

Center for Studying Disability Research Issue Brief

Ankita Patnaik, Jeffrey Hemmeter, and Arif Mamun

Initial Experiences of Youth With Autism Spectrum Disorder Participating in the PROMISE Initiative

The federal government created the Promoting Readiness of Minors in Supplemental Security Income (PROMISE) initiative to fund projects that help a healthy transition to adulthood for youth with disabilities and their families. Six projects implemented model demonstration projects for youth receiving Supplemental Security Income ages 14 to 16. They were required to include formal partnerships between state agencies, case management, benefits counseling, financial education for youth and their families, career and work-based learning experiences for youth, and parent training and information. PROMISE was unique in its focus on cross-agency collaboration, comprehensive case management, focus on younger people, and services to family members. This study explored the initial experiences and outcomes of youth with Autism Spectrum Disorder (ASD) in PROMISE.

Key findings at 18 months

- In the absence of PROMISE, most youth with ASD received at least some transition services. However, we found room for improvement in their families' receipt of support services as well as in youth's receipt of key types of services that were targeted by PROMISE.
- PROMISE succeeded in providing youth with ASD with case management, career services and work-based learning, benefits counseling, financial education, and connections to Vocational Rehabilitation (VR) services. PROMISE also increased their families' receipt of support services.
- PROMISE had substantial positive impacts on job-related training, paid employment, and earnings for youth with ASD.
- PROMISE had no impact on the education or total income of youth with ASD.
- The impacts of PROMISE on the outcomes of youth with ASD were similar to those for youth with non-ASD impairments, except that youth with ASD experienced a smaller relative increase in their receipt of transition services because of PROMISE.

Youth with autism spectrum disorder (ASD) face barriers at the individual, family, and systemic level that can make transitioning to adulthood particularly challenging. After leaving high school, youth with ASD tend to experience decreasing behavioral improvement, increasing social isolation, and difficulties obtaining and maintaining postsecondary work and education. For youth with ASD from low-income households, such as those receiving Supplemental Security Income (SSI), poverty can compound these challenges. Although targeted and effective services can help youth with ASD transition to adulthood and long-term success, many do not receive such services. As the number of children diagnosed with ASD increases, so does the need to develop effective, scalable transition services for youth with ASD and connect more youth to them.



The PROMISE demonstration

Promoting Readiness of Minors in SSI (PROMISE) was an initiative to support youth with disabilities in their transition to adulthood. This initiative by the U.S. Department of Education, the Social Security Administration (SSA), the U.S. Department of Health and Human Services, and the U.S. Department of Labor, targeted youth ages 14 to 16 receiving SSI and their families. It emphasized strong partnerships among agencies providing services to SSI youth and their families as well as an individual- and family-centered approach to case management and service delivery. The U.S. Department of Education awarded \$230 million over six years to five states and a consortium of six states to establish and operate model demonstration projects.PROMISE projects had to include the following:

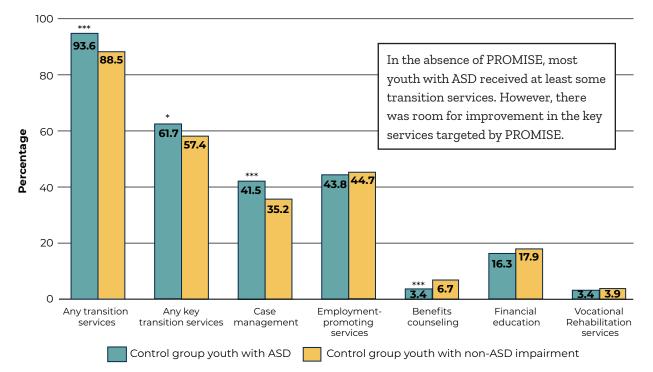
- / Formal partnerships between state agencies
- / Case management
- / Benefits counseling and financial education
- / Career and work-based learning experiences in integrated settings
- / Parent training and information

Key Services

PROMISE projects were required to provide a set of key transition services to youth and key support services to family members. These included: case management, employment-promoting services, benefits counseling, and financial literacy for youth and family members.

Under contract with SSA, Mathematica is evaluating PROMISE using a random assignment design. We randomly assigned youth in the evaluation to either a treatment group, who were eligible to receive PROMISE services, or to a control group, who were not eligible for PROMISE services. From April 2014 to April 2016, six projects enrolled 12,584 youth in the evaluation, of which 1,588 had ASD. Autism Speaks sponsored this study to focus on the experiences and outcomes of youth with ASD who participated in the PROMISE evaluation during the 18 months following random assignment. Our report on the study (Patnaik et al. 2021) presents comprehensive findings from those analyses, which we summarize here.

Figure 1. Share of control group youth who received transition services



Note: */**/*** The difference is significantly different from zero at the .10/.05/.01 level using a two-tailed t-test.

Service receipt under the status quo

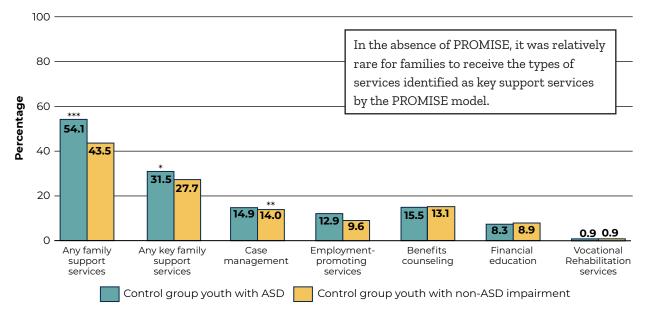
To understand the context in which youth with ASD experienced PROMISE, we examined the service use patterns of control group youth and their families because they had access to the usual services available in the community, that is, the status quo (Figures 1 and 2). Nearly all control group youth with ASD received some transition services in the 18 months after random assignment (94 percent), and this share was larger for youth with ASD than for youth with non-ASD impairments. Most control group youth with ASD received at least some of the services identified as key transition services by the PROMISE model, and the share was larger among youth with ASD compared with youth with non-ASD impairments.

More than half the families of control group youth with ASD reported receiving some support services in the 18 months since random assignment (Figure 2), a larger share than that of control group youth with non-ASD impairments (54 versus 44 percent). About 32 percent of parents of control group youth with ASD reported that their family members received at least some key support services that were required as part of the PROMISE grants, compared with about 28 percent among control group youth with non-ASD impairments.

PROMISE increased receipt of transition services for youth with ASD

Although the share of youth with ASD receiving transition services was high in the control group, PROMISE increased it by about 3 percentage points (Figure 3). Among youth with ASD, about 6 in 10 in the control group received at least some key transition services in the 18 months after random assignment; PROMISE increased this share by 19 percentage points. In addition, PROMISE increased the share of youth with ASD receiving each type of key transition services and vocational rehabilitation services.

Figure 2. Share of control group families that received support services



Note: */**/*** The difference is significantly different from zero at the .10/.05/.01 level using a two-tailed t-test.

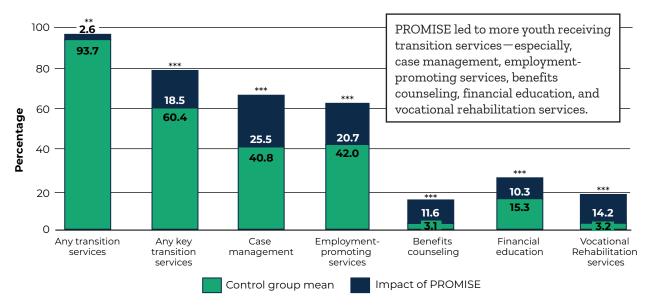


Figure 3. Impacts of PROMISE on receipt of transition services among youth with ASD

Note: */**/*** The impact is significantly different from zero at the .10/.05/.01 level using a two-tailed t-test.

PROMISE increased receipt of support services for families of youth with ASD

PROMISE increased the use of support services among family members of youth with ASD (Figure 4). In the control group, more than half the families received at least some support services; PROMISE increased this share by 12 percentage points. It also increased the share of families who received an array of services, with particularly large positive impacts on the receipt of case management, benefits counseling, and financial education—all key services for families designated by the PROMISE logic model.

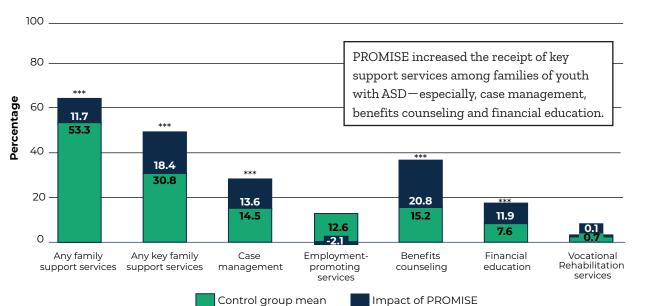


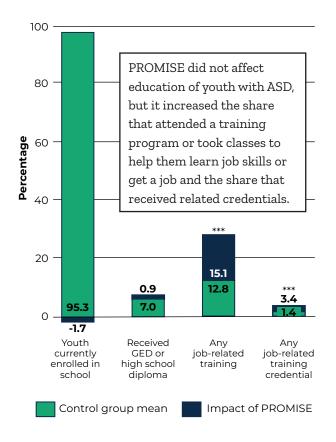
Figure 4. Impacts of PROMISE on receipt of support services among families of youth with ASD

Note: */**/*** The impact is significantly different from zero at the .10/.05/.01 level using a two-tailed t-test.

PROMISE did not affect the education of youth with ASD, but it did increase their receipt of job-related training and training credentials

PROMISE had no impact on youths' education (Figure 5)—likely because of the high school enrollment rates among control group youth, the ages of the youth, and the lack of project services directly addressing these outcomes. In the control group, about 13 percent of youth with ASD attended a training program or took classes outside school to help them learn job skills or get a job; PROMISE more than doubled this share. It also impacted job-related training credentials; about 1 percent of control group youth with ASD received them, and PROMISE increased this share by 3 percentage points.

Figure 5. Impacts of PROMISE on the education and training of youth with ASD



Note: */**/*** The impact is significantly different from zero at the .10/.05/.01 level using a two-tailed t-test.

PROMISE increased employment rates and earnings among youth with ASD

In the control group, about 14 percent of youth with ASD reported they had been employed for pay at some point since random assignment; PROMISE doubled this rate among treatment group youth. (Figure 6) PROMISE more than doubled the employment rate and increased the earnings of youth with ASD during the year before the survey. Control group youth with ASD earned an average of \$447 in the past year, and PROMISE increased this by \$291. These impacts reflect PROMISE's focus on career and work-based learning experiences. We found no evidence that PROMISE improved the total income (from earnings and SSA benefits) of youth with ASD in the 18 months after random assignment. Control group youth with ASD reported about \$7,300 in income in the year before the survey, and PROMISE did not have a significant impact on this amount.

The impacts of PROMISE for youth with ASD were similar to those for youth with non-ASD impairments

We compared the impacts of PROMISE on service use and outcomes among youth who have ASD with those of youth who have non-ASD impairments. We found only one statistically significant difference in the impacts between the two groups: the impact of PROMISE on youth's receipt of transition services was larger for youth with non-ASD impairments than for youth with ASD. Among youth with ASD, PROMISE increased the share of youth receiving transition services by about 3 percentage points, and, among youth with non-ASD impairments, PROMISE increased this share by 7 percentage points. This difference in subgroup impacts could be partially explained by control group youth with ASD being more likely to receive services than control group youth with non-ASD impairments. Thus, PROMISE essentially closed the service use gap between youth with ASD and non-ASD impairments; about 96 percent of youth in both groups received transition services if they were eligible for PROMISE services.

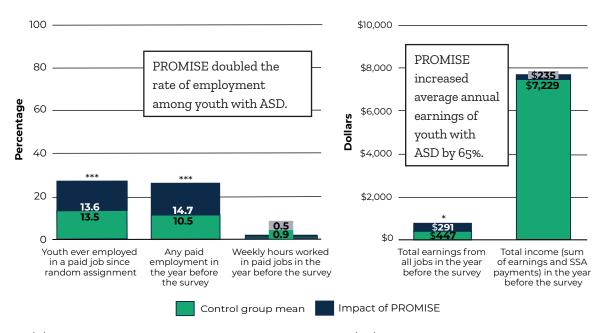


Figure 6. Impacts of PROMISE on the employment, earnings and income of youth with ASD

Note: */**/*** The impact is significantly different from zero at the .10/.05/.01 level using a two-tailed t-test. Statistics are calculated as an average across all youth, and may include zeros for non-employed youth.

Study design

This study draws on the experimental design of Mathematica's national evaluation of PROMISE. For each PROMISE project, Mathematica randomly assigned eligible youth to either a treatment group or control group. We used data from the PROMISE random assignment system, surveys of parents and youth conducted 18 months after random assignment, SSA program records, and state vocational rehabilitation agencies. To estimate the average impacts of PROMISE on youth with ASD, we pooled data for the six projects. We used a regression framework to estimate the impacts of PROMISE, adjusting our estimates to account for youth's race and ethnicity, sex, duration of SSI payments, and other baseline characteristics. We also adjusted for survey sampling and nonresponse when applicable.

Long-term impacts of PROMISE are not yet known

Because this study is based on 18-month follow-up data, the findings reflect the initial outcomes of youth and their families. As part of the national evaluation, Mathematica is collecting data on youth and their families five years after their enrollment in PROMISE. Future research can use the five-year follow-up data to explore the extent to which PROMISE resulted in meaningful improvements in the longer-term well-being and self-sufficiency of youth with ASD and their families.

The contents of this brief do not necessarily represent the policies of the Social Security Administration or any other federal agency. The authors are solely responsible for all views expressed.

For more information: Patnaik, A., J. Hemmeter, and A. Mamun <u>"Promoting Readiness of Minors with Autism</u> Spectrum Disorder: Evidence from a Randomized Controlled Trial." Washington, DC: Mathematica, 2021.