EMPath’s Mission

EMPath transforms people’s lives by helping them move out of poverty and provides other institutions with the tools to systematically do the same.

EMPath’s History

After the historic merger of the Women’s Union and Crittenton, Inc., Crittenton Women’s Union (CWU) became Boston’s leading nonprofit innovator in helping low-income women and their families become economically self-sufficient. Its unique approach combined direct service programs, independent research, and public advocacy. Its groundbreaking research and practices was used as a blueprint for local, state, and national non-profits and government institutions serving low-income and homeless individuals and families. On May 6, 2016, Economic Independence Day, CWU announced our future as Economic Mobility Pathways, EMPath for short.

The publication Mobility Mentoring was first released in 2012. It is being reprinted in 2019, only with changes to the outside cover. The brief still references CWU.

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Elisabeth D. Babcock, MCRP, PhD
PRESIDENT & CEO

Elisabeth Babcock (Beth) is the President and CEO of Economic Mobility Pathways (EMPath), an international charitable organization dedicated to creating new pathways to economic independence for low-income individuals and their families. EMPath uses its unique “action-tank” business model to design, build, and test new approaches for creating economic mobility and then share them with other organizations and governments. Beth’s role as CEO is to lead EMPath in its strategy to be a research and innovations powerhouse consistently delivering new approaches that expedite pathways out of poverty.
INTRODUCTION

Crittenton Women’s Union (CWU) takes a pioneering approach to helping low-income women attain economic independence for themselves and their families. In addition to providing direct services and advocating for social policy changes, CWU conducts research and product development. Its integrated system of innovative programs and tools equips families with the skills, strategies, and resources necessary to overcome poverty.

CWU’s work rests on its groundbreaking theory of change, the Bridge to Self-Sufficiency™. The Bridge to Self-Sufficiency delineates how an individual achieves the transformative journey from poverty to full economic self-sufficiency.

The theory posits that becoming economically independent requires most people to optimize their lives in five basic domains: family stability; well-being; financial management; education; and career management (see Appendix 1). If an individual is significantly deficient in any of these domains, it becomes virtually impossible for her to attain and keep a family-sustaining job and thereby her economic independence.

Mobility Mentoring™ is the implementation platform for the Bridge to Self-Sufficiency. It is the professional practice of partnering with clients so that over time they may acquire the resources, skills, and sustained behavior changes necessary to attain and preserve their economic independence.

CWU fully implemented Mobility Mentoring first in its pilot program, Career Family Opportunity, in 2009. CWU applies its Bridge to Self-Sufficiency Assessment tool and Mobility Mentoring techniques throughout its programs and services.

FACTORS IN THE DEVELOPMENT OF MOBILITY MENTORING™

Wage and benefit erosion

CWU developed Mobility Mentoring against a backdrop of research indicating that the nature of poverty in the United States has changed significantly over the past generation. Prior to the 1990s, many of the jobs paying family-sustaining wages required little or no post-secondary education; jobs in manufacturing and construction were the backbone of the US economy. However, today jobs requiring minimal post-secondary education pay minimum wages.

CWU’s own research has shown that the number of “hot jobs” (high-vacancy positions requiring two years or less of post-secondary education, and paying family-sustaining wages) in Massachusetts decreased by two-thirds in just the five years between 2005 and 2010 (Crandal, 2005; Youngblood, 2010).

Nationally, the percentage of non-farm workers employed in manufacturing decreased from 24% in 1974 to less than 10% in 2007, with a commensurate increase in service sector jobs (Lee and Mather, June 2008). The average salaries of the manufacturing jobs lost were three times the average wages of the service jobs that replaced them.

Over the past 30 years, those trapped in the unskilled jobs at the bottom of the economic ladder saw their wages stagnate, while overall wages climbed by nearly 30%. Holding constant for 2010 dollars and taking into account the overall decreases in earnings represented by the 2008 recession, the wage gap between the average and lowest US wage-earners grew from a multiple of 4.88 in 1980 to a multiple of 6.12 today (see Appendix 2).

In Massachusetts, similar patterns were seen. Between 1980 and 2010, the bottom 20% of wage earners in the state saw their annual incomes grow less than .3% per year from $20,000 to $22,000 at the same time that average wages rose at five times that rate (1.5% per year) from $49,000 to $61,000 (Massachusetts Budget and Policy Center, January 2012).

In the past, if a person obtained a job that didn’t quite pay family-sustaining earnings, she could rely on a safety net of affordable housing, child care, and other public benefit programs to supplement or substitute for low wages. However, over the past 10 years, in spite of wage stagnation for the lowest
quintile of earners, budgets for public benefits programs have eroded substantially. For instance, in Massachusetts, spending on income supports such as transitional assistance has decreased almost 20%, and on housing and economic development by more than 14% (see Appendix 3).

Increased costs

The rise in average household earnings significantly increased the costs, especially in urban areas, of essential goods and services such as housing, child care, health care, and transportation. In fact, over the past forty years, the value of the minimum wage in Massachusetts has declined in purchasing power by 23% (Massachusetts Budget and Policy Center, 2012). Today low-income urban families are not only earning less and receiving less public benefit support, but they also are less able to afford their basic living costs.

CWU’s Massachusetts Economic Independence Index (Mass. Index), published triennially, measures how much income various family types across the state need to meet their essential living expenses without public or private assistance. In 2010, a single-parent family with two children needed an average annual income of $61,618 to cover basic costs—approximately 3.5 times the federal poverty level and a 6% increase from the 2006 survey. During that time, the average annual earnings of the lowest 20% of US wage-earners decreased from $11,352 to $11,034.

Rise of single parenthood

Superimposed on these economic trends was an equally powerful social change. During this 30-year period, when the earnings of two adults were increasingly necessary to sustain a family, the rate of children being born to single mothers rose to historic highs.

As of 2008, over half the births to Massachusetts mothers under age 30 were out of wedlock (Commonwealth, Summer 2010). This birth rate has significant consequences for household earnings. The median earnings in Massachusetts for a two-parent household in 2010 were $103,794, as compared to the median earnings of $28,065 for a household headed by a single mother (NACCRRA, 2011). Therefore, it is not surprising that 81% of the Massachusetts families living below the federal poverty level are headed by single mothers (Massachusetts Citizens for Children, 2008).

The Bridge to Self-Sufficiency™

Given these socioeconomic trends, the most common client likely to enter into a CWU or other social service program is a single mother with limited education, inadequate public benefits, and no net assets. She is struggling to maintain her family as she tries to make positive changes and get ahead.

Her chances of getting out of poverty without assistance are very limited; in fact, economists refer to today’s poverty as “sticky” because of the lack of opportunity for economic mobility.

CWU’s recognition of this new reality led it to conduct research into the meaning of economic independence, the obstacles and supports to achieving it, and previous and current programmatic approaches—both public and private—to creating it. CWU developed from this research its transformative theory of change, the Bridge to Self-Sufficiency (see Appendix 1).

The Bridge to Self-Sufficiency postulates that attaining full economic independence requires most people to optimize their lives in five basic domains or pillars: family stability (principally housing and child stability); well-being (principally health/behavioral health and social supports); financial management; education; and career management. Significant deficiencies in any of the pillars weaken the person’s ability to attain a well-paying job and build and sustain an economically secure life.

At CWU, the Bridge is used as a practical tool, with explicitly defined objectives in each of the five pillars:

**Family Stability**
- She is spending less than 30% of her after-tax income on housing.
- Her children’s needs are being met and do not prevent her from pursuing schooling or work.

**Well-Being**
- She is fully engaged in her work and her family, and no health or behavioral issues prevent her from pursuing schooling or employment.
- She is a part of a strong social network, serving as an advocate, organizer, and support to others.

**Education and Training**
- She has achieved a level of post-secondary education and/or training that has prepared her for a job paying enough to support her family.

As of 2008, over half the births to Massachusetts mothers under age 30 were out of wedlock.
Financial Management
• She has savings equal to three months’ worth of living expenses.
• She has good credit and is managing her debts in balance with her income.

Employment and Career Management
• Her earnings from her job are greater than the real costs of basic living expenses for her family, as determined by CWU’s Mass. Index (see Appendix 4).

Key to the application of the Bridge to Self-Sufficiency™ is Mobility Mentoring™. Mobility Mentoring is the long-term partnership between a trained professional and a client through which the client acquires the resources, skills, and sustained behavior changes necessary to progress in each pillar and attain and preserve full economic self-sufficiency. Mobility Mentors coach participants in setting priorities, developing action plans, honoring commitments, connecting to resources, and achieving goals.

Underpinnings of Mobility Mentoring™

Scientific research

The nature of existence at the lowest socioeconomic levels is often highly stressful and reactive—one of constantly responding to crisis. In fact, much new evidence suggests that growing up in this toxic environment creates significant physical changes in both children and adults. It can lead to a constellation of stress-related diseases such as hypertension, diabetes, and depression and also to significant changes in a person’s ability to control impulsive behaviors, contextualize decision-making, solve problems, and realize long-term goals.

These latter skills, known as Executive Functioning (EF) skills, are particularly necessary for navigating the complex pathways out of poverty. However, for those who have lived most of their lives in low-income or violent households, the environment itself compromises development of these necessary skills (Harvard Center on the Developing Child, Working Paper #11, 2011).

“The executive functions best understood and measured are inhibition, working memory, and cognitive adaptability of set shifting” (Friedman et al., 2006; Huizinga et al., 2006; Miyake et al., 2000). These operations are the basic building blocks of higher brain functioning like planning and goal orientation that make up the unitary construct of EF (Executive Functioning). Understanding their development and how they differ from other types of brain function sets a foundation for a new understanding of the role of education and experience in building human capital. …

EF enables prosocial behavior linked to morality, ethics and effective social interaction; creative problem-solving important to job performance and solving life challenges; and identification of and perseverance toward goals that benefit individuals, families and communities. EF not only supports academic success and educational attainment, but also social cooperation and family cohesion.” (Carlock, 2011, p. 5)

By inhibiting the optimal development of EF skills, the cycle of poverty is powerfully reinforced. Children who need highly developed problem-solving skills to move up the economic ladder grow up in stressful environments that create biological changes that dampen their ability to succeed. They reach adulthood with lower education and earnings and are therefore prone to raise their children in the same stressful environment; the cycle begins again.

Social research

Much is said about the importance of having social networks as a source of support and a means of connecting to opportunities for personal advancement. Certainly people, especially single parents who are trying to make the journey out of poverty to economic independence, need significant support, connections to resources, and opportunities to learn from others. Social networks, at their best, can provide all these things. The problem is that not all social networks are created equal.

Research shows that the natural social networks of people who are deeply entrenched in poverty are different from the social networks of the wealthy. In general, the lower one’s earnings and education, the smaller one’s social network:

“…education determines the scope of a person’s social network. Those with more education have more people to talk to about things that matter to them, and the chances of having wider networks of loose ties grows with every year of education. High school graduates and even those with just some college circulate in very family-dominated social worlds. Indeed, those with college degrees, for example, have social networks that are nearly twice as large as those with only a high school diploma” (Settersten, 2010, p. 117).
The social networks of the poor are often networks of friends and family who share relatively limited information about education and career opportunities, and who have equally limited resources of time, money, and other sources of support to assist members of the network (Riley and Eckenrode, 1986; Dominguez and Watkins, 2003).

Therefore, the poorer the client, the less likely she is to find robust career or education advice, volunteer help for needs such as child care, or financial support within her network. And if she does obtain such support, it often comes with a huge cost: the expectation that she will quickly reciprocate and pay back any support she is given. Under-resourced networks can’t afford to give without quickly being repaid. Theorists refer to these dynamics as the “enforceable trust” and “kinscription” of low-income social networks.

Within such networks, “the ability to maintain a balanced level of reciprocity with network ties is critical within a context of economic scarcity” and “...enforceable trust is based on the internal sanctioning capacity of the community. Although trust and support are important factors in day-to-day efforts to survive, they are also forms of social control (Portes, 1998) that sometimes undermine social and economic mobility by acting as leveling pressures and by placing restrictions on individual freedom” (Dominguez and Watkins, 2003).

Higher-income, well-educated individuals are more likely to have what social theorists call “social leverage networks.” Such networks are larger and more diverse in terms of race and ethnicity, and also the education and career experience of network members. They therefore serve as a powerful source of information about career paths that lead to family-sustaining jobs, advice about the myriad personal, educational, and career decisions necessary to stay on the mobility pathway, and financial resources to support the journey.

Therefore, given the demonstrable dampening effects the social networks of the poor can have on economic mobility, as opposed to the social leverage of networks of higher-income levels, theorists postulate that the nature of one’s social network may be the single greatest determinant of economic status and the increasing gap between rich and poor.

In the book Connected: The Surprising Power of Our Social Networks and How They Shape Our Lives, Harvard sociologist Nicholas Christakis and the University of San Diego political scientist James Fowler find that the size of our social network and our position in it matter more than race, class, gender, or education in whether we get ahead or fall behind. Christakis and Fowler call this “positional” inequality—people with many ties become better connected to jobs information, healthy behaviors, and income, and those with fewer friends or friends who are less connected get left farther and farther behind (Settersten, 2010, p. 103).

MOBILITY MENTORING™ APPROACH

The Mobility Mentoring approach recognizes that to become economically mobile, today’s poor must maintain family stability in a world of diminishing resources, develop new decision-making skills and networks of support, and navigate education and career paths leading to knowledge-based jobs that can support them and their families. This process requires time and significant investment on the part of a low-income woman and her Mobility Mentor.

Repeated studies of economic mobility programs show that the results of such programs are directly correlated with the level of investment. Robust programs appear to achieve better results than programs that are shallower in terms of duration, program cost per client, comprehensiveness of approach and services, and individualization of program approach to the client’s own strengths and weaknesses (Holzer, 2009; Riccio, 2007; UWMB, 2007; Hamilton, 2011)

Such approaches are not easy, but these studies and many others show that less comprehensive efforts lead to minimal results and, in fact, can cause women to be reticent to engage in future efforts to improve their circumstances. When CWU researchers interviewed clients about what they felt they needed to get ahead, the clients consistently spoke about wanting someone who would believe in them, stick by them over time, and give them ideas and connections to resources to help them and their families get ahead.

Interestingly, their responses not only reinforced what was found in the literature (Dodson, 1999), but also mirrored the approaches successfully used by the middle-class and wealthier families, i.e., years of support and advice that teach children and young adults how to solve problems, make wise decisions, and connect to networks of resources that eventually lead to advanced education and family-sustaining careers (Settersten, 2010).
Clearly, academics, economically successful families, experienced human service professionals, and low-income women all agree on the basics involved with creating a successful pathway to economic independence. Therefore, Mobility Mentoring is built upon those elements.

**Fundamentals of Mobility Mentoring™**

As mentioned earlier, Mobility Mentoring is based on the assumption that, if individuals can be engaged to optimize their outcomes in the five critical areas of the Bridge to Self-Sufficiency™, they are more likely to achieve economic independence than if they tackle any one critical area alone. Most human service programs seek to deliver outcomes within one of the five critical areas of the Bridge to Self-Sufficiency, i.e., family stability; well-being; financial management; education; and career management.

However, it is virtually impossible for a family to get ahead in any one critical area if other areas are problematic (Babcock, June 2009). A low-income woman cannot successfully attend school if she is homeless or depressed or her children have significant problems.

She cannot make her education pay off if she doesn't know which careers will compensate her at a family-sustaining wage. She cannot rent an apartment if she has a poor credit history. This is the Gordian knot of poverty. All the problems of the five critical areas are interconnected, and none can be remediated without attending to the others. Since each family will face its own particular obstacles to success in each of the areas, the question emerges: how do we begin to untangle the knot when it is different for every family?

Mobility Mentoring addresses this challenge in its personalized approach. Mobility Mentoring works as follows:

1. Clients are assessed by staff and also assess themselves for strengths and obstacles to success in all areas of the Bridge to Self-Sufficiency;
2. Specific long-term goals (i.e., goals with a horizon of 18 months or more) are jointly set for clients in all areas of the Bridge;
3. Obstacles in the Bridge Assessment are analyzed for their potential impact on clients’ attainment of the long-term goals;
4. Specific short-term goals (usually six months to one year) are set to remediate identified obstacles and facilitate attainment of the identified long-term goals;
5. Short-term goals are regularly re-assessed and adjusted (at least every six months or as needed) to maintain a relevant pathway to long-term goal attainment.

This process of assessment, re-assessment, and short-term and long-term goal setting is not a revolutionary one. However, it is uncommon to do so simultaneously in the five areas of the Bridge to Self-Sufficiency with the intent to help clients not only attain, but also preserve, their economic gains.

If clients are only able to attain goals when they are in a Mobility Mentoring program, then gains will be inherently limited and unlikely to be sustained outside the program. Therefore, the goal of Mobility Mentoring is not just to help clients attain specific goals, but to help them acquire the problem-solving and goal-setting skills necessary for successfully managing their lives.

In other words, the goal is to teach clients how to “mentor” themselves, so that they can better analyze their own problems, regulate their own behaviors, independently set long-term and short-term goals, build mastery and self-control, and transfer those skills to others by mentoring their own children, communities, and networks.

Therefore, by repeatedly demonstrating problem-solving, interpersonal, and priority-setting skills within a framework of individual goals attainment, the Mobility Mentor fosters sustained behavior change and ultimately makes his or her role dispensable. This approach is often referred to as Executive Functioning (EF) coaching or “scaffolding.”

**Crisis containment and behavior change**

Central to such skill-building is helping the client understand the importance of finding ways to contain crisis stimuli long enough to introduce the focus on long-term goals. Staff members who work with impoverished clients consistently describe clients’ lives as characterized by and consumed by constant crisis. One seasoned Mobility Mentor offered the following definition of Mobility Mentoring with regard to crisis containment:

“Mobility Mentoring is not following Alice down the rabbit hole and becoming part of her altered reality of
In the case of low-income families, it is necessary to help them carve enough time out of their days to begin to take the steps necessary to change their lives.

What is captured in this definition is the oft-repeated sense of poverty as not just an economic state, but a chaotic environment where instability, stress, hopelessness, and lack of opportunity govern an individual's life. Therefore, the first responsibility of the Mobility Mentor is to introduce the client to the concept that this environment can be changed, but only by having the client contain the crisis stimuli long enough to begin to grow alternative skills and behaviors.

Unlike that of a case manager, the Mobility Mentor’s role is not principally to resolve current crises, but to contextualize them and maintain focus on pathways to change. CWU employs a tool, the Mobility Mentoring™ Scale, to illustrate the amount of time a client devotes to crisis management versus goals attainment, as shown in the accompanying graph.

As the Mobility Mentoring Scale illustrates, a necessary precursor to any significant behavior change is the interruption of current behaviors long enough to practice alternate behaviors. In the case of low-income families, it is necessary to help them carve enough time out of their days to begin to take the steps necessary to change their lives.

To do this, Mobility Mentors must consistently push back against the vortex of poverty, requiring clients to stick to their own paths to change and showing clients, over time, how they can practice these skills themselves without the aid of the Mobility Mentors.

“The role of the counselor is to connect the [client] to services and develop strategies to manage the chaos of their lives and bring stability to their home life, so that they may begin to think beyond the day-to-day survival and make plans for the future that include education and career goals” (Carlock, EF in Adult Education Programs, 2011, p. 5).
External to internal transfer of goal-setting

Goal-setting tools are the primary instruments for maintaining the focus on change. They represent the contract between the client and the Mobility Mentor (and eventually the client and herself) for the resolution of obstacles, the acquisition of new skills, and the modification of behavior. Through this contract, clients commit to a pathway of change.

Initially, the contract, which is based on EF scaffolding, is an external document with set goals. However, as clients practice, with the guidance of their Mobility Mentors, techniques and strategies for crisis containment, problem-solving, priority-setting, building of mastery/expertise, and attaining increasingly difficult, multi-step goals, most develop a growing sense of their capacity to change and exert internal control over their lives.

In order to support and strengthen the scaffolding process and the internalization of new techniques and strategies, Mobility Mentors are motivational and encouraging in their approach, essentially functioning as a client’s coach. For many people raised in poverty, the relative unpredictability of their lives makes it hard for them to adequately weigh the value of a current action/change against potential future gains.

For example, studies have shown that adult students with compromised Executive Functioning “don’t project themselves into the future very well [because] they live in an interpersonal world driven by crisis, which doesn’t lend itself to long-term planning” (Fitzgerald, 2000, p. 24). Therefore, especially in the beginning, it can be difficult for Mobility Mentors to convince clients of the merits of investing in change.

Incentives

The initial investment required by even small steps, such as visiting a potential college or obtaining a credit report, can seem a huge burden, and the potential downstream value of such steps virtually nil. Therefore, the use of incentives to reinforce positive behaviors is recommended in Mobility Mentoring™.

Incentives serve to shorten the horizon of behavior change impact so that a current step receives a current reward, rather than one that is entirely deferred. Research has shown that even relatively small incentives of this nature can have significant impacts (Riccio, J. D., 2010).

Rewards are scaled to the complexity of the goal. Goals requiring a few hours’ effort (e.g., attending a meeting) should be rewarded with significantly smaller incentives than those requiring great persistence over time (e.g., completing a semester of education). Incentives may be tangible (e.g., money or gift cards) or they may be intangible (e.g., public recognition, opportunities to participate in a special event or gain access to a special program). Most importantly, they must be completely predictable, understood at the time the goal is set, and dependably delivered within a short time of goals completion.

Incentive systems can also be developed not only to directly reinforce attainment of a particular goal (i.e., as a pre-established “goals payoff”), but also as a vehicle for additional behavior change beyond the immediate goal. For example, a client who uses her incentive dollars to pay for a babysitter so that she can study to complete a class in school will receive an even higher incentive reward for class completion.

Encouraging clients to use incentives to invest in themselves to achieve higher goals further reinforces the concepts of long-term goal attainment and mastery. This creates a snowball effect, motivating clients to invest more deeply in themselves and their futures.

Clients can also be encouraged to set asset-building goals that facilitate longer-term personal goals such as home-ownership, small business start-up, higher education, and a family emergency fund. Again, use of incentives for such asset-building can create similar snowball effects, since most formal asset-building programs (e.g., federally funded Individualized Development Account (IDA) programs for low-income families) provide at least a 1:1 match and often as high as a 3:1 match for every dollar a client saves.

Therefore, such programs not only reward the behavior change of saving, but doubly reward the client for achieving the original goal, which generated the incentive payment they used to invest in the asset account. Additionally, it is well documented that in order to truly preserve economic independence, individuals need not only adequate income to support themselves, but additional assets that can be used for emergencies and attaining the education or other resources necessary to maintain full economic stability (Shapiro, 2001). Through the Mobility Mentoring process, clients internalize behavior skills that support asset-building and position them to build and preserve their economic independence.
As discussed in the section on social research, social networks of the poor tend to be smaller, more familial in nature, less resource rich, and therefore relatively inhibitive of upward mobility in comparison to the networks of the wealthy. In addition, when individuals are newcomers to the US whose family and social networks remain in their country of origin, social networks can be even further bifurcated and depleted.

Because of this, Mobility Mentoring™ places significant importance on the development of strong social connections among clients and between clients and external professional/educational networks. Wherever possible within Mobility Mentoring programs, staff members establish large “community” groups of participants (usually 20–25 in number) who are on a similar program path.

Such groups are founded with the goal of supplementing clients’ current social networks that may, at best, have limited resources to offer and, at worst, be actively discouraging clients’ new journeys to economic independence.

The goals of the Mobility Mentoring Community Groups are to:

1. Foster peer support toward individual and common goals;
2. Provide opportunities for building leadership, problem-solving, and social skills;
3. Offer an efficient vehicle for shared learning and activities;
4. Celebrate and reinforce participants’ achievements;
5. Provide community and networks of support that may extend beyond program completion.

Experience with such peer support groups has shown them to be singularly important and impactful. Over time, most clients get to know and trust each other deeply. This fosters a willingness to ask for help and to offer support that doesn’t exist in clients’ other social networks where members are not all pursuing the same change-related goals. When surveyed, clients speak positively of their feelings of shared identification and their sense of empowerment from being part of the group.

Within the Community Group, there may also be smaller groups of women who have a particular issue or concern in common. In Mobility Mentoring, these women are encouraged to form “Affinity Groups” (usually 4–8 participants or fewer).

For example, within CWU’s Mobility Mentoring-based program, Affinity Groups have been formed by mothers of children with special needs and women interested in improving their physical well-being. In the former case, the mothers worked together to think about how to improve their children’s access to appropriate school services and summer camps; in the second, the women formed a cooking club, planted gardens, and motivated each other to start a walking group.

The goals of the Mobility Mentoring Affinity Groups are to:

1. Mitigate particular impediments members share to economic mobility;
2. Foster the development of problem-solving and leadership skills;
3. Improve members’ ability to collaborate and achieve shared goals;
4. Develop and hone valuable interpersonal skills.

Groups such as these (both Community and Affinity) provide important sources of shared support for change and also help to develop key leadership, conflict resolution, and other interpersonal skills critical for success in the family, at school, and at work. Because of their impact, Mobility Mentoring also employs incentives to foster group development.

For example, each time a client is given an incentive for achieving a personal goal, a small matched amount of incentive dollars can be paid to a “group account.” In such group accounts, clients are only permitted to access the incentive dollars when they successfully submit a proposal for a group project and/or goal.

At CWU, the Affinity Group of mothers of children with special needs, cited above, submitted a proposal to access their affinity account money to hire a specialist to review their children’s special education plans and to help them advocate for their children’s needs in their schools. The physical well-being Affinity Group proposed a plan to buy pedometers at a group discount so that they could measure and increase their levels of exercise.
In both these instances, the mothers found that they could use resources more efficiently and achieve stronger results if they worked as a group rather than alone. They also found that past successes (awards for achieving their original personal goals) could become building blocks for even larger future successes, one of the important concepts in the internalization of Executive Functioning scaffolding on which Mobility Mentoring™ is based.

Mobility Mentors also connect participants to external social leverage networks when they assist participants in enrolling in education programs, gaining entry to new jobs, joining professional groups or societies, and identifying professional mentors in the participants’ chosen careers. These connections increase participants’ access to people whom they would not normally know and promote the growth of their own social leverage networks.

**Mobility Mentoring™ vs. Case Management**

Often when social service agencies attempt to help clients address problems in their lives and attain goals, they deploy what is commonly referred to as case management approaches. Although Mobility Mentoring and case management share many commonalities, the fundamental differences lie in duration, focus, and nature of the work. Mobility Mentoring requires extended engagement over time (usually multiple years), a focus on attainment of individually established, multi-faceted, long-term goals, and coaching for lifelong skill building and behavior change. In contrast, case management is usually of relatively short duration, focusing primarily on crisis intervention and attainment of program-mandated goals.

Mobility Mentor positions require a bachelor’s degree with field experience or a master’s degree. Case managers are often paraprofessionals who typically receive on-the-job training. The table below compares the differences between Mobility Mentoring and case management in several categories.

<table>
<thead>
<tr>
<th>CATEGORY OF DIFFERENCE</th>
<th>CASE MANAGEMENT</th>
<th>MOBILITY MENTORING</th>
</tr>
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<tbody>
<tr>
<td><strong>Focus of role</strong></td>
<td>Case management focuses on attainment of program-specified goals and elimination of obstacles to program completion (e.g., case managers in a GED program focus on successful completion of the program and solutions to immediate problems such as stable attendance).</td>
<td>A Mobility Mentor assists the individual in establishing and attaining her own personal, long-term, multi-faceted goals for life improvement. The Mobility Mentor’s primary focus is to coach the client in personal problem-solving, skill-building, and persistence to attain long-term goals (e.g., economic independence).</td>
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<tr>
<td><strong>Timeline of engagement</strong></td>
<td>Interaction usually continues for 1 year or less, depending on the length of the program.</td>
<td>Mobility Mentoring usually requires a multi-year commitment toward long-term goals.</td>
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<tr>
<td><strong>Caseloads</strong></td>
<td>Caseloads vary based on the program but often range from 25–100 clients per caseworker.</td>
<td>A Mobility Mentor’s initial caseload averages 12–18 clients. However, caseloads increase as longer term clients require less time-intensive interaction.</td>
</tr>
<tr>
<td><strong>Nature of work</strong></td>
<td>Case management requires monitoring of program compliance and outcomes, short-term crisis intervention, and referrals.</td>
<td>Mobility Mentoring requires coaching and mentoring for life change and complex individual goals attainment, including referrals and development of networks.</td>
</tr>
<tr>
<td><strong>Training required</strong></td>
<td>These para-professional positions rely heavily on on-the-job training.</td>
<td>Mobility Mentors require a BA, plus related experience, or an MA; at least 32–40 hours of training in a CWU-designed curriculum and course; and additional on-the-job training.</td>
</tr>
<tr>
<td><strong>Supervision required</strong></td>
<td>Supervision is program-related as needed.</td>
<td>Mobility Mentoring requires weekly supervision and team case conferencing as well as clinical advice and support.</td>
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</table>
It is an enormous challenge for low-income heads of households to maintain a stable home life and work to support themselves and their families as they take new, often unfamiliar, steps toward building more secure futures. Success requires sustained work over a long period of time with the help of Mobility Mentors.

Due to the complexities in clients’ lives and the need to persist through life challenges for many years, the potential risk of client failure in Mobility Mentoring programs is high. However, even though many challenges to successful outcomes may be found in the lives of the clients, one particular challenge is inherent to the Mobility Mentoring model itself: “boundary creep.”

When a Mobility Mentor works in a one-on-one trusting relationship with a client over time, it is entirely natural (and clinically predictable) that the Mobility Mentor will begin to identify strongly with the client and the obstacles she is facing in her daily life. Mobility Mentors will often express feelings of compassion and understanding for their clients and the difficulties that beset them.

In doing so, Mobility Mentors will often think that they should relax the rules, postpone deadlines, or otherwise weaken the achievement expectations that have been established to help the client stay on track to attain her long-term goals.

Although it is necessary for Mobility Mentors to be deeply committed to their clients’ success, care about their obstacles, and understand their lives, the role of the Mobility Mentor is not to provide sympathy for the clients’ current conditions, but to provide sympathetic motivation to change those conditions. In doing so, the Mobility Mentors maintain a critical boundary between themselves and their clients that is key to the success of the mentoring relationship.

In this way, the role of Mobility Mentors is akin to the role played by the most talented mentors in school or at work. These gifted teachers and bosses often coach their best students and employees through short-term crises by acknowledging the difficulty, and expressing confidence in the person’s ability to overcome it, while, at the same time, holding the person responsible for and demanding completion of the project at hand. These mentors thus encourage their protégés to learn not to become swamped by crisis but to contain it in a way that allows long-term success.

Preventing boundary creep is often extremely difficult. Unless that boundary can be maintained, in many cases the clients will not be convinced they can make real change in their lives (Williams, 1998). Therefore, Mobility Mentoring includes program elements designed to mitigate such staff over-identification with clients.
First, when Mobility Mentors establish initial goals with clients, they usually do so as a team of two or three. This accomplishes two goals: it prevents over-identification by the primary Mobility Mentor with the client (and potential lowering of the bar of suggested goals), and it also provides the additional expertise of multiple team members as the initial plan is being set.

For the client, such group meetings also demonstrate the value of teamwork and foster connections to staff members in addition to the primary Mobility Mentor. Programmatically, the team reinforces the collaborative nature and comprehensiveness of the Mobility Mentoring™ approach.

Over time, as clients continue to progress, Mobility Mentors may set goals with clients one-on-one and review the goals with a supervisor. However, in instances where clients are struggling to meet their goals, goal-setting continues with a team of Mobility Mentors to maximize objectivity and resources.

Mobility Mentors meet with supervisors at least weekly in order to review their caseloads and problem-solving approaches with clients. Additionally, Mobility Mentoring teams meet at least weekly to share clients’ progress and ideas for how to keep clients on track.

The Mobility Mentoring team also routinely (at least monthly) shares concerns about the most problematic clients with supervisors outside the team. Ideally, these supervisors have clinical training in behavioral health and are licensed in clinical social work, psychiatry, or clinical psychology.

Finally, client progress as a group (client/program outcomes reports) is reviewed by an advisory body external to the Mobility Mentoring program so that the entire program is held accountable to pre-established outcomes for client success. In this manner, the over-identification inherent in the Mobility Mentoring relationship is kept in check by the entire program staff and framework reinforcing both individual and program goals.

**SUCCESS OF MOBILITY MENTORING™**

In June 2009, CWU launched a pilot Mobility Mentoring-based program called Career Family Opportunity (CFO). The CFO program is designed to help low-income single parents attain full economic self-sufficiency in five years. Since its inception, the CFO program has touched the lives of 46 families through its South Boston and Cambridge sites.

Of the 46 families, 13 have been enrolled from the beginning. By the end of June 2011 (year two of the program) those “pioneer” families had achieved the following positive outcomes:

- 77% were enrolled in an education or training program as compared to 46% at enrollment in CFO;
- Five had attained college degrees;
- Average savings of $1,308 per CFO participant were deposited in Individual Development Accounts (IDA); collective deposits of $16,998.65 were matched (at progressive rates) for total savings of $41,821.19.

Such early outcomes led to both government and philanthropic investments in program replication and expansion. CWU is now training other agency partners in the application of Mobility Mentoring practices. Individual and program outcomes are being actively evaluated by CWU as well as academic partners and should lead to valuable information about how to evolve programs, improve impacts, and evaluate the costs and benefits of investing in Mobility Mentoring approaches.

Since its inception, the CFO program has touched the lives of 46 families through its South Boston and Cambridge sites.
APPENDIX 1

Appendix 1

Crittenton Women’s Union Bridge to Self-Sufficiency™

Appendix 2

US Wage Gap Between Poor and Average Wage-Earners

<table>
<thead>
<tr>
<th>Year</th>
<th>Average Annual Earnings of Lowest 20% of US Wage-Earners</th>
<th>Average Annual Earnings of All US Wage-Earners</th>
<th>Wage-Gap Ratio Between Average and Lowest US Wage-Earners</th>
</tr>
</thead>
<tbody>
<tr>
<td>1980</td>
<td>$10,858</td>
<td>$53,064</td>
<td>4.88</td>
</tr>
<tr>
<td>1990</td>
<td>$11,589</td>
<td>$60,487</td>
<td>5.22</td>
</tr>
<tr>
<td>2000</td>
<td>$12,860</td>
<td>$72,339</td>
<td>5.62</td>
</tr>
<tr>
<td>2010</td>
<td>$11,034</td>
<td>$67,530</td>
<td>6.12</td>
</tr>
</tbody>
</table>

US Census, 2010, Tables H-3; H-6. All figures are provided in 2010 CPI-U-RS adjusted dollars.
### Appendix 3

**Massachusetts Public Benefits Expenditures 2001 vs. 2011**

<table>
<thead>
<tr>
<th>MA Budget (000's)</th>
<th>FY' 01</th>
<th>FY' 11</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>$29,717,636</td>
<td>$34,092,917</td>
<td>14.72%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>$6,907,309</td>
<td>$6,748,930</td>
<td>-2.29%</td>
</tr>
<tr>
<td>Higher education</td>
<td>$1,396,910</td>
<td>$1,025,173</td>
<td>-26.61%</td>
</tr>
<tr>
<td><strong>Health Care</strong></td>
<td>$9,013,153</td>
<td>$14,743,265</td>
<td>63.57%</td>
</tr>
<tr>
<td>Mass Health (Medicaid) and Health Reform</td>
<td>$6,736,988</td>
<td>$12,162,373</td>
<td>80.53%</td>
</tr>
<tr>
<td>State Employee Health Insurance</td>
<td>$853,047</td>
<td>$1,441,036</td>
<td>68.93%</td>
</tr>
<tr>
<td><strong>Human Services</strong></td>
<td>$3,429,696</td>
<td>$3,388,459</td>
<td>-1.20%</td>
</tr>
<tr>
<td>Transitional Assistance</td>
<td>$952,994</td>
<td>$777,760</td>
<td>-18.39%</td>
</tr>
<tr>
<td><strong>Housing and Economic Development</strong></td>
<td>$1,897,783</td>
<td>$1,624,931</td>
<td>-14.38%</td>
</tr>
<tr>
<td>Housing actual spending</td>
<td>$308,799</td>
<td>$326,760</td>
<td>5.82%</td>
</tr>
<tr>
<td>Housing approved budget</td>
<td>$278,796</td>
<td>$278,796</td>
<td>-9.72%</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>$4,239,884</td>
<td>$4,147,011</td>
<td>-1.55%</td>
</tr>
<tr>
<td>Debt Services</td>
<td>$1,976,426</td>
<td>$2,132,027</td>
<td>7.87%</td>
</tr>
<tr>
<td>Pensions</td>
<td>$1,323,119</td>
<td>$1,460,523</td>
<td>10.38%</td>
</tr>
</tbody>
</table>

Source: Massachusetts Budget and Policy Center.
### Massachusetts Economic Independence Index 2010 by Geographic Area (With Representative Family Types)

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>1 Adult</th>
<th>1 Adult, 1 Preschooler 1 School-age</th>
<th>2 Adults, 1 Preschooler 1 School-age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Massachusetts</td>
<td>$27,084</td>
<td>$61,618</td>
<td>$68,751</td>
</tr>
<tr>
<td>Barnstable County</td>
<td>$24,696</td>
<td>$58,012</td>
<td>$64,490</td>
</tr>
<tr>
<td>Berkshire County</td>
<td>$20,217</td>
<td>$49,212</td>
<td>$55,866</td>
</tr>
<tr>
<td>Bristol County</td>
<td>$23,753</td>
<td>$54,037</td>
<td>$60,731</td>
</tr>
<tr>
<td>City of Boston</td>
<td>$28,717</td>
<td>$62,421</td>
<td>$68,235</td>
</tr>
<tr>
<td>Dukes County</td>
<td>$29,802</td>
<td>$62,189</td>
<td>$68,632</td>
</tr>
<tr>
<td>Essex County</td>
<td>$28,361</td>
<td>$63,921</td>
<td>$70,858</td>
</tr>
<tr>
<td>Franklin County</td>
<td>$19,991</td>
<td>$48,874</td>
<td>$55,286</td>
</tr>
<tr>
<td>Hampden County</td>
<td>$20,272</td>
<td>$49,673</td>
<td>$56,347</td>
</tr>
<tr>
<td>Hampshire County</td>
<td>$20,034</td>
<td>$49,388</td>
<td>$55,808</td>
</tr>
<tr>
<td>Middlesex County</td>
<td>$29,635</td>
<td>$67,783</td>
<td>$75,111</td>
</tr>
<tr>
<td>Nantucket County</td>
<td>$36,089</td>
<td>$67,417</td>
<td>$73,731</td>
</tr>
<tr>
<td>Norfolk County</td>
<td>$30,203</td>
<td>$68,021</td>
<td>$75,347</td>
</tr>
<tr>
<td>Plymouth County</td>
<td>$29,178</td>
<td>$63,164</td>
<td>$70,693</td>
</tr>
<tr>
<td>Suffolk County</td>
<td>$30,750</td>
<td>$64,922</td>
<td>$72,673</td>
</tr>
<tr>
<td>Worcester County</td>
<td>$21,358</td>
<td>$54,859</td>
<td>$61,473</td>
</tr>
</tbody>
</table>

Source: Crittenton Women’s Union
**Endnotes**

1. In Massachusetts, 44% of those families in the lowest quintile of earners have merely a high school diploma or less and possess net household assets (total assets less total debts) of only $9/household (Massachusetts Asset Development Commission, 2009, Appendix E).


3. “Close to half (47%) of low-income girls compared to 35% of low-income boys end up in the bottom fifth (of income) in adulthood. This lack of mobility is consistent with the findings of lower marriage rates for women growing up in low-income families.” (J. B. Isaacs, p. 65.)

4. In “scaffolding” instruction, a more knowledgeable other provides scaffolds or supports to facilitate the learner’s development. An important aspect of scaffolding instruction is that the scaffolds are temporary. As the learner’s abilities increase, the scaffolding provided by the more knowledgeable other is progressively withdrawn. As a teaching strategy, it originates in Lev Vygotsky’s socio-cultural theory of learning, in particular his notion of the “zone of proximal development,” the distance between what a learner can do without help and the next learning s/he can achieve with competent assistance [Raymond, 2000, p. 176] (R. R. Van Der Stuyf, “Adolescent Learning and Development,” *Scaffolding as a Teaching Strategy* (New York, NY: City College of City University of New York, 2002).

5. For a description of current incentive systems successfully used in other Mobility Mentoring Programs, see Chapter 5 in the Crittenton Women’s Union *Career Family Opportunity Program—Policies and Procedures Manual* (Boston, MA: CWU, 2011).
Bibliography


