of their own children. During the evaluation's focus groups, parents and guardians reported having attended the monthly trainings and described them as enjoyable and informative. Beginning with the October 2015 monthly trainings, program staff tracked attendance by parents and guardians. The percentage of monthly trainings attended after the implementation of tracking was slightly lower for parents and guardians (19 percent, Table III.7) than for participating youth (22 percent, Table III.3) and well below the program's target attendance rate of 75 percent (Table III.7). The program staff told us that attendance by parents and guardians increased with the introduction of incentives in fall 2016; however, the MIS data provide no evidence of such an uptick in adult attendance rates.

Regional patterns of parent and guardian program engagement largely followed the patterns observed for participating youth (Appendix Table A.2). The proportion of parents or guardians with PROMISE plans ranged from a low of 76 percent in the eastern region to a high of 96 percent in the Pulaski region, and the average percentage of monthly trainings attended by parents and guardians ranged from 13 percent in the Pulaski region to 28 percent in the northwest region. Rates of referrals of parents and guardians for education or employment services also varied considerably across the program's regions, though the patterns did not correspond to those of youth; 34 percent of parents or guardians in the eastern region received such referrals, compared with just 3 percent of those in the northwest region.

Table III.7. Take-up of parent training and information services among Arkansas PROMISE participants as of August 2017 (percentages unless otherwise indicated)

Service	Number or percentage
Youth with a parent or guardian who developed a PROMISE plan	
Any PROMISE plan ^a	87.2
A PROMISE plan that includes at least one career goal	74.7
A PROMISE plan that includes at least one education goal	74.9
Youth with a parent or guardian whom PROMISE staff connected to services	
Education or employment training services ^b	15.0
Education services	7.1
Employment training services	11.0
Average percentage of monthly trainings attended by parents or guardians ^c	19.4
Number of participating youth	940

Source: The Arkansas PROMISE MIS.

^a Arkansas PROMISE intended that 100 percent of parents or guardians would develop a PROMISE plan.

^b Arkansas PROMISE intended that 35 percent of parents or guardians would be connected to education or employment training services by the end of program operations.

^c Arkansas PROMISE intended that parents or guardians would attend 75 percent of monthly trainings.

E. Education services

The federal PROMISE program sponsors did not specify education services as a core program component, but programs were free to implement them in the context of or separate and apart from other program services. Examples include activities to expose participating youth to postsecondary education and assistance with individual transition planning in schools. In this section, we describe counterfactual education-related services for youth with disabilities in Arkansas and the services Arkansas PROMISE provided in this area.

1. Counterfactual services

Counterfactual education services available to youth with disabilities included the mandatory school and transition services provided as part of the special education programs of secondary schools, supplemented by transition coordination and technical assistance services for staff. We identified few additional education programs specifically for youth with disabilities; the two we did identify reached only a limited number of youth. Despite the additional services for staff, the people we interviewed believed that youth continued to face challenges in accessing transition services and connecting to postsecondary school services while in school. Below we describe features of the education services available as part of the counterfactual environment.

Arkansas youth with disabilities received transition services through their schools, as specified in their 504 plans or individualized education programs (IEPs) if they had them. A major concern voiced by PROMISE program staff regarding school-based transition services was the lack of their coordination with external services. For instance, secondary school connections to ARS were limited, particularly in rural areas, given that there were only four ARS transition specialists serving just 11 high schools (and that program was subsequently discontinued), and standard ARS services were available to youth only late in their high school careers. Linkages between high schools and the workforce investment boards also were limited,

as evidenced by the board staff telling us that they had little experience in working with high school students.

ADE maintained six regional transition specialists to help school districts deal with student transition issues. These specialists provided professional development for school staff, offered transition classes and training to them, and addressed specific transition problems that school staff brought to their attention. They also assisted in the development of special transition programs that operated in a small number of schools.

Two examples of special transition programs in Arkansas secondary schools are Steps and Circles. Steps was a program that promoted the use of online data manipulation tools by school districts to improve their capacity to serve youth with disabilities; however, the program had become inactive as of fall 2017. Several of our interviewees mentioned efforts to restart it. Circles programs sought to improve interagency relationships by bringing community service providers together with school staff and students to discuss the service needs of individual students. They also helped students make new connections with community service providers. Two Arkansas school districts had Circles programs as of fall 2017; two other districts were scheduled to roll out Circles programs during the 2017–18 academic year. Each of these programs served 15 to 20 youth per academic year.

The consulting group Arkansas Transition Services offered many resources to promote transition at the secondary school level under a contract with ADE. This group conducted trainings, coordinated across state agencies (such as ADE and ARS), distributed resources, and shared knowledge among those working on transition issues, particularly high school teachers and counselors. It also provided information to students with disabilities and their parents (including the resource list that Arkansas PROMISE adapted to provide to the evaluation’s control group members) and organized career and transition fairs for students with disabilities. Arkansas Transition Services held an annual transition summit, which provided the staff of schools and other organizations with an opportunity to learn about best practices in transition services and network with each other. (PROMISE staff attended these summits.) The group coordinated the Arkansas Interagency Transition Partnership, a multiyear collaboration of various state stakeholders such as ADE, ARS, and parent centers to improve transition processes, solve problems, and address data issues.

We found few examples of programs implemented by higher education institutions in Arkansas to help youth with disabilities realize their college aspirations. One such program, College Bound Arkansas, was a college-oriented summer camp for high school youth with disabilities interested in postsecondary education. Our interviewees described it as being similar to the summer camp offered by Arkansas PROMISE, although smaller (serving 30 youth per summer). Another program, sponsored by Easter Seals, offered internships and opportunities to attend classes at the University of Arkansas Little Rock to youth with cognitive disabilities.

2. Arkansas PROMISE services

It was expected that high school graduation rates for youth would increase as a result of their participation in Arkansas PROMISE. The program provided education services through ARS

transition specialists to facilitate that outcome.¹⁹ The transition specialists forged relationships with the staff at local high schools, conducted transition assessments to inform PROMISE service delivery, and obtained consent for the release of information by the schools to the program (including IEPs, transcripts, and test results). In addition to promoting high school graduation, PROMISE education services were designed to promote college attendance. To that end, PROMISE staff worked with participating youth to set goals related to postsecondary education and helped them with college placement exams and applications (for instance, by assisting with exam preparation and paying application fees). Additionally, the program held its summer camps, along with some monthly trainings, on college campuses, thereby exposing the participants to college environments.

Arkansas PROMISE hired a staff member in early 2015 to serve as a liaison between the program and local schools. That individual educated the PROMISE connectors and transition specialists on school policies pertaining to transition, met with the staff of high schools to discuss PROMISE-specific issues, and informed the staff at ADE about PROMISE-related developments. Those services were particularly important for the PROMISE staff, as they were aware of gaps in their knowledge of school policies that were especially relevant to the youth they were serving, such as those pertaining to IEPs, the Individual with Disabilities Education Act, attendance, and bullying.

Arkansas PROMISE program managers encouraged the transition specialists to attend IEP meetings with participating youth and their families.²⁰ However, such attendance was contingent on obtaining advance notice of the meetings from the parents or guardians as well as their written consent for the transition specialists to attend. Consequently, the transition specialists reported to us that they had attended few IEP meetings. However, through other interactions with parents and guardians, the program staff hoped to help them develop stronger advocacy skills for use during those and other meetings with school staff. The program's MIS did not contain data that would have allowed us to assess attendance at IEP meetings or any other information on education service provision, though staff might have recorded such information as part of their case management meeting data entries.

Youth participants in Arkansas PROMISE and their parents or guardians shared with us during focus group discussions that education services were an important component of the program for them. The youth reported having received assistance from the program with school-related matters (such as applying to postsecondary education programs and completing financial aid forms, and specifying their education goals) and having spoken with the program's connectors about their schoolwork and grades. From the parents' perspective, the connectors had helped their children primarily by attending school meetings and assisting with college applications.

¹⁹ The PROMISE connectors often assisted with providing education services because transition specialists were stretched thin due to their large caseloads.

²⁰ MIS data suggest that 40 percent of participating youth had an IEP and 3 percent had a 504 plan.

F. The possibility that control group members received Arkansas PROMISE services

Adherence to a study design that maintains and maximizes a distinction between the treatment and control groups throughout program operations is critical for an evaluation to be able to detect program impacts (that is, statistically significant differences in outcomes between the treatment and control groups). The more a program inadvertently provides services to control group members, the less likely average outcomes will differ between the treatment and control groups.

Arkansas PROMISE's design for and management of the recruitment and enrollment of youth in the evaluation and the engagement of treatment group youth in services minimized the risk that control group youth would access the program's services. The program's enrollment staff were distinct from its service delivery staff. Although some of the connectors did assist with recruitment activities, they did not enroll youth and so were not involved in the random assignment process. The connectors had no access to data on control group youth through either the RAS or the services component of the program's MIS. After Arkansas PROMISE achieved its enrollment goal, control group information was no longer available in the enrollment component of the MIS. The connectors and transition specialists worked exclusively on Arkansas PROMISE and served only treatment group youth. Arkansas PROMISE activities, such as the summer work experience and the summer camp, could be accessed only by treatment group youth. Although recruitment staff converted to retention staff after enrollment ended, they provided no services or outreach to control group youth.

A program model that intends to create lasting change in the service environment can also be challenging for an experimental impact evaluation. Sustaining improvements in the service delivery environment, as expected by federal PROMISE partners, and certain components of Arkansas PROMISE may become the program's greatest legacy if the results are more effective services for future cohorts of transition-age youth with disabilities and their families. As those outside of the treatment group begin to benefit from such enhancements, however, the impacts of the program within the context of the random assignment evaluation may diminish. Consequently, any sustainment of Arkansas PROMISE could have problematic implications for the evaluation's five-year impact analysis and any longer-term impact analyses that SSA or other organizations might choose to undertake.

As of September 2017, Arkansas PROMISE had no specific plans for sustaining discrete aspects of the program's service model beyond the end of the cooperative agreement (September 2018). The PROMISE staff had been hired specifically for the program and their positions were eliminated when the program ended. To prepare the youth participants for their lives after PROMISE, program staff provided them with training on life skills during the monthly trainings and referred them to ARS and other service providers. To prepare the program staff for their lives after PROMISE, the program held career fairs during which information about career opportunities was provided.

Finally, systems-level changes that Arkansas PROMISE facilitated or that occurred apart from but concurrently with it may dilute the impacts of the program if they result in enhanced services for members of the control group similar to those provided by Arkansas PROMISE.

Several initiatives that included systems-change elements and were implemented while PROMISE was operational could have implications for the program's impacts. These include WIOA, a grant that Arkansas received to address the needs of youth with disabilities, and several changes at ADE.

WIOA. The implementation of WIOA resulted in major policy and program changes by Arkansas state agencies. The year-round youth employment programs of ADWS and the workforce investment boards shifted their emphasis toward serving out-of-school rather than in-school youth. This change may have limited access to these programs for youth in the Arkansas PROMISE control group while they were enrolled in school. ARS made multiple changes as a result of WIOA. Because of the WIOA pre-ETS requirements (including the mandate to spend at least 15 percent of its federal funds on these services), ARS sought ways to increase spending on youth who were enrolled in high school; one way that it did so was by funding the wages of participants in the PROMISE summer work experience program.²¹ This use of funds by ARS to support PROMISE may have had negative implications for the availability or intensity of its services for control group youth; in the absence of PROMISE, those funds would have been available for all youth, not just treatment group youth. Also as a result of WIOA, ARS provided pre-ETS services to high school students, paid additional vendors to provide high school students with work experiences, and developed school-based transition programs. ARS management anticipated that all of its VR counselors would eventually have transition responsibilities, which would result in the counselors having caseloads with more and younger youth.

National Technical Assistance Center on Transition award. An important development in the transition policy environment for Arkansas state agencies was the state's receipt of a National Technical Assistance Center on Transition (NTACT) award. As a result of the state's selection as an intensive technical assistance site, the participating agencies (including ADE, ADWS, and ARS) received guidance on improving coordination across several components of the transition system, including data access, data analysis, use of evidence-based practices, and training for educators. Important results of the state's involvement with NTACT were meetings of representatives of agencies on transition issues and improvements in collaboration. To the extent that these activities were successful, they could have improved the transition counterfactual environment and in this way potentially minimized differences in the outcomes of treatment and control groups.

Changes at ADE. In part because of WIOA and NTACT, several changes in ADE operations occurred while Arkansas PROMISE operated that could have affected the counterfactual service environment. First, working relationships between ADE and ARS improved. The high schools requested more involvement by ARS to assist with transition issues at an earlier point in students' high school careers, and the high school transition staff were more aware of ARS programs and resources such as TEP and pre-ETS. Second, the high schools expanded their transition class offerings for students with disabilities. The new offerings reflected the schools' collaborations with ARS for school-based transition programs. As with

²¹ ARS had originally planned to fund job coaching services for participants in the Arkansas PROMISE summer work experience program, but because these services did not count toward the WIOA pre-ETS funding requirement, the agency changed its approach so that its funding for PROMISE could both support the program and count toward the pre-ETS requirement.

NTACT activities, improved transition services provided by ADE could have increased the likelihood that youth in the control group accessed vocational services, though this potential would have been lessened by two factors: (1) youth in the treatment group would also have had access to these services and (2) because school districts operated independently, the extent to which these changes occurred likely varied across high schools.

IV. PROGRAM PARTNERSHIPS

As noted in Chapter I, a key objective of the PROMISE programs was to improve service coordination among multiple state and local agencies. The federal sponsors required recipients of PROMISE cooperative agreements to establish formal partnerships among state agencies responsible for programs that serve the target population, encouraging them to cultivate new partnerships and expand existing ones with community-based disability providers. At a minimum, these partnerships needed to include the agencies responsible for programs that provide VR, special education, workforce development, Medicaid, Temporary Assistance for Needy Families, services for those with developmental or intellectual disabilities, and mental health services. Arkansas PROMISE established partnerships with each of these agencies, as well as other organizations within the state that were not governmental agencies. In this chapter, we describe the quality of these partnerships and changes in communication and collaboration among the partners over time.

Data from two social network surveys of administrators and frontline staff of Arkansas PROMISE partners provided an opportunity to quantify and graphically depict their partnerships before PROMISE and how those partnerships changed as they implemented the program. The surveys were grounded in network theory, which focuses on the ties among individuals or organizational entities (Wasserman and Faust 1994). Survey data from administrators (who did not provide services directly to participants) provided insight into system changes that supported service delivery and might extend beyond the end of the cooperative agreement for Arkansas PROMISE. Survey data from frontline staff (who provided services directly to participants) illuminated the service networks that may have facilitated or impeded program implementation and operations. Changes in relationships that occurred concurrently with program implementation and operations cannot necessarily be attributed entirely to PROMISE, as other initiatives (such as WIOA) and environmental factors may have been driving or contributing forces.

The social network surveys asked respondents to report their involvement with nine Arkansas PROMISE partner organizations.²² They included the lead agency (UA), agencies directly involved in providing Arkansas PROMISE services (ADWS, ARS, and Sources), other state agency partners that may have provided services to youth in the treatment or control groups (ADE, Arkansas Department of Health, Arkansas Department of Human Services), and non-state agency partners (Arkansas Hunger Relief Alliance and the Clinton Foundation).²³ Staff from the four PROMISE administrative partner organizations (ADE, ARS, Sources, and UA) responded to the survey of administrators. Members of the Arkansas PROMISE intervention teams

²² Because these surveys differ from typical surveys (they ask about relationships between the respondent and all other AR PROMISE partner agencies), we used network analysis computations to quantify the results. Network analysis is an approach to examine relationships among a set of actors. In the network analysis computations, we excluded the respondent's own organization. For the administrative network analysis, when more than one person from an organization responded, we used the highest value across respondents to represent the organization's response. In these instances, the analysis reflects the "best" relationship reported. We then computed the average percentage across all organizational respondents. The average percentage is reported in the tables and figures.

²³ We excluded Currents and ARC from the network analysis because their only roles in Arkansas PROMISE were to provide technical assistance and training or MIS development.

(connectors and transition specialists) responded to the survey of frontline staff; the analysis excluded their involvement with the Clinton Foundation, as that organization lacked corresponding frontline staff with whom the intervention teams could connect.²⁴ We captured information about the Arkansas PROMISE networks during the following periods:

- Before Arkansas PROMISE services began (about 6 months before enrollment in the evaluation began, which was 12 months before we conducted the first round of the survey)
- Early implementation (about 6 months after enrollment in the evaluation began, which was when we conducted the first round of the survey)
- Late implementation (about 24 months after enrollment in the evaluation began, which was when we conducted the second round of the survey)

The findings we present below indicate different patterns of network relationships for Arkansas PROMISE administrators and frontline staff. Administrators of the partner organizations we surveyed increased their contact during early implementation, though that increase was not sustained, and their collaborations throughout the program focused on service delivery. Among line staff, the connectors reported communicating frequently with an increasing number of partner agencies as implementation progressed, whereas the transition specialists' communication remained consistent and was primarily with the program's partner organizations that had key responsibilities for delivering its services.

A. Administrative partnership networks

When the program rolled out, communication and effective working relationships increased among Arkansas PROMISE partners at the administrative level about issues pertaining to youth with disabilities, but these increases were not sustained as the program matured. Table IV.1 shows the relationships reported by the four Arkansas PROMISE administrative partner organization respondents with the other eight partner organizations. The first column identifies the question asked, the second column indicates the level at which we assessed the responses, and the percentages represent the share of partner organization relationships at the level indicated for each period. For example, before PROMISE services began, each of the four respondents reported on their communication with each of the other eight partner organizations, for a total of 32 reported relationships. Nineteen of the 32 reports (59 percent) indicated the communication occurred at least monthly.

Communication among Arkansas PROMISE partners at the administrative level about issues pertaining to youth with disabilities was relatively high before Arkansas PROMISE services began and increased slightly as the program was implemented (Table IV.1).²⁵ Most of the

²⁴ Although we surveyed staff from Sources and the workforce investment boards, we excluded those responses from this analysis to focus on the primary Arkansas PROMISE service delivery staff.

²⁵ This pattern differed when we restricted the analysis to reciprocal relationships among the organizational respondents (that is, those relationships in which the respondents were in agreement), such that the increase in communication was sustained throughout implementation. Pairs of organizations reported at least monthly communication with each other 67 percent of time before PROMISE services began, 83 percent of the time during early implementation, and 83 percent of the time during late implementation. This difference might reflect the fact

respondents' communication with other partners was at least monthly before the implementation of Arkansas PROMISE services (59 percent of partner organization relationships); it peaked during early implementation at 69 percent before falling back to 59 percent during late implementation. This pattern might reflect a greater need for involvement among the partner organizations during enrollment in the evaluation and the initial rollout of services as compared to what is required for a steady-state program.

These levels of communication were generally consistent with the views of the respondents to the survey of administrators regarding the effectiveness of their working relationships with the Arkansas PROMISE partner organizations. The effectiveness of most of the relationships was high (Table IV.1). When assessed relative to a threshold of "effective to a considerable extent" (the highest response option), the assessments before services began and during late implementation were similar, representing 56 percent of partner organization relationships, and the assessment during early implementation was slightly higher (63 percent). When assessed relative to a threshold of "effective to some or a considerable extent," the assessments increased over time from 78 percent to 90 percent of partner organization relationships.²⁶

Table IV.1. Communication and effective working relationships among Arkansas PROMISE partners, by implementation period

Relationship question	Response assessed	Share of partner organization relationships		
		Before PROMISE services	Early implementation	Late implementation
How frequently did administrative staff from your organization communicate with administrative staff in the following organizations about issues pertaining to youth with disabilities and their families?	Communication at least monthly	59%	69%	59%
To what extent did your organization have an effective working relationship with each of the following organizations on issues related to youth with disabilities and their families?	Effective working relationship to a considerable extent	56%	63%	56%
	Effective working relationship to some or a considerable extent	78%	84%	90%

Notes: Respondents for four Arkansas PROMISE administrative partners (ADE, ARS, Sources, and UA) completed interviews in the early and late implementation periods (the early interview also covered the period before PROMISE services began) to describe their relationships with each of the other eight Arkansas PROMISE partner organizations. More than one person from UA responded regarding all periods, and more than one person from ADE responded regarding the period before PROMISE services began and early implementation; however, in each instance, we used the highest value reported to represent the organization's response. Thus, it was as if there was one respondent for each organization.

All of the respondents to the survey of PROMISE administrative partner organizations reported that they had communicated with UA (the Arkansas PROMISE lead agency) at least

that respondent organizations were those most involved with PROMISE implementation and their roles required their consistent interaction.

²⁶ The pattern observed for reciprocal relationships suggests that the increase in effective working relationships among respondents was maintained throughout implementation, no matter the response level assessed.

monthly before the program began; this pattern continued during early and late implementation (Table IV.2). One reason for the high level of communication with UA even in the earliest stage might have been its planning activities before services started. Communication at least monthly by the administrative partners with the agencies that provided PROMISE services increased during early implementation and then declined during late implementation; however, the communication during late implementation was still greater than before PROMISE services began. Communication declined by late implementation for other state agency partners, and it was lowest with the non-state agency partners, which had specialized roles in the program.

The respondents for the PROMISE administrative partners consistently reported having effective working relationships with all but the non-state agency partners (Table IV.2). The effectiveness of the working relationships of the administrative partners with UA, the service partners, and the other state agencies was high before PROMISE services began and increased to the 100 percent level by late in the program's implementation. This pattern likely reflects the regular meetings for the program held by UA to discuss implementation progress, successes, and challenges. In contrast, the respondents for the administrative partners perceived their working relationships with non-state agency partners to be less effective than for other partners. However, even those relationships were judged to have improved somewhat by late implementation.

Table IV.2. Communication at least monthly and effective working relationships among Arkansas PROMISE partners, by implementation period

Implementation period	Share of partner organizations with which respondents reported relationship				
	All PROMISE partners (9)	UA (1)	PROMISE service partners (3)	PROMISE other state agency partners (3)	PROMISE non-state agency partners (2)
Communication at least monthly					
Before PROMISE services	59%	100%	70%	64%	25%
Early implementation	69%	100%	90%	64%	38%
Late implementation	59%	100%	80%	55%	25%
Effective working relationship to some or considerable extent					
Before PROMISE services	78%	67%	90%	91%	50%
Early implementation	84%	100%	90%	100%	50%
Late implementation	90%	100%	100%	100%	57%

Notes: Respondents for four Arkansas PROMISE administrative partners (ADE, ARS, Sources, and UA) completed interviews in the early and late implementation periods (the early interview also covered the period before PROMISE services began) to describe their relationships with each of the other eight Arkansas PROMISE partner organizations. They responded to the questions, "How frequently did administrative staff from your organization communicate with administrative staff in the following organizations about issues pertaining to youth with disabilities and their families?" and "To what extent did your organization have an effective working relationship with each of the following organizations on issues related to youth with disabilities and their families?" For each group of Arkansas PROMISE partner organizations, we computed the percentage of those organizations with which each administrative partner reported communication "at least every month" or effective working relationships "to some or a considerable extent." More than one person from UA responded regarding all periods, and more than one person from ADE responded regarding the period before PROMISE services began and early implementation; however, in each instance, we used the highest value reported to represent the organization's response. Thus, it was as if there was one respondent for each organization. Responses are shown for all Arkansas PROMISE partners as well as by four mutually exclusive PROMISE partner types (UA—the lead agency, service providers, other state agency partners, and non-state agency partners).

As Arkansas PROMISE matured, the administrative partners collaborated slightly less frequently on PROMISE-specific activities related to service delivery, client referrals, and data sharing (Table IV.3). The time trends in their collaboration on these activities outside of

PROMISE were mixed; collaboration outside of PROMISE increased for service delivery but was unchanged or decreased for other activities. As the program matured, administrators collaborated as frequently within as outside of the program on service delivery and client referrals but more frequently within the program on data sharing and sharing resources. The administrative partners worked more frequently with UA, ADE, ADWS, ARS, and the Arkansas Department of Human Services than with the other four partner organizations, particularly during early implementation and on PROMISE activities (data not shown).

Table IV.3. Activities on which Arkansas PROMISE partners collaborated related to and outside of the program, by implementation period

Relationship question	Collaborative activity	Share of partner organization relationships	
		Early implementation	Late implementation
In the past year, and related to your work on PROMISE, with which of the following organizations has your organization conducted [activity]?	Service delivery	66%	63%
	Client referrals	50%	34%
	Data sharing	38%	28%
	Resource sharing	31%	31%
In the past year, and outside of your work on PROMISE, with which of the following organizations has your organization conducted [activity]?	Service delivery	50%	63%
	Client referrals	34%	34%
	Data sharing	25%	19%
	Resource sharing	28%	22%

Notes: Respondents for four Arkansas PROMISE administrative partners (ADE, ARS, Sources, and UA) completed interviews in the early and late implementation periods to describe their collaborative activities with each of the other eight Arkansas PROMISE partner organizations. We computed the percentage of those organizations with which each organizational respondent reported conducting the specified activity. More than one person from UA responded regarding both periods, and more than one person from ADE responded regarding early implementation; however, in each instance, we used the highest value reported to represent the organization's response. Thus, it was as if there was one respondent for each organization.

B. Service partnership networks

The relationships that individual Arkansas PROMISE frontline staff (connectors and transition specialists) had with the program's partners varied. We asked about their relationships with seven partners that employed frontline staff who worked directly with clients. Fourteen staff members responded to the questions about early implementation and 10 about late implementation; 10 of the respondents provided information about both periods. In Table IV.4, we show the share of frontline partner organization relationships in which Arkansas PROMISE frontline staff reported communicating at least monthly or conducting collaborative activities during early or late implementation.²⁷ For example, during early implementation, 14 staff members reported on their communication with each of the other 6 partner organizations (excluding their own), for a total of 84 reported relationships. Thirty-eight of the 84 reports (45 percent) indicated that communication occurred at least monthly.

²⁷ We did not assess Arkansas PROMISE frontline staff relationships before PROMISE services began because these staff had not yet begun working for the program.

Table IV.4. Activities among Arkansas PROMISE frontline staff and Arkansas PROMISE partners, by implementation period

Relationship question	Response assessed/collaborative activity	Share of partner organization relationships	
		Early implementation	Late implementation
How frequently did you communicate with frontline staff (who work directly with clients) in the following organizations about client issues?	Communication at least monthly	45%	57%
Related to your work with youth or adults with disabilities, how often did you do the following with each organization?	Refer clients to partner organization	60%	68%
	Conduct joint training	48%	63%
	Discuss clients' needs, goals, and services	43%	65%
	Share client data	39%	60%
	Meet for transition planning	36%	53%
	Receive referrals from partner organization	12%	27%

Notes: A total of 14 Arkansas PROMISE connector and transition specialist respondents completed interviews during early implementation and 10 during late implementation to describe their activities with seven Arkansas PROMISE partner organizations.

Arkansas PROMISE frontline staff increased their collaboration with the program's partner organizations as the program matured. In 45 percent of their relationships during early implementation and 57 percent during late implementation, Arkansas PROMISE connectors and transition specialists reported communicating at least monthly with the frontline staff of other organizations. During early implementation, frontline staff collaborated with partners most often to refer youth and families to their services and conduct joint training. These findings are congruent with what we learned during our interviews with frontline staff, who discussed youth referrals, program outreach, and training with the frontline staff of other programs. As the program matured, intervention staff increasingly collaborated with partners' frontline staff with respect to these and all other activities we assessed: discussing clients' needs, goals, and services; data sharing; transition planning; and receipt of referrals from the partner organizations.²⁸ For example, in our interviews with frontline staff during the second site visit, they described improvements in working with secondary schools as implementation progressed and they received outreach from ARS about including PROMISE youth in new ARS offerings.

The percentages shown in Table IV.4 offer summary information about relationships but do not reflect the variations between individual Arkansas PROMISE frontline staff and partner organizations. Figure IV.1 uses graphical representations of relationships (sociograms) to depict at least monthly communication (shown as lines) that Arkansas PROMISE connectors and transition specialists (shown as red circles) reported having with partner organizations (shown as

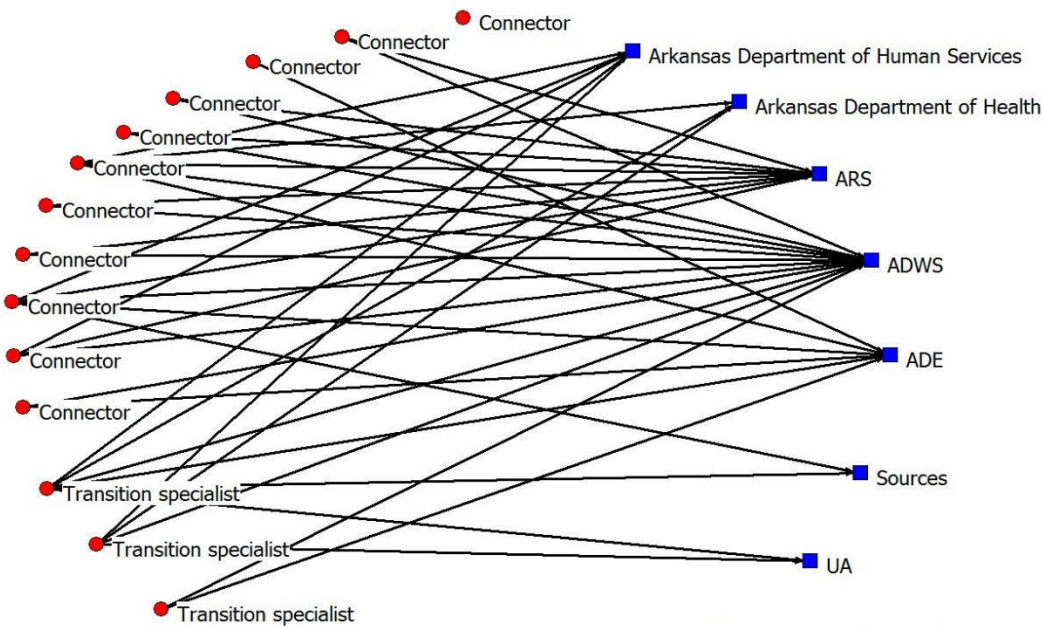
²⁸ These patterns are similar when examining the responses for the 10 staff respondents who provided information during both early and late implementation. For example, these respondents reported communication at least monthly with 42 percent of the frontline staff of Arkansas PROMISE partner organizations during early implementation and 57 percent during late implementation.

blue squares). Figure IV.1a shows the relationships reported during early implementation; Figure IV.1b shows them during late implementation. Three patterns emerge from these figures:

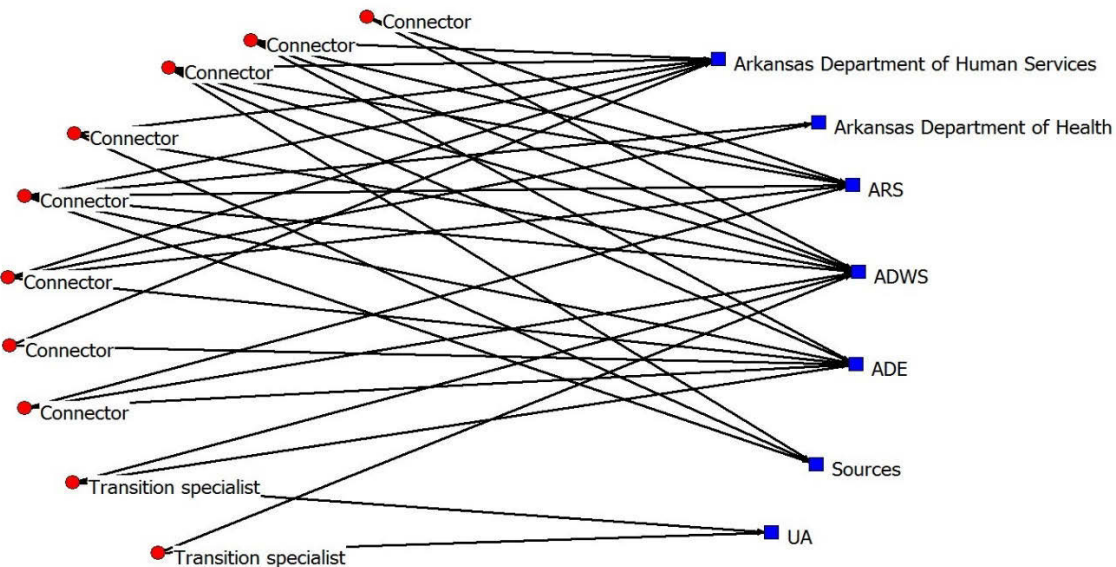
1. The Arkansas PROMISE connectors had more communication with partner agencies during late implementation than early implementation. During early implementation, only 3 of the 11 connectors who responded to the survey communicated at least monthly with three or more partner agencies, and 5 did so only with ARS and ADWS. Conversely, during late implementation, 6 of the 8 connectors who responded to the survey communicated at least monthly with three or more partner agencies, and just one of them did so only with ARS and ADWS. (The connectors had no communication with UA because it was their own organization.) This increase in frequent communication might reflect gains in their knowledge of community resources and their program roles, along with the changing needs of the youth on their caseloads.
2. The Arkansas PROMISE transition specialists had less communication with partner agencies during late implementation than early implementation. During early implementation, the three transition specialists who responded to the survey communicated at least monthly with between two and six PROMISE partner agencies. In contrast, during late implementation, the two transition specialists who responded to the survey communicated at least monthly with only two or three PROMISE partners, including UA and ADWS. This consolidation of communication networks could reflect a sharpening in the focus of the roles and responsibilities of the transition specialists (primarily on employment and education) relative to connectors, particularly as the transition specialists' caseloads increased. (The transition specialists had no communication with ARS because it was their own organization.)
3. The depictions of the communication networks of the PROMISE connectors and transition specialists suggest that Sources may have been underutilized by the program's frontline staff. Sources provided benefits counseling, and both the benefits counselors and the connectors reported to us during our site visits that the former interacted with PROMISE participants and staff only sporadically—primarily when the participants encountered benefits issues or were preparing for summer work experiences.

Figure IV.1. Communication at least monthly among Arkansas PROMISE frontline staff and Arkansas PROMISE partners, by implementation period

a. Early implementation



b. Late implementation



Notes: A total of 14 respondents completed interviews during early implementation and 10 during late implementation. The figures show responses of “at least every month” from Arkansas PROMISE connectors and transition specialists to the question, “How frequently did you communicate with frontline staff (who work directly with clients) in the following organizations about client issues?” Red circles represent connectors and transition specialists; blue squares represent Arkansas PROMISE partners. Respondents did not report on communication with staff from their own organization.

V. LESSONS AND IMPLICATIONS FOR THE IMPACT ANALYSIS

In the absence of findings from the evaluation's ongoing impact analysis, it is premature to assess whether Arkansas PROMISE was successful in reducing SSI payments and improving education and employment outcomes among transition-age youth with disabilities. Nonetheless, the process analysis revealed several lessons on the benefits and challenges of the program's approach to engaging youth with disabilities, delivering services to them and their families, and facilitating partnerships to improve service coordination. It also identified important considerations about how administrators and staff implemented the program in practice that may have implications for its ability to generate impacts.

A. Lessons about engaging youth with disabilities and their families

An emphasis on employment was attractive to youth. Arkansas PROMISE had a strong emphasis on employment, which was implemented through its summer work experience component. Many of the participating youth with whom we spoke mentioned this component as motivating their participation in the program and told us they were looking forward to their own work experiences. This emphasis provided clarity for the participants as to what they would receive during their involvement in the program, potentially helping them to maintain their involvement.

Using specialized staff for recruitment and enrollment can be beneficial. Arkansas PROMISE's use of staff whose only role was to conduct outreach to eligible youth and their families was instrumental in the program's early enrollment success and ultimate attainment of its overall enrollment target. However, the assignment of one full-time recruiter to each of the program's four regions proved to be insufficient, particularly as one region had an enrollment goal that was twice that of the other regions. The program addressed its recruitment challenges by leveraging other staff within and across regions, seeking and receiving technical assistance from Mathematica Policy Research, and developing creative approaches to outreach. Specifically, the PROMISE connectors stepped up to assist with recruitment, including to plan and staff geographically targeted community events.

MIS data can be useful for identifying unengaged youth and families and reintroducing the program to them. Midway through program operations, Arkansas PROMISE modified the services component of its MIS to support the identification of unengaged treatment group youth and track the completion by participants of program milestones, such as PROMISE plans and summer work experiences. These changes helped the program staff target their reengagement efforts and service provision.

Small incentives may be useful in encouraging participation. After Arkansas PROMISE had been operating for some time, it began providing small participation incentives (such as Bluetooth speakers and travel coffee mugs) via lotteries to youth and their parents for those who attended monthly trainings. Program staff reported that attendance increased for both youth and parents as a result; however, the MIS analysis did not show any substantive changes in participation rates for either group. The program subsequently expanded and enhanced the participation incentives (through its incentive system), but we were unable to assess the effects of those modifications because they occurred at the end of the observation period.

B. Lessons about delivering program services and facilitating partnerships to improve service coordination

Developing a new program can be challenging and time consuming, particularly with respect to educating community partners. As a new program, Arkansas PROMISE required significant up-front development, which may have delayed certain aspects of early service provision. The Arkansas PROMISE connectors and transition specialists, being new to their positions, had to learn about the transition service landscape. Program staff needed time to design and become comfortable with the services component of the MIS. The ADWS process for contracting with workforce investment boards was difficult for UA and ADWS to complete in a timely fashion for the first two years of summer work experiences. Because the program represented a new service for youth with disabilities, educating agency and school staff about it and building their trust took time and effort. School staff, in particular, had difficulty understanding how Arkansas PROMISE fit into the extant transition service environment, in part because it was an entirely new program not directly connected to existing agencies. These challenges and development activities were such that the program was probably more efficient and effective in delivering services later in its period of operation than earlier.

Utilizing services from different organizations may pose management challenges. Arkansas PROMISE leveraged staff and services from multiple organizations. Although the program directly employed its case management staff (the connectors), it relied on staff in other programs and organizations for recruitment, engagement, benefits counseling, and employment and education services. This approach posed three types of challenges. First, the program's service staff were in different organizational silos (UA, Partners, ARS, workforce investment boards, and Sources), which sometimes led to difficulties in building relationships, communicating, and understanding roles. Second, the program's regional managers had to manage the transition specialists even though those staff reported to an ARS manager, resulting in confusion as to whom the transition specialists answered. Third, managing several layers of contracts and subcontracts was complicated for the program's lead agency. It might have been simpler for UA to have delivered all program services directly; nevertheless, it overcame the management and coordination challenges through statewide trainings of all program staff, regional in-person management team meetings, and ad hoc joint meetings on specific program activities.

The geographic dispersion of program operations can have consequences for service delivery. The PROMISE connectors had county-based (or smaller) service delivery areas; however, the transition specialists and the PROMISE regional managers were responsible for larger geographic areas. Long distances made service provision and management challenging, primarily because of the substantial travel time involved. In addition, the demands on managers and frontline staff in the program's central region were accentuated by the higher number of PROMISE participants in that region and the urban-rural differences posed by Little Rock and its surrounding counties. The program responded to these challenges by splitting the central region into two regions (central and Pulaski) midway through the operational period.

Involving families requires clear expectations and sustained efforts. Arkansas PROMISE was successful at involving the families of participating youth because of the expectations it set for their engagement with the program and its many efforts directed toward

them. Parents and guardians were expected to develop their own PROMISE plans, attend monthly trainings to learn about services for their youth and how to address their needs, and engage in services related to their own goals. Through its MIS, the program also formally monitored the work of its staff members with families. In response to the program's expectations and efforts, many parents and guardians of participating youth worked with the connectors to make progress toward their own goals and resolve familial issues. Almost all of them developed PROMISE plans and some received referrals from the connectors for services. Many of them also attended the program's monthly trainings and received information on how to facilitate their youth's transition to adulthood.

Tracking processes and outcomes that better reflect the service model would facilitate a more comprehensive understanding of service delivery. Arkansas PROMISE developed its own MIS and collected a broad range of information on the services that its staff delivered. As noted throughout Chapter III, gaps in the MIS prevented complete analyses of a few key program features, such as in-person contacts by staff. The program updated its MIS periodically to enhance the data that staff collected; these updates allowed for some additional analyses, though only for data collected after the update was implemented. To facilitate a more comprehensive understanding of service delivery, it would behoove programs to identify the most important elements—those that reflect key features of the program and intended outcomes—and include measures of them in an MIS during program design and initial implementation. Program funders could play a more active role in this process by requiring programs to track certain service and outcome elements. Given the technical complications in designing data systems and using data for formative evaluation purposes, funders could also facilitate access to technical assistance resources that can help program staff with these activities, as needed. Although Mathematica provided some input to Arkansas PROMISE on its MIS, its role was limited to offering recommendations; it could not offer technical support on either MIS creation or reporting. Expert technical assistance could enhance programs' capacity to collect and report data that serves both their needs and those of evaluations.

C. Considerations for interpreting findings in the impact analysis

The key interventions that the impact analysis will assess are intensive case management and work-based experiences. Arkansas PROMISE provided services that were unique for that state. The existing service environment provided few opportunities for youth with disabilities to access services as comprehensive as those provided by Arkansas PROMISE, a point made by the staff of agencies not associated with the program. In particular, the program's case management support for participating youth and their families (including modest financial supports and referrals to existing services) and the provision of summer work experiences for youth represented an intensive, individualized, and employment-focused service model to which the control group youth had little access. Although various services and work opportunities were available in the existing environment for control group youth, their take-up rates for those services and opportunities were likely low given the absence of facilitation through intensive case management.

The delivery of benefits counseling primarily through group trainings represents an interesting test. Arkansas PROMISE delivered benefits counseling to participating youth primarily through the program's monthly group trainings. The program rarely delivered

individualized benefits counseling by CWICs. Also, few youth outside of Arkansas PROMISE accessed existing CWIC services; thus, the program's group training format for benefits counseling may have provided substantially more information to treatment group youth than was obtained by control group youth. It will be interesting to see from the pending impact analysis whether the program had any effect on youth's knowledge of their benefits, how employment affected their benefits, and where to turn for help when issues arose. Findings of positive impacts on these outcomes would support the efficacy of the group training approach to benefits counseling.

Arkansas PROMISE satisfied conditions that maximized the likelihood the evaluation could detect impacts. The sharp distinction between Arkansas PROMISE recruitment staff and service staff, along with the restriction of program services to treatment group youth only, meant there was little risk that control group youth received program services. Also, data from the Arkansas PROMISE MIS show that, as of August 2017, a large share (92 percent) of treatment group youth actually had participated in the program, and most of them had received or participated in key services, such as the development of PROMISE plans, summer work experiences, and monthly trainings. When considered along with evidence suggesting that control group youth had only limited access to alternative sources of intensive case management and employment services, these findings from the process analysis suggest a marked difference in the service experiences of treatment and control group youth. In addition to PROMISE, however, other initiatives also were occurring in Arkansas that could promote long-term systems-level changes that may benefit all youth with disabilities and their families, including those in the control group. These initiatives could have implications for the evaluation's five-year impact analysis.

Regional differences in counterfactual and program services could result in differential impacts of the program. Arkansas PROMISE provided services in four regions across the state (ultimately five regions, after the central region was split into two regions late in the operational period). The access of control group youth and other youth with disabilities to counterfactual (that is, existing) services varied across those regions; more counterfactual services were available in the central, northwest, and Pulaski regions. Likewise, treatment group youths' access to Arkansas PROMISE services varied across the regions; the program delivered fewer services to youth and their families in the central and Pulaski regions and more services in the northwest region. Thus, the service contrast was smallest in the central and Pulaski regions, where counterfactual services were relatively more available and program services were relatively less available. This comparison suggests that the pending impact analysis of Arkansas PROMISE may find that the program had smaller impacts in those two regions than in the other three.

Treatment group youth who ever participated in Arkansas PROMISE had high levels of engagement with the program, and their take-up rates for many of the program's services were high. Three years into program operations, almost two-thirds of participating youth were actively engaged with the program (having had at least some in-person contact with program staff, attended a monthly training, or begun a summer work experience within two months of the August 2017 extraction of service data from the program's MIS). Most had attended at least one monthly training and most had received case management funds subsequent to their enrollment in the evaluation and random assignment to the treatment group. Almost all had Arkansas PROMISE plans, two-thirds had started summer work experiences, and between

42 and 46 percent of those who started summer work experiences each year achieved the program's target of working 200 hours. Almost 30 percent of participating youth had attended the program's summer camp, and more than half had been referred for services to ARS and other providers. With a year of its operational period remaining, Arkansas PROMISE was continuing to work toward its ultimate service goals of all youth having two summer work experiences, attending its summer camp, attending monthly trainings, and connecting with community services.

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APPENDIX A

SUPPLEMENTARY ANALYSES OF PROGRAM SERVICE DATA

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Table A.1. Case management services delivered to Arkansas PROMISE participants as of August 2017, by region (percentages unless otherwise indicated)

Service	Program as implemented, by region				
	Central	Eastern	Northwest	Pulaski	Southern
Program engagement					
Number of days from program enrollment to first contact attempt					
Average per youth	11.1	15.1	6.3	11.1	7.9
Median per youth	4.0	7.0	4.0	5.0	3.0
In-person staff meetings with youth and families (October 2015 through August 2017) ^a					
Average number of meetings	18.5	18.8	23.7	9.9	16.2
Median number of meetings	18.0	17.0	24.0	9.0	18.0
Staff contacts with youth and families other than in-person staff meetings ^a					
Average number of contacts	16.3	25.7	34.7	19.1	15.9
Median number of contacts	14.0	13.0	29.5	13.5	14.0
Staff contacts with or on behalf of youth and families other than in-person staff meetings ^a					
Average number of contacts	26.1	44.6	45.5	32.0	28.3
Median number of contacts	22.5	26.0	42.5	28.0	27.0
Percentage of youth by the most recent engagement rating assessment (as of August 2017) ^b					
Engaged	23.4	22.0	35.4	30.0	27.4
Partially engaged	31.9	44.5	38.6	31.8	41.9
Not engaged	44.7	33.5	25.9	38.2	30.7
Assessment					
PROMISE plans ^c	94.7	79.6	95.6	95.9	86.0
Monthly trainings					
Attendance at monthly trainings ^d	21.1	24.0	27.9	14.9	23.8
Average number of monthly trainings attended by participants	4.6	5.2	6.3	3.2	5.3
Resource development					
Receipt of any case management funds (through August 31, 2017)					
Percentage	71.8	55.9	77.8	51.2	40.8
Average total amount received (of those who received case management funds)	\$650.00	\$483.70	\$639.60	\$471.00	\$398.40
Percentage of participants referred to:					
Arkansas Rehabilitation Services	33.5	62.4	70.9	55.9	61.5
Arkansas Department of Health	1.6	7.8	1.9	7.1	6.1
Arkansas Department of Human Services	4.3	13.1	5.7	31.8	4.5
Higher education	8.0	23.3	15.8	30.0	2.8
Job services (such as Workforce Investment Act and Job Corps)	8.0	17.6	29.7	32.4	10.6
Other referral sources	81.9	66.1	61.4	77.1	35.8
Number of participating youth	188	245	158	170	179

Source: The Arkansas PROMISE MIS.

^a Analysis was based on contact attempts from October 2015 through August 2017 to or on behalf of the 940 participating youth (see Table III.4). Arkansas PROMISE intended connectors to make weekly contact with youth and families and conduct at least one in-person meeting monthly.

Table A.1 (continued)

^b Engaged youth and families were those who, in the last 60 days, had one in-person staff meeting AND either participated in at least one monthly training or started a work experience. Partially engaged youth and families were those who, in the last 60 days, had one in-person staff meeting OR either participated in at least one monthly training OR started a work experience. Non-engaged youth were those not assessed as either engaged or partially engaged (that is, had not had an in-person meeting, participated in a monthly training, or started a work experience). Engagement rating was assessed as of August 2017.

^c Arkansas PROMISE intended that 100 percent of youth would develop a PROMISE plan.

^d Arkansas PROMISE intended that youth would attend 75 percent of monthly training sessions.

Table A.2. Non-case management services delivered to Arkansas PROMISE participants as of August 2017, by region (percentages unless otherwise indicated)

Service	Program as implemented, by region				
	Central	Eastern	Northwest	Pulaski	Southern
Benefits counseling and financial education					
Percentage of participants who attended benefits counseling monthly training	54.3	56.3	66.5	37.6	60.3
Percentage of participants who attended financial planning monthly training	48.9	49.8	44.9	41.2	43.6
Career exploration and work-based learning experiences					
Percentage of participants who participated in any summer work experience	72.9	60.8	77.8	64.7	69.8
Percentage of participants who participated in two or more summer work experiences	25.5	21.2	29.1	20.6	26.3
Percentage of participants who participated in the summer work experiences					
2015	29.8	24.1	48.1	21.8	35.2
2016	46.3	32.2	25.3	27.1	35.8
2017	23.9	26.1	33.5	36.5	25.7
Parent training and information					
Percentage of parents or guardians with developed PROMISE plan ^b	91.5	76.3	93.7	95.9	83.8
Percentage of parents and guardians connected to education or employment service ^c	9.0	33.5	3.2	14.7	6.7
Parent or guardian attendance rate at monthly training sessions ^d	18.6	20.1	27.5	12.9	18.2
Number of participating youth	188	245	158	170	179

Source: The Arkansas PROMISE MIS.

^a Arkansas PROMISE intended that 100 percent of youth would have two summer work experiences by the end of program operations.

^b Arkansas PROMISE intended that 100 percent of parents or guardians would develop a PROMISE plan.

^c Arkansas PROMISE intended that 35 percent of parents or guardians would be connected to an education or training program.

^d Arkansas PROMISE intended that parents or guardians would attend 75 percent of monthly training sessions.

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