nTIDE Deeper Dive - 9-22-2023

**Recorded Intro:** Start up. Welcome everybody to the National Trends in Disability Employment, or nTide, Lunch and Learn series. Just a few housekeeping items before we begin. This webinar is being recorded. We will post an archive of each webinar each month on our website at www.researchondisability.org/nTIDE. This site will also provide copies of the presentations, the speaker's bios, full transcripts, and other valuable resources.

As an attendee of this webinar, you are a viewer. To ask questions of the speakers, click on the Q&A Box on your webinar screen and type your questions into the box. Speakers will review these questions and provide answers. During the last section of the webinar, some questions may be answered directly in the Q&A box. If you have any questions following this recording, please contact us at disability.statistics@unh.edu or toll free at 866-538-9521 for more information. Thanks for joining us and enjoy today's webinar.

**Andrew Houtenville:** Hi everybody. This Andrew Houtenville from the University of New Hampshire. A few notes before we start for ASL and interpreters and closed captioning. The interpreters- to see the interpreters and the gallery of speakers at the same time -if I could read it - we recommend using a computer or a laptop rather than a phone or a tablet. For closed captioning, you can click on the closed caption button and select Show Subtitles, or view the full transcript or running transcript on the side.

About nTIDE, so this deeper dive we started to develop during COVID because the data that we provide, the statistics we provide in the first Friday nTIDE, the traditional nTide that we've been doing for over ten years now, doesn't give us the ability to break things down very far. But around mid-month they release the public use microdata. And we can download that and break the statistics down a little bit finer with subgroups of interest. So looking at employment trends for, say today, we're going to look at employment trends by age and focus on youth and young adults and employment. And there are some interesting findings you'll have to bear with me today. There's a lot of lines on these charts and I'll try to go through them systematically. And then we have Andy Karhan from San Diego to talk about his program, Cape Youth, which is a US. Department of Labor funded program around youth transition. I look forward to hearing that.

So nTIDE is a joint effort with the University of New Hampshire, Kessler Foundation, and the Association at University Centers on Disability. Each month, we take a deeper dive in specific subpopulations and bring in a speaker. Today's agenda is this welcome, then I'll review the nTIDE first Friday statistics, then I'll do the statistics broken down by age group, and then I'll turn it over to Andy, then we'll have a Q&A section. So first the nTIDE first Friday, if you weren't here - I know you all come all the time - but just in case you missed the employment population ratio numbers or this may be your first time to nTIDE which I'm surprised, but I'd be happy to have new people come. We track the employment to population ratio, so that's the percentage employed, and it goes back to when the data was first implemented, back in 2008, just in the midst of the Great Recession.

 The Great Recession really hit very, very hard. Employment lags economic growth, so we can go into recession and still have very good employment. In fact, there are times when we're in recession, but we're still in full employment, which is unemployment numbers below, like four and a half or four. And because employment, it takes a while for employers to start terminating people and shutting down production. The hope is always that it's a very quick rebound. What we have here is the decline during The Great Recession. For people with and without disabilities or people with disabilities precipitously continued decline up until 2014, and then didn't really start to rise until 2016, 17, 18 and into 18. Then once 18 came around, it was relatively flat until we hit the pandemic.

For people without disabilities, there was a slow upward march, you may remember there were criticisms of the Obama administration for slow growth, steady but slow, not recovering to previous highs. In fact, people without disabilities haven't reached their previous high until almost recently. For the pandemic, we saw a very large decrease for both people with and without disabilities. It's hard to tell because of the gap in the y axis, but percentage point wise, people without disabilities dropped more during the pandemic. However, as a percentage of previous employment, people with disabilities had a slightly bigger decline as a percentage of employment. Not percentage point, but percentage change.

Okay. Both people with and without disabilities had some pretty fast recovery from the pandemic, particularly people without disabilities. But it was people with disabilities that actually passed their pre pandemic level back in mid 2001. So, trying to remember what it was mid 2001 was when the vaccines were almost fully rolled out, right, so that fourth of July everybody was really happy, there was a good saturation of the vaccine. So that's around the time when people with disabilities are passing their pre pandemic level. And then shortly after that, past the historic high and continue to really rally for quite a while.

We saw some leveling out recently in 2003, but let's see, this is July, I'll snap in August. In August, we actually saw a rise again. Three months of increase is really a good sign, because month to month variation could be seasonal effects, could be sample size. This is an estimate, this is not the whole population providing survey answers, but a sample, and so we'll have variation. But when you see one to three months of increase, that's typically a good sign. Some of this is seasonal, like you can see the saw-toothy nature of it. So, there's some seasonality in these numbers.

The Bureau of Labor Statistics has yet to do the seasonal adjustment for people with disabilities. If anybody has a student that needs to do an advocacy project down in DC, they have enough data. They were always saying, "well, we need about ten years of data". Well, we have about 13 years of data now, or more, almost up to 15 years of data. We've done it in the past and it'll smooth out these charts, but you really do need a fair chunk of time. They may say, "well, we have to adjust for COVID". Well, okay, fine, but you should be doing that anyway. So, a nice little advocacy project for some student.

It could be to push the Bureau of Labor Statistics to adjust. We almost had the head of the BLS, be a disability researcher during the Trump administration, but Congress was playing around with its authorizations. Considering young adults, what I'm going to do- because of the sample size issues, we pull together an average 12 months estimates. This is an approach BLS does, they always give annual estimates for a calendar year. So, they average the 12 statistics for that year and provide them.

What I've done is,, because of the pandemic, I'm using April, which is the start of the lockdown, to the next March. This gives us a good window, because if I pick the calendar year or some other time that straddles the lockdown, it would dampen the lockdown. You'd see a small decline, but it would really dampen it and wash it out. So, I've chose to do 12-month averages of the employment to population ratio, and starting from April to March.

I still can't get my head around April to March because you always want to do- it's weird to have April in front of March. All right, here's 16 to 64. So, these are the standard ranges that BLS reports, not for disability, but for the overall population. This is people with disabilities, the black line and the line that I initially showed, that's analog to what I showed before in the monthly data, just the total population with disabilities, 16 to 64 years old. And then we can break it down into these roughly ten year spans, except for two extra years for the first time...for the first span.

So, youth and young adults in the workforce, 35% were employed. So roughly similar to the overall population. Keep in mind, the overall population is decidedly older, because disability increases with age. One thing to note from this trend line is the Great Recession time really hit hard youth, and that's a tradition for all youth, with and without disabilities. I'll show the youth and young adults without disabilities in a minute.

But during recessions, it's usually seniority that protects people from being terminated. Young people who are entering the labor market, either out of high school, or out of college, or during college, or during high school, they're entering, and entry level jobs dry up during recessions. Right. Because firms aren't necessarily seeking to expand until they know the demand for their products will increase again. Okay.

Also, you can see there's a bit more of a hit to youth and young adults during the pandemic and the lockdown. And that's consistent again with that story of entry level jobs drying up. No new positions being opened when you're locking down and you're scrambling with supplies, and you're scrambling to get social distancing policies, Plexiglass, masks, signs. It was quite a crazy time we all went through. Now I'm going to add in the 25- to 34-year-old. So, the next span, So this is basically post the education transition into to 34 years old. It gets as high as almost 50% ,49% in the most recent period. They took a big hit during the recession, during the COVID pandemic lockdown time. So, this is the first year that drop is measured, the employment population ratio for that first full year from the lockdown to the next March.

What this is showing, again Elaine and John and I were talking, and others at Kessler were talking this morning, and the thoughts are that when you're in the early part of your career, you may be one of the first laid off. This includes layoffs, so that decline is the layoff part of it too. So, when you're early in your career, hopefully by 25 - knock on wood for my children - by the time you hit 25, you're starting your career jobs. Those jobs may have more entry level jobs could be hit during the recession. Notably, they didn't really take a big dive during the Great Recession period, like the youth and young adults, 16 to 24 years old. Let's snap in. What's it, I just do, okay.

35- to 44-year-olds, they're at a peak of 43.1%. A very similar story, not quite as deep with the pandemic. Then let's slap in the last two. Ages 45- so, the older ones are the green and dark green. I tried to make gradients of color. 45- to 54-year-olds very much mirror the overall population with disabilities. 55- to 64-year-olds. Notably, their employment is much lower than all other groups, at 27.5%, in the last period that we're looking at. But not necessarily hit as bad by the pandemic. Interestingly enough, and so that may be the more senior jobs that they're held on longer perhaps. If we take a look overall, and we think about the youth and young adults, and we think about the story that nTIDE has been telling- and has been telling- and also the Kessler surveys have been telling, every group but 35- to 44-year-olds had rebounded, their employment had rebounded by the next full period. Every group has gone above their pre pandemic level, and above their historic level. And so, this story that nTIDE has been kind of slowly peeling the onion away is that all groups have participated in this big jump if we look at it by age. I think we've found the same thing by disability type, and we found the same thing by race and ethnicity. We're going to be doing gender I think next month. Male, female, they still don't, for the CPS, have anything with regard to non-binary. So, every group participated.

Now, one thing that we have been talking about that could drive the instant thing that you want to say is these are cross section slices of the population month and year. And there could be an underlying compositional change. Suppose there was an increase in severity, we might see a decline in the employment population ratio. Not because of employment driven things like employer behavior or worker behavior, but just simply by the changing composition of the population with disabilities. And as I've talked about earlier in previous webcasts, mid months, cognitive difficulty was the one that increased the most. Right? And in fact, it's a kind of a switching of cognitive difficulty and ambulatory difficulty.

And the reason it doesn't really impact employment to population ratio that much is that ambulatory difficulty and cognitive difficulty have similar employment rates. So, just because we have more of one and less of another, they have pretty close employment to population ratio, so it's not going to, you know, depress the number with that change. I want to talk a little bit about prevalence, and I'll just snap this in fully. We talked about the cognitive difficulty certainly during covid, and there's a lot of things going around. Long COVID, and long COVID - somebody will have to set me straight in the comments or one of our speakers - long Covid is typically viewed, at least early on I always thought it was, “well, this is viral load. That the viral load of COVID stays around for a long time and really affects somebody's symptomology.”

However, there's also long-term impact of covid, such as cognitive fog or fragility, or- what's another one? Not fragility, but being sore, achy joints. So, if we look at prevalence, if we look at our youth and young adults that we've been following, there's a steady increase in prevalence rate for that group. Maybe a little faster during the Covid period but stabilizing in the last period. The big one is, and it's kind of strange, it goes down for people 55. I'm 56. This is my group. My folks have been going steady, starts to decline in the mid 2016s, and declines, but then starts picking back up. That's an interesting idea now. It's not necessarily, it could drive some of our results, but not, we saw every age group increase during the pandemic. It's not going to change the nTIDE story.

What should I do? I have this chart I have for every disability type. I have six more of these charts with, each with five lines in them. So, 30 more lines. I'm not going to go through those. Maybe if somebody has a question, I can tell you. Man, I'm going to stop sharing and I'm going to share a different screen. That's it. Here's that same -can you see the Excel spreadsheet? Someone say yes or no.

**Offscreen:** Yes

**Andrew Houtenville:** Anyway. Why can't I get this to go up? Anyway, my mouse doesn't seem to like this. But here's the graph with cognitive difficulty by age. The blue line is the one that- all of them are going up post pandemic, particularly the 55-56. It really mimics the pattern that we saw for overall disability. But we really see a rise in this cognitive difficulty, although it was flat in the last period, among youth and young adults. If we do ambulatory, which is the next one, I have the ambulatory age 55, it's upwards of 10% 55- to 64-year-olds report difficulty walking or climbing stairs. I know it's harder for me, but not quite to the point of limitation. Ambulatory is really coming in, but it's a different group.

In any event, this cognitive difficulty question, it draws a lot of ire from the field because people want to know because of a mental, physical, or emotional condition. Do you have difficulty learning, remember, and concentrating? I've looked at cross section data where I've asked, okay, well what is that? About 60% are - and I haven't had a chance to publish this because some of the stuff I've done is in stuff that I don't own - about 60% are learning disability, about 39% are mental illness, and about 1% is intellectual and developmental disabilities.

This is really learning disability that's driving a lot of this, and in the college environment. I don't know if it's true for high schools, but it's the college environment, anxiety disorders are on a big rise. That could be increased awareness and increased self-advocacy. That increase - and certainly there are stories of Covid - but this rise predates Covid and may have picked up in the Covid years. But this rise, I'm going to go back to the slides. Stop sharing. Sorry everybody. I wanted to put those, but I couldn't put 60 more lines in, I mean, we have... sorry to restart my... I'm going pretty long, Andy. I hope you're okay with a half.

**Offscreen:** Yes.

**Andrew Houtenville:** This one graph.... share, share, share. Share screen? Come on. I'll share screen, and there. All right. So, this is the last slide I'll show. I need to move on. Okay. Last slide I'll show is this is the relative to people with and without disabilities. And it shows that youth with disabilities really took a big hit during the Great Recession. Relative to their peers, they've been rising. So, there's a relatively good story since focusing on the youth and young adults. That's an interesting story. I will move on. One note, for accessibility purposes, we've been trying to upgrade our accessibility purposes and our screen reader friendliness. We provide the tables for every one of the charts in the PowerPoints. It might be at the bottom, but just so you know, they're going to be there. Take it away, Elaine.

**Elaine Katz:** Thank you, Andrew. It's my pleasure today to introduce Andrew Karhan, who serves as the project director.

**Andrew Houtenville:** You're on mute Elaine, if you're trying to talk

**Elaine Katz:** It says it's not mute, [inaudible]

 ... as a director at San Diego State Universities research in, and he has nearly 25 years of experience in the field of vocational rehabilitation, employment services, mental health, developmental disabilities, and transition. He firmly believes in the power of employment in the lives of all people and has spent his career finding ways to bridge the gap in various systems. Andrew, Andy, welcome. And we hopefully will have some time for questions at the end of your presentation. Take it away.

**Andrew Karhan:** Yeah. Thank you. Next slide. Yeah. I'm here on behalf of the Center for Advancing Policy on Employment for Youth, Cape Youth. It is an initiative that is funded through the Office of Disability Employment Policy. The center focuses on specifically thinking about improving employment outcomes for youth and young adults with disabilities by helping states build their capacity, specifically in their youth service delivery systems. Focusing on workforce systems and other partner agencies that provide those supports.

Next slide, we do this in a few different ways. One is conducting research on new and existing innovative policies and practices, and then sharing those out to partners across the states. We develop strategic partnerships. We've spent a lot of time, particularly over the last four years, in building out a national working group which involves stakeholders and policymakers across various states where we can engage in sharing of these best practices with those stakeholders and getting ideas from them about what their needs are. And truly creating a continuous quality improvement mindset between us and those stakeholders thinking around, okay, these are the issues that they are faced with. What do we see in other states? And continually feeding them with best practices so that innovation can occur at the state and local levels.

Next slide. Next slide, yeah. Cape Youth is a collaboration between the US Department of Labor Office Disability Employment Policy, the council of state governments who is the lead prime entity of the initiative, the ILR Yang Tan Institute, Unemployment and Disability at Cornell University and San Diego State University Interwork Institute. We were just actually re-awarded, and we've brought in a fourth partner, which-

**Andrew Houtenville:** Congratulations!

**Andrew Karhan:** Yes. Thank you. Which is the National Association of Workforce Development Professionals. The 4 of us are now going to be forging ahead in the next five years to carry forward this work. We're very excited about it.

**Andrew Houtenville:** Andy, did you want me to go back to the previous slide?

**Andrew Karhan:** No, I will cover that. I just skipped over that one. Yeah. Okay. Next slide and you can go on to the next. We wanted to spend a little bit time talking about some of the things that we've been sharing with states to help in foreign policy. In fact, yesterday I just did about an hour and a half webinar on this particular brief that was released related to unlocking the potential in WIOA Title One programs, which are situated within the workforce system. We know that this system, while they serve youth and young adults with disabilities, is only part of their mission. And yet they can still be a vital part of the full equation of supporting youth and young adults with disabilities and achieving better employment and economic outcomes.

Some of the recommendations that we made in this particular brief was to leverage other federal initiatives across state workforce agencies to initiate innovation at the local level. One of those opportunities right now is out for funding consideration by states. It is called the Equitable Transition Model Demonstration. It will be a five-year award to four different states who are tasked with thinking about how to create more equitable access to transition and employment services for youth and young adults with disabilities and bringing partners together at the state and local level to accomplish that work. If you represent a state and you're thinking about how to better support youth and young adults with disabilities and move those statistics up in your state that Andrew was just sharing even farther than they've been climbing, that is a potential opportunity for your state to explore new and innovative practices.

We also recommended that states look at how to enhance those collaborations among those partners, which is again, a key part of what those equitable transition model demonstrations will call for. We also know that there's Disability Innovation Fund projects that were funded through the Rehabilitation Services Administration that also speak to this space and have provided opportunities for states to move in this area. There's opportunities for all of you to learn more about those Disability Innovation Fund projects that span across career pathways. They span across sub minimum wage reduction within states. Really, initiatives that have called for different state partners across vocational rehabilitation, developmental disability, mental health, workforce systems, all coming together to strategize how best to move their systems forward in serving youth and young adults.

We also recommended blended service approaches. There are some great examples within the brief that is now published on our website. And our website link will be at the end where you can get more information on this. Really looking at support inclusive approaches to programs like Job Corps and Youth Build. Job Corps actually has a very robust disability specific resource page. They pour a lot of resources into their particular programs to support youth and young adults in those programs. Youth Build has now been developing in this space, and there are some really great programs.

One I'm very proud of is actually right down the road from here in Schenectady, New York, where they've done a significant amount of work, particularly in the mental health space that you were referencing earlier, Andrew. They've recognized that they need to put a significant amount of mental health support just to keep youth and young adults engaged in the program and also provide that support to the family members if they have a really good model. That's also highlighted in this brief, the next slide. Another initiative that we took on was expanding and looking at how states can engage employers through policy. This was through the guideposts for success model. It was built upon the broad framework of guideposts for success. In that brief, we looked at how states could take on this task.

One was educating employers about the advantages and supporting them and engaging using young adults with disabilities in their work preparation programs. We know that there are a lot of work based learning - A lot of those programs that I referenced under the title one are part of this matrix - but we also know that businesses often don't know about them and are not fully accessing the talent pool that they could be accessing even through simple things like internships and building relationships with programs that have internships and work-based learning experiences. There's an opportunity there.

There is also additional work here around assembling the tools help guide those partnerships. We know that national centers like the Earn Center that's also funded through ODEP, provide resources. Again, sometimes employers simply don't know about those. We think there's a particular opportunity there within the small business community to gain access and understanding and thinking about how to best support and even recruit an individual with a disability and a youth young adult with a disability into their workforce.

We also think that, again, enhancing those existing state workforce systems to foster equitable access. We know that access to our American job centers, while it may appear equitable when you look at statistically how they are serving the populations that they're intended to serve, we know that people without disabilities far outpace those with disabilities in accessing those sites and figuring out ways to make those centers equitable and inclusive and attractive to a youth and young adult with a disability. And coming into it, we know that a lot of those centers, some of the work that drives people to those is related to work skills and simply sometimes just gaining a GED and trying to gain access to those educational supports they end up at the job center. We've encouraged states to look in that space.

Next slide, we are also about ready to post a brief related to financial literacy. We recognize again the conversation around benefits and entitlements, whether it's supplemental security income with younger youth or older youth who may have worked some and are now eligible for Social Security disability insurance. We know that this conversation around benefits is one that is significant for youth and young adults. We also know that with Supplemental Security Income, roughly just over 50% of youth at the age of 18 redetermination lose access to that benefit. Understanding that they've had this benefit and entitlement up to the age of 18. There's a redetermination process after the age of 18. And we know that 50%, greater than 50% lose that benefit. Youth need to be prepared for that, and so this toolkit and this guide for states is to really help them focus in on what's the infrastructure that you need to put in place.

Building upon existing models, there's a lot of financial literacy tools and models that have been out there on the market. Some of them have not been fully accessible to youth and young adults with disabilities. And we've suggested that states use the resources that they have available to make those accessible, utilizing partnerships with the education system. The education system has focused on this, but again, sometimes it isn't expanding to those out of school youth in particular, who may need this resource more than youth who are still in school because the school status, if you're staying in school to age 21, for example, the protections that you received to maintain your SSI through the school experience allows to take some of the pressure off of that experience for you.

We've also recommended that states look at leveraging the Community Reinvestment Act, where banks are required to be reinvesting into their communities. We know that there's been some really interesting partnerships where banks have been able to come alongside different partners. We're now seeing this both within VR systems and other workforce systems, where state agencies are partnering with banks in this capacity specifically to address the financial literacy and financial empowerment of youth and young adults with disabilities. There's some interesting stuff there, and we put some examples in this brief that should be published within the next month to specifically highlight that for states as they're thinking about how do we address this issue of financial literacy for our young people.

Next slide, this is a little bit more dated, so I won't spend a lot of time, and Andrew went into to the implications of it pretty significantly. We did do a comparison when we posted this particular brief around what happened in the Great Recession to then what was happening within Covid. We also have strongly recommended that states continue to not forfeit federal funds by removing state funding. We know that VR, IDEA, Education, and Medicaid all have related state funding that is associated with it, particularly in VR. If the state cuts $1 you're cutting $4 back from the federal agency. It has a significant impact. And this was published right in the throes of Covid, and we wanted to get that into the hands of policymakers, specifically legislators at state level, to ensure that they weren't unnecessarily making cuts to those state dollars. That's a critical thing, but it's always a pressing issue regardless of covid, states need to be aware of this.

Then identifying ways to access technical assistance centers, which we've worked with our partners across TA centers, across VR, and education, to ensure that states are aware of them and can gain access. Next slide, we also published a brief around trauma informed practice and trauma informed care, particularly within the context of the workforce system. What we know is that while there are often counselors and individuals who have counseling training, even with the training that they have had, the recognition of the impact of trauma, covid being one of those potential traumas that comes into a young person's life, the acute mental health crisis that we're talking about, other things that may have resulted from covid homelessness. There could have been deaths in the family. All of those things create trauma within a young person's life.

We recognize that often access to care coordination, and access to the systems that they need to have access to help them through those crises, isn't always there. We've really recommended that states look at a trauma informed approach. Pennsylvania is one state that has really tried to implement a cross systems trauma informed approach through their systems and that's highlighted within their brief. Really, also in the midst of that, understand trauma in the context of culture, and ensure that the response to trauma and what's happening is culturally responsive irrespective of the student and young person's culture as you're thinking about that. States would also in coupling this with a trauma informed approach, need to ensure that they're bringing in a culturally responsive approach. And melding those two things together so that they're not just simply taking a blanket approach to a potential issue, but also considering all of the other intersecting factors in a young person's life that could be impacting their road to employment and economic security and ultimately, self-sufficiency as they move on through the transition age.

Next slide. To build on that, we also published a brief around addressing the needs specifically around intersecting identities. This dived into all intersecting identities. So we talked about race, ethnicity, gender identity, thinking about how that intersects with disability, with age, with the transition process, with the economic factors that could exist within a student's life. Are they also living in poverty on top of having a disability?

Also, looking at gender identity and the intersecting factors that that could have. So having state systems that, again, are well informed about the potential implications of what those factors mean for a young person. Understanding that a black transgender male experiences and will access the workforce system differently than a white male is a critical component. And having staff within those systems to understand where each individual is coming from; hiring diverse and culturally competent system staff to support individuals, it was a critical recommendation there.

And then also, when you're not specifically looking at the make-up of the staff that you're hiring, ensuring that other people are brought up to speed, related to cultural competency, that it's truly a journey, it's not a destination. This is a conversation that continually needs to go on through our systems. It's not going to ever be a one-off training. There needs to be ongoing conversations and build the structure within our systems. The brief calls for that type of systemic approach to addressing and supporting youth and young adults with disabilities with intersecting identities.

Next slide. We also have conducted a very large-scale group concept mapping study to specifically look at how professional development is occurring with youth service professionals across our country. We really wanted to take a dive into this topic and understand from the vantage point of not only youth service professionals, but also those that are supervising them, those that are accessing these systems. What do we ultimately see as the needs of a youth service professional to be successful in supporting youth? What we've learned at a very high level, and we're still crunching all of the data related to this and about ready to publish a large research paper as well as some complimentary documents around this, is that not surprisingly, we discovered that professionals told us they need more information on how to be trauma informed.

They also need more information about culturally responsive. To see the intersection between our other work and this large-scale study is always encouraging to know that we are right in hitting the mark, but then this just reinforces it. There was also a real emphasis on evaluating trainings and the use of the data to inform future trainings. But then also to evaluate them from a behavioral change perspective. Not just the quality. Evaluating training should not just be, oh, this was a wonderful experience. Even when you're thinking about what Andrew and I are presenting to you today. How is this information ultimately going to lead to change in behavior? Are you going to think about how we can support youth and young adults with disabilities? Or are you going to think about the resources that are out there and implement them within your local organization or within your state? That's the goal of these types of presentations.

And that's what we've said with professional development, that youth service professionals really need to, yes, they need to understand it, but you need to check back in and understand have they implemented it, has their behavior changed long term, is the drop of knowledge - which we know happens - is any of it maintaining and reintroducing those concepts of the reinforced. So, we are learning about that aspect of how learning needs to occur within these systems.

As a result, that mentorship and the application of learning, this final bullet on the screen is a critical piece of that. Yes, it's more expensive to have a model that involves the mentorship, the follow up of learning principles. But we know, based upon learning science, those are the things that actually reinforce learning and will ultimately help professionals maintain the skills and support youth and young adults with disabilities better. And it may ultimately help them stay more engaged in their job. We know turnover is significant in this field and keeping individuals and professionals fully skilled up and confident in what they're doing is really a thing that cannot be understated. We want to make sure that those skills are maintained and that they're fresh and they feel good about the work that they're doing.

Next slide, those are the full complement. And we're also going to be, as I mentioned, because we've just been refunded. We have a full new scope of work, which will include a significant more amount of technical assistance. We plan to partner with other national centers, particularly the National Technical Assistance Center on Transition, and Tech C The Collaborative. We will already have had intersections with them, but as we do more technical assistance, particularly with legislative policy makers, the focus of our center is very policymaker oriented. While we spread into these other areas of practitioners, and certainly we have our initiative with engaging youth, and all of our development of our tools and getting their feedback on our tools.

We really want to speak to the policymaker lens. because ODEPS is a non-regulatory agency, we're not talking about how to specifically change policy, for example, within a VR agency. But we are giving states examples of how they can implement policy and legislators examples on a state level. This is what you could be thinking about to lead to improvement. We really try to build all of our resources, whether it's the ones I've highlighted or our future work on the principles of improvement science, of really evaluating states are implementing, the principles of piloting something, starting small and then scaling up. And recognizing that when you are piloting, that your initial ideas are probably wrong and they're definitely incomplete. It's an adage of improvement science that you're going to start somewhere, and you've got to understand and evaluate it to really ensure that your idea is good. And not just let's go all in and implement this thing, which is encouraging to see.

For example, the equitable transition model has a pilot period. It has a buildup period. You pilot in one location and then it's requiring in the years 2, 3, and 4, then roll it out and scale it up. And there's a national evaluator that they brought in to help states evaluate that and make those changes. So that when you roll up to full scale, you are implementing from an informed place of really what happened with your model and how it's being implemented.

That's the overview and general work that we do. I appreciate you. If you want to find more out about us, we're on the web. The website is the capeyouth.org at the bottom of the screen, you can contact us directly at info at capeyouth.org. We're also on Facebook and Twitter -X. And you can contact me directly at akarhan@sdsu.edu Thanks for your attention, and thanks to nTIDE and company for having me here for today.

**Andrew Houtenville:** Sure. Thank you, Andy. So, for those still around which is everybody I think haven't gone down, there's the Q and A button. You can type in your questions, and I'll ask them of Andy. We have two things on the docket so far, Robin Brandt says “yes to financial literacy” with three explanation points. Yes, to financial literacy. Anonymous attendee says, can you speak further about how to leverage the Community Reinvestment Act? I've been to several webinars sponsored by NDI, but I am still unclear about how we can leverage the Community Reinvestment Act at the individual level?

**Andrew Karhan:** Yeah. Yeah, at the individual level. Really where it comes down to is engaging banks in conversation about how they are and intend to use their Community Reinvestment Act dollars and what they ultimately are doing there. There is an opportunity for that conversation to happen. Why we make this call particularly to policymakers is that we know that policymakers, particularly legislative policymakers, may have an entree to bank executives that, for example, a local nonprofit may not have and/or vice versa. A local nonprofit may have access and be able to make the introduction to a legislator, to really think about, well, how do we create and pass legislation or if it's an executive branch agency, if it's a VR agency or a workforce agency, what is the workforce agency, or the VR agency need to do?

We know that, for example, dollars used in the Community Reinvestment Act can count as state match related to the required state share that goes up and matches the federal level. In that alone, it's then leveraging the federal dollar and making more available. And potentially then also using additional state dollars that the state was already using to support the Vocational Rehabilitation Agency better than they already have been. Because now you've got this additional source of money that's coming in a state match.

There's a lot of particulars around how that needs to get rolled out, and I think that may be why sometimes on national webinars, when this has been presented, it's a lot of boots on the ground, conversations with banks, with people in the financial industry, and marrying them with people in the field to ultimately work out the details and identify a need and then develop a program to address that need.

We've suggested here that there's already a myriad of tools out there related to financial literacy toolkits, Skills to pay the bills, and a variety of other things that are out there that have been used the Money Smart curriculum. But are they accessible both culturally and to a variety of people with disabilities? Even working at that level and making them available for people to use them and train on those and get them embedded into the systems is what we would consider the funds from the Community Reinvestment Act being used for to then build up the system. I hope that answers it a little bit more clearly.

**Andrew Houtenville:** Yeah, the idea that it would hit the individual level like a direct service, that's not really its design. Its design is more of an institutional change. Yes. Than providing direct service to an individual. Yeah. Yeah. Okay.

**Andrew Karhan:** And eventually it gets down to the person, but you got to the funds have to doing it institutionally first, that leads to direct contact to people, is what I'm talking about. Yeah.

**Andrew Houtenville:** At one point you talked about, oops, Robin just asked a question. This is not just the need of people with disabilities. The staff who work with them need skills too. It's a systematic need. Yeah. So, if you think about direct service workers, folks that are not in a high wage, high wage categories, financial literacy is a crucial component of independent living.

**Andrew Karhan:** Yeah, yeah, that's a great point because what you see is if you have a staff person who's essentially making minimum wage, if they're in New York, they're making $14 an hour to work in a residence. They're essentially living in poverty. Unless they're working multiple jobs and/or are living with other people. I mean, they're likely living very close to poverty and as they're doing that. And certainly if you're working at the federal minimum wage is even more true, in working in those settings, you're working certainly in financial stress at all times. That's a level of trauma that the staff are experiencing. They are then engaged with, whether it's in a residential setting or an employment setting - they're then engaged with people with disabilities living in significant economic need themselves.

There's a level of retraumatization in simply just working with people that are also living in the same situation that you're living in. It can bring up issues for people and complicate things. It's something that people, I think, often discredit the fact there is this close connection in the financial need. If you've got people who aren't paying their bills and all of those gestures because they don't have the financial literacy skills themselves. Also, how are they transferring that to individuals that they're supporting if they don't have the skills themselves? To underscore it, yes. It does need to be delivered to both staff and people.

**Andrew Houtenville:** We're just about to finish up. Thank you, Andy, we appreciate that. I just wanted to drop a note that the National Institute on Occupational Safety and Health, you think about it as slips and falls and stuff and chainsaw and blades and things, but they have a whole different tact than I've ever known. And it's around vulnerable workers and low pay individuals living in poverty that they're at risk of occupational safety issues because they're asked to do things that they shouldn't be doing, both physically and mentally. They're put in a compromised position, English as a Second Language and things like that. NIOSH is very interesting. And we've been pushing them to not only think about people, workers with disabilities as a vulnerable population potentially, but also direct care workers. And we're doing a direct care workers survey anyway.

We're running over time. Thank you, Andy, again. You're welcome back to give us updates when you get your new five years rolling. And you've got a lot of publications coming out and are doing great work. Thank you and yeah.

**Andrew Karhan:** Thank you.

**Andrew Houtenville:** All right. Thank you, Elaine, thank you everybody for coming this midmonth. Have a great weekend. See you next time, I guess. Thanks.