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WISCONSIN'S ELEVATE PROGRAM: INITIAL IMPLEMENTATION REPORT

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ELEVATE Initial Implementation Report Executive Summary

Introduction

In 2019, the Wisconsin Department of Children and Families (DCF) provided funding, via a waiver from federal the Office of Child Support Enforcement (OCSE), to five Wisconsin counties to test an innovative approach to serving families involved in the child support system. This program, called ELEVATE (Empowering Lives through Education, Vocational Assessment, Training, and Employment), provides a package of services to noncustodial parents (NCPs) behind on their child support obligations, in lieu of more traditional, enforcement-oriented approaches. The ELEVATE program originated from a previous OCSE-funded national demonstration project, the National Child Support Noncustodial Parent Employment Demonstration (CSPED). Wisconsin piloted projects in Brown and Kenosha counties under the title Supporting Parents Supporting Kids (SPSK). ELEVATE's evaluation includes an impact analysis, which will analyze the program's effects, and an implementation analysis, which documents how programs operated. This report summarizes implementation findings from the program's first year, informed by interviews with program staff and leadership, surveys of frontline staff, a baseline survey of study participants, service data, and program documentation.

Wisconsin's ELEVATE Program

The OCSE waiver supplemented by additional state budget funds allowed Wisconsin to continue to operate programs in Brown and Kenosha counties and to extend programming to three additional counties. Three counties—Marathon, Racine, and Wood—applied, and DCF selected all three to take part in the pilot. As DCF articulated in the program's Funding Opportunity Announcement (FOA), the main goal of ELEVATE is to increase NCP compliance with child support obligations by increasing NCP participation in the workforce, and to increase NCPs' engagement with their children. DCF also explicated an operational goal of shifting agency culture from a more traditional, enforcement-oriented approach towards a more supportive array of services.

DCF tasked child support agencies with ensuring that the core components of the ELEVATE program—enhanced child support services, case management services, employment services, and parenting education—be delivered to participants directly through child support agency staff, through a contract with third-party service providers, or through a combined approach. DCF specified that all participants were to receive certain services, while others could be provided as staff found appropriate. All counties began enrolling study participants and providing services in January 2020; study enrollment is expected to continue through September 2022.

The COVID-19 Pandemic

Only two months after ELEVATE's implementation launch, the COVID-19 pandemic upended virtually every aspect of work and life in Wisconsin and the broader United States. The pandemic caused substantial changes to the public health and economic environments in which ELEVATE programs were implemented and had important implications for ELEVATE program operations. ELEVATE counties were forced to pivot to new modalities of service delivery, and the consequences of the pandemic for program operations is a key area of focus for this report.

The pandemic also disrupted ELEVATE's evaluation activities. Due to UW–Madison policy requiring all research with in-person components to cease, including ELEVATE's baseline

survey, ELEVATE counties were unable to enroll NCPs into the study's evaluation from March 18, 2020, until July 7, 2020. The evaluation resumed when appropriate safety procedures were put in place and counties were able to provide a full package of ELEVATE services.

Partnerships

ELEVATE counties used different partnership arrangements to provide ELEVATE services. Across all models, the child support agency provided child support services and worked with one or more partners to provide employment, case management, or parenting services. Child support agencies leveraged a combination of new and existing partnerships when establishing their programs, with two agencies partnering with new parenting providers and three agencies utilizing existing relationships with partners. While most partnerships were in place at the demonstrations' outset, parenting partnerships took longer for several counties to implement, contributing to delays in implementation of parenting classes in some counties.

Partnerships yielded benefits as well as challenges for ELEVATE programs. Staff described in interviews that engaging partners with a broad array of expertise and community connections helped to strengthen their county's service array. Program leaders emphasized the benefits of working with longstanding partners with whom they had strong previous relationships, including ease of communication and established norms and trust. Forming new partnerships often required significant investments of time and effort to ensure that partners understood the program; to cultivate a shared vision and goals; and to build successful communication strategies. In addition to building formal partnerships with other providers to deliver ELEVATE services, ELEVATE programs also leveraged and built relationships with local community partners that could act as referral sources for services beyond the scope of ELEVATE.

Staffing

ELEVATE leaders aimed to hire customer-focused, empathetic staff in support of program goals. ELEVATE coordinators, employed by child support agencies or partners, played a key role in program implementation and were responsible for, among other duties that varied across programs, performing intake into the study and program and monitoring participant progress. A common challenge cited by program leadership during the first year was turnover in key staffing roles. Turnover introduced key challenges such as disruptions to the recruitment and intake process; difficulty maintaining connections and continuity with participants; and gaps in knowledge as new staff acclimated. Counties experienced turnover as particularly disruptive when a back-up had not been trained to fill the role.

Eligibility, Recruitment and Enrollment

DCF defined the target population of NCPs for ELEVATE as NCPs with an eligible support order in the county seeking to enroll them, who are currently behind or at risk of becoming non-compliant with support obligations, and who are unemployed or underemployed. Participants also needed to be medically able to work and to live close enough to service providers in the enrolling county to engage in services. Study participants also needed to be fluent in English, at least 18 years of age, and have a Social Security Number. Study enrollment targets were adjusted due to the pandemic. The revised target of 1,080 study enrollees includes 86 study participants enrolled between January 2020 and March 2022, and 994 study participants to be enrolled between July 2020 and September 2022. At the time of data collection, March 31, 2021, ELEVATE counties had enrolled 314 study participants, achieving 29% of the total enrollment target.

Recruiting sufficient numbers of participants was a significant challenge for counties. Factors contributing to this challenge were communicating effectively about the program's purpose and goals, adequate staffing and referral levels to support recruitment, NCP interest in the program and perceptions of the child support program, and barriers to work and service engagement for many NCPs caused by the COVID-19 pandemic.

Staff reported that the majority of ELEVATE referrals came from child support workers and that the COVID-19 pandemic created challenges for generating referral streams outside of child support. ELEVATE program leaders encouraged child support workers to watch for NCPs on their caseloads who met the ELEVATE eligibility criteria, and in some counties, set quotas for the number of referrals each child support staff member was expected to meet. In addition to referrals, ELEVATE programs used outreach strategies such as: cold calls to potentially eligible parents; text messages, emails, and mailings; posting flyers or ads in public spaces and community offices; internet ads; and presentations to other community organizations.

Characteristics of Enrolled Participants

In interviews, staff reported that many participants enrolled in ELEVATE struggled with multiple barriers to work. Commonly cited barriers included criminal justice history; housing instability; transportation barriers; lack of job skills and work experience, training, and education; and mental health issues, particularly struggles with anxiety. Staff also noted barriers to paying child support beyond employment alone, including discomfort interacting with child support programs and courts; owing child support across multiple families; high-burden child support orders; and limited contact with children reducing willingness to pay ordered support. Staff noted that the COVID-19 pandemic introduced a host of challenges for NCPs, including reduced hiring opportunities and work hours, childcare responsibilities, mental health issues, and medical issues that made returning to work during the pandemic risky.

Services

ELEVATE services launched in January 2020. The ELEVATE service model includes four primary service domains: enhanced child support services, parenting services, employment services and case management services. Counties were expected to provide services in all domains, though DCF provided counties with flexibility in deciding which services to make available through their ELEVATE programs, and within programs, which services were appropriate for a specific participant.

Key Early Takeaways

ELEVATE provided the opportunity to learn from counties about early implementation successes and challenges. We summarize several of these key lessons below.

The COVID-19 pandemic significantly affected service delivery plans and program operations, though counties developed adaptive strategies to keep services going. The pandemic caused ELEVATE programs to substantially modify plans for implementing services with very little time to pivot, and amid a continually changing landscape. This required counties to provide services in alternate modalities and adjust service content. After a brief transition period in which counties often described reduced interaction with customers, most found that they were able to resume most services. Counties highlighted replicating parenting classes in a virtual environment as a key challenge. Staff perceived that virtual service options presented challenges for some customers, particularly those with limited access to or comfort with

technology, but improved service accessibility for others, such as those with transportation barriers, child care issues, work schedule conflicts, and struggles with anxiety.

Flexibility in service delivery models within and across counties allows for adjustments based on local resources and individual needs, but also results in variation in service delivery. DCF gave counties considerable latitude in determining the specific services to be included within their program models and offered to particular customers. While this flexibility allowed counties to adjust to local constraints, needs, and resources, as well as to tailor programming to customer needs and preferences, this variation suggests that the operational definition of ELEVATE is a "menu" of various program services within several broad domains, rather than a consistent program model implemented across county contexts.

ELEVATE programs refined their approaches to staffing, collaboration, and delivering services in the first year and look forward to an eventual post-pandemic service environment. In the first year of implementation, ELEVATE programs took steps that helped to refine their service delivery models. They developed communication tools and practices and streamlined processes within and across agencies; filled key staff roles, addressed staff transitions, and fostered cohesion within teams; and built new partnerships and nurturing existing partnerships. They also refined their approaches to service delivery and took steps to better understand the community resource landscape. Leadership and staff felt their programs experienced considerable progress in these domains during the first year despite challenges related to working apart from one another. Staff hoped for progress in the public health landscape in the months to come that would allow them to fully implement the aspects of their programs that had been hampered by the pandemic.

ELEVATE programs observed positive inroads in facilitating cultural shifts within child support. Leadership and staff described observing some positive changes in agency culture, particularly in the interactions between child support agency staff and NCPs. They noted that requiring a new form of outreach by enforcement staff to NCPs helped some staff to build greater empathy for the challenges NCPs face, and that success stories helped child support agency staff observe how providing help to parents could be beneficial to the agency as a whole and for reducing the number of NCPs on their own caseloads. Counties highlighted the role ELEVATE can play in giving caseworkers a positive problem-solving tool to help NCPs resolve barriers and demonstrate the agency's interest in helping NCPs succeed.

Recruiting participants into ELEVATE and maintaining their involvement represents a key challenge for programs. Across counties, recruitment and maintaining participant engagement were often described as the greatest challenges faced by programs. Aspects of these challenges included reaching NCPs successfully, obtaining buy-in to the program and building trust, and maintaining interest in continued engagement. Staff noted that the COVID-19 pandemic and effects on local economic conditions exacerbated these challenges, though some challenges, such as overcoming NCPs' perceptions about the child support agency, were likely to affect their program regardless of the pandemic. Leadership and staff identified promising practices to help overcome these challenges, such as engaging participants in new modalities; maintaining comprehensive contact information for participants; and taking steps to build rapport and positive relationships with participants.

Helping participants address complex barriers is an ongoing challenge. Many ELEVATE participants come to ELEVATE with limited work experience, employment-specific barriers to work (such as limited education and job skills), and also indirect barriers, particularly past incarceration, housing instability, substance use, and mental health needs. ELEVATE programs

were able to provide some services that helped to address these challenges directly. To help address challenges outside the scope of ELEVATE, staff sought local resources, building referral partnerships and leveraging the knowledge and networks of partners. Yet, some gaps in community resources persisted. Building and drawing on resources that can help serve participants will remain a key focus area for programs in the years to come.

Next Steps

As ELEVATE continues, the evaluation team will collect information across multiple sources to inform the final implementation report (due June 2024), which will examine how programs functioned at full implementation. We will also conduct focus groups with ELEVATE participants and associated custodial parents. Additionally, the evaluation team will generate a final impact report, summarizing the effects of ELEVATE on participant outcomes.

I.   Introduction

The child support system is intended to help ensure that parents who live apart from children contribute financially to their upbringing and well-being by establishing, enforcing, and collecting child support orders. Despite the importance of child support for many families, many noncustodial parents (NCPs), and especially parents of low-income children, have difficulty meeting their child support obligations (see, for example, Bartfeld & Meyer, 2003). As a result, most custodial parents (CPs) do not receive all of the child support owed to them (Grall, 2020), while many NCPs struggle to meet their own basic needs and carry substantial child support debt (Sorensen, Sousa, & Schaner, 2007). In recognition that the current approach to child support does not work for all families, some policy leaders, practitioners, and researchers have called for the child support system to try new and innovative approaches to serving families, particularly those that the system has struggled to engage and serve in the past. This has led to innovations nationally and locally, with some programs shifting emphasis toward serving the whole family, building relationships with customers, and helping NCPs address barriers to meeting their obligations (Cancian et al., 2019; Lippold & Sorensen, 2011; Miller & Knox, 2001).

Consistent with this shift, in 2019, the Wisconsin Department of Children and Families (DCF) provided funding, via a waiver from the federal Office of Child Support Enforcement (OCSE), to five Wisconsin counties to test an innovative approach to serving families involved in the child support system. This program, called ELEVATE (Empowering Lives through Education, Vocational Assessment, Training, and Employment), pilots new ways for the child support program to serve parents. ELEVATE provides a package of services to NCPs behind on their child support obligations in lieu of more traditional approaches that have relied primarily on enforcement actions to compel compliance.

ELEVATE's evaluation, called the Five County Demonstration Project (FCDP), documents this approach and tests the program's effectiveness. ELEVATE's evaluation includes an impact analysis, which will analyze the program's effects, and an implementation analysis, which documents how the program operated. This report summarizes implementation findings from the program's first year. Section II describes the community contexts in which ELEVATE is being implemented, ELEVATE partners, and leadership and staffing arrangements. Section III describes program eligibility, recruitment, and enrollment. Section IV describes key features of service delivery. Section V describes key successes, challenges, and areas in which additional guidance or support is desired by counties. Appendix A presents brief profiles of each county.

A.   The Child Support Noncustodial Parent Employment Demonstration (CSPED)

The ELEVATE program originated from a previous OCSE-funded national demonstration project, the National Child Support Noncustodial Parent Employment Demonstration (CSPED). Wisconsin was one of eight states to take part in CSPED. CSPED aimed to identify effective strategies for improving reliable payment of child support by unemployed or underemployed NCPs. The intervention was a child support-led program that included case management, as well as enhanced child support, employment, and parenting services. Wisconsin piloted projects in Brown and Kenosha counties under the title Supporting Parents Supporting Kids (SPSK). OCSE competitively awarded a cooperative agreement to the Wisconsin Department of Children and Families to procure and manage an evaluation of CSPED through an independent third-party evaluator. The Department of Children and Families chose the Institute for Research on Poverty (IRP), University of Wisconsin, and its partner Mathematica Policy Research to evaluate CSPED.

CSPED's impact evaluation found that the program led to modest declines in child support orders (consistent with services provided to "right-size" orders), smaller reductions in payments, and no significant changes in child support compliance. While the impact evaluation found some evidence of increases in earnings, the program had no impact on employment outcomes. However, CSPED also resulted in significant improvements in NCPs' attitudes toward the child support program and increases in NCPs' sense of responsibility for their children (Cancian et al., 2019). Results from CSPED suggested that child support agencies can lead programs that provide a more comprehensive set of services than traditionally offered within the realm of child support, with the potential to support meaningful change in the lives of NCPs and families. Findings also suggested that further innovation was needed to identify a service array that improves employment, earnings, and child support compliance.

B.   Wisconsin's ELEVATE Program

Given Wisconsin's experience with SPSK, DCF pursued and received a waiver from OCSE, as well as additional state budget funds, to continue to operate programs in Brown and Kenosha counties and to extend programming to three additional counties under the new name ELEVATE. Three counties—Marathon, Racine, and Wood—applied, and DCF selected all three to take part in the pilot (Figure 1).

The main goal of ELEVATE, as articulated by DCF in the program's Funding Opportunity Announcement (FOA), is to increase NCP compliance with child support obligations by increasing NCP participation in the workforce. DCF also explicated an operational goal of shifting agency culture from a "traditionally enforcement focused [approach] to a more supportive and engaging approach to NCPs," as well as a goal of increasing NCP engagement in the lives of their children. DCF

Figure 1: Wisconsin's ELEVATE Counties

specifically sought county child support agencies "prepared to shift or who wish to further advance their agency's relationship with NCPs to one that is more supportive and engaging through internal cultural change and strong partnerships with other community organizations and agencies (Wisconsin Department of Children and Families, 2019, p.1)." Counties were also required, as a condition of receipt of funding, to take part in the evaluation of ELEVATE (Wisconsin Department of Children and Families, 2019).

Child support agencies were, as described in the ELEVATE Policy and Procedures Manual, tasked with ensuring that the core components of the ELEVATE program be delivered to participants, either directly through child support agency staff, through a contract with third-party service providers, or through a combined approach. Core services include enhanced child support services, case management services, employment services, and parenting education (Figure 2). DCF specified that all participants were expected to receive some services, and others could be provided as staff found appropriate (Wisconsin Department of Children and Families, 2020).

Figure 2. ELEVATE Services and Providers

Leadership, Oversight, and Coordination		
Child support agency		

Employment services	Child Support Services	Parenting Services
Employment services assessment Other employment services as needed	Enhanced child support services Parenting needs assessment	Parenting services Other services as needed
Child support agency or employment partner	Child support agency	Child support agency or parenting partner

Case Management Services
Case management, including needs assessment, domestic violence screening, referrals, progress monitoring, overview of expectations and responsibilities
Child support agency or partner

All counties began enrolling participants into ELEVATE and providing services in January 2020; study enrollment is expected to continue through September 2022. Study enrollment temporarily paused from March 17, 2020, until July 7, 2020, due to the University of Wisconsin–Madison's requirement that research with in-person components cease on account of the COVID-19 pandemic, and as counties adapted service plans (Figure 3).

Figure 3. ELEVATE Study Enrollment Period
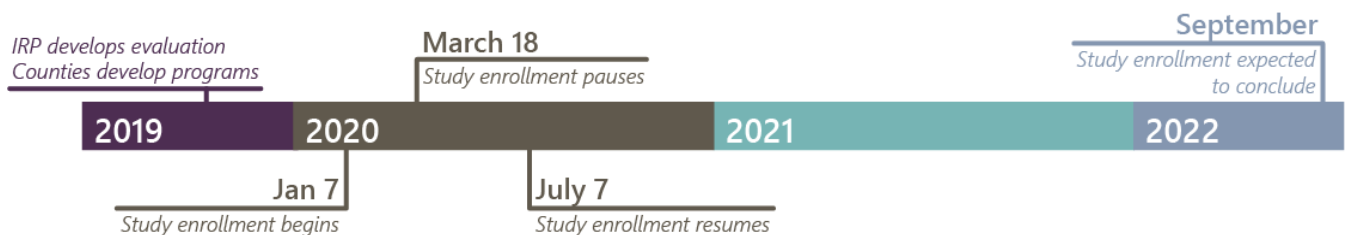
C.   Evaluation of ELEVATE

Terms and conditions of the waiver from OCSE required a rigorous evaluation of the program and Wisconsin DCF hired IRP to serve as the program's evaluator. The evaluation, called the Five County Demonstration Project (FCDP) evaluation (hereafter referred to as "the ELEVATE evaluation" or "the evaluation"), aims to understand whether ELEVATE program services improve NCP child support payments and compliance, employment and earnings, parenting, and attitudes towards the child support program. The evaluation will also generate information on how the programs operated. The information gathered will help inform decisions related to future investments in child support-led, employment-focused programs for NCPs who have difficulty meeting their child support obligations due to lack of employment.

The evaluation has two main components: an impact study, which will use quasi-experimental methods and measures drawn from administrative and survey data, and an implementation study.
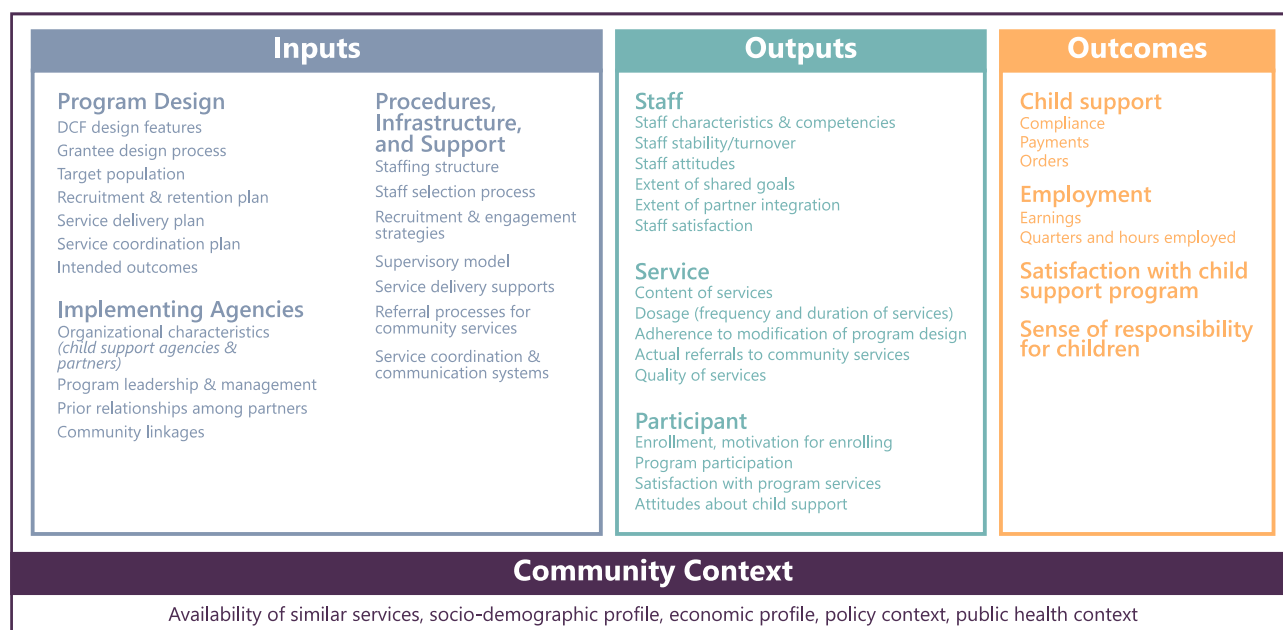
1.   Implementation study overview

The implementation study has three main objectives:

1.   To document program implementation and provide context to aid interpretation of impact evaluation findings,

2.   To identify inputs that may support high-quality implementation and higher levels of program participation; and

3.   To identify promising implementation strategies and common implementation hurdles.

In particular, the analysis will focus on procedures, infrastructure, and staff supports that research has shown to be associated with quality implementation (Fixsen et al. 2005; Meyers et al. 2012; Meyers et al., 2012b). These include systems for selecting, training, supervising, and supporting staff; referral processes; service coordination and communication systems; and data systems to support service delivery (See Figure 4).

Figure 4: Conceptual Framework for the ELEVATE Implementation Analysis

Inputs		Outputs	Outcomes
Program Design DCF design features Grantee design process Target population Recruitment & retention plan Service delivery plan Service coordination plan Intended outcomes **Implementing Agencies** Organizational characteristics *(child support agencies & partners)* Program leadership & management Prior relationships among partners Community linkages	**Procedures, Infrastructure, and Support** Staffing structure Staff selection process Recruitment & engagement strategies Supervisory model Service delivery supports Referral processes for community services Service coordination & communication systems	**Staff** Staff characteristics & competencies Staff stability/turnover Staff attitudes Extent of shared goals Extent of partner integration Staff satisfaction **Service** Content of services Dosage (frequency and duration of services) Adherence to modification of program design Actual referrals to community services Quality of services **Participant** Enrollment, motivation for enrolling Program participation Satisfaction with program services Attitudes about child support	**Child support** Compliance Payments Orders **Employment** Earnings Quarters and hours employed **Satisfaction with child support program** **Sense of responsibility for children**
Community Context			
Availability of similar services, socio-demographic profile, economic profile, policy context, public health context			

2.   Implementation study research questions

The ELEVATE implementation analysis will address the following research questions:

- What were the key features and characteristics of ELEVATE programs? Were any deliberate adjustments in program design made, compared to CSPED? How and why did programs change over time?

- What were the key features of the community contexts in which ELEVATE operated? How did they change over time?

- What staffing models, procedures, infrastructure, and supports were in place to facilitate implementation? How did these change over time?

- What services did ELEVATE participants receive, and how were they delivered? How and why did program services change over time?

- How did the COVID-19 pandemic affect program operations, participant enrollment, and service provision?

- What promising implementation strategies did ELEVATE programs develop? What implementation challenges did counties face?

3.   Data sources

The final implementation analysis will utilize multiple data sources and methods. These include semi-structured interviews with frontline staff and leaders, web-based surveys of frontline ELEVATE staff, baseline and follow-up surveys of ELEVATE participants, participant focus groups, data on program participation, and program documentation. For this report—an early look at implementation—we draw on semi-structured interviews, staff surveys, the baseline survey, service data, and program documentation, as described below.

- **Staff interviews.** The evaluation team conducted video interviews with 41 child support agency and partner staff from all five counties between March and May 2021.

- **Web-based staff surveys.** The evaluation team fielded a web-based survey from January through February 2021 in all five counties. The sample included all child support and partner and partner staff who provided services directly to participants. Across counties, 16 of 23 eligible staff invited to participate responded to the survey, for a response rate of 69.6%.[1]

- **Baseline survey of program applicants.** A baseline survey was administered to all program applicants prior to enrollment using computer-assisted telephone interviewing. For this interim implementation analysis, we draw on other evaluation products summarizing participant characteristics to describe NCPs enrolled in the program during the period covered by this report.

- **Service data**. Program staff tracked a subset of services provided to ELEVATE participants in an Excel spreadsheet and transmitted service data to the evaluation team each month. This report provides preliminary findings drawing on data collected through an early version of the services tracking spreadsheet, which was replaced with a more comprehensive version in August 2021.

- **Program documentation.** To understand DCF's vision and design specifications for ELEVATE, the evaluation team reviewed the ELEVATE funding opportunity

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[1]In addition to these 16 completed surveys, 2 additional respondents partially completed surveys. Partially completed surveys were included in the analysis.

announcement, ELEVATE policies and procedures manual, and notes from DCF's monthly technical assistance calls with counties.

4.   Analytic methods

Staff interviews were coded and analyzed thematically using a qualitative analysis software package, NVivo (Braun & Clark, 2006). We generated descriptive statistics to analyze data from staff surveys and service data in STATA 14.

D.   The COVID-19 Pandemic

Only two months after ELEVATE's implementation launch, the COVID-19 pandemic upended virtually every aspect of work and life in Wisconsin and the broader United States. Governor Tony Evers declared COVID-19 a public health emergency on March 12, 2020; he ordered schools to close a day later; and issued Wisconsin's Safer at Home order directing Wisconsin residents to stay home unless engaged in essential activities on March 24, 2020 (Wisconsin Department of Health Services, 2020a; 2020b; 2020c). Subsequent modifications to the order allowed for some relaxing of the initial requirements, such as by allowing limited in-person retail offerings, though bars and restaurants remained closed for in-person service (Wisconsin Department of Health Services, 2020d) until a Wisconsin Supreme Court decision lifted the order on May 13, 2020 (Supreme Court of Wisconsin, 2020).

The pandemic in Wisconsin caused substantial changes to the public health and economic environments in which ELEVATE programs were implemented and held important implications for ELEVATE program operations. Unemployment rates grew substantially at the pandemic's outset, growing from 3.3% at the start of the implementation period in January 2020, to 14.8% in April 2020 (Department of Workforce Development, 2021). Notably, three of the five Wisconsin counties with the highest rates of confirmed positive cases in the early phase of the pandemic— Brown, Kenosha, and Racine—were counties participating in ELEVATE. By fall of 2020, even counties with relatively low positivity rates at the outset saw numbers grow significantly (Knapp, 2021), and nearly every county in Wisconsin received a designation of "critically high" COVID-19 activity (i.e., more than 1,000 cases per 100,000 residents) by November 2020 (Wisconsin Department of Health Services, 2021).

ELEVATE counties varied in their response to the Stay at Home order, which impacted their ability to provide the full set of ELEVATE services. Other IRP research identified that during the pandemic, child support agencies experienced difficulty connecting with customers at a time of heightened need for many (Vogel & Yeo, 2021). Court operations were broadly disrupted for months and enforcement processes were often scaled back as agencies sought to avoid making a bad situation worse for struggling NCPs (Vogel et al., 2021). Child support agency staff found that many NCPs experienced job loss and encountered financial and logistical barriers to paying support (Vogel & Yeo, 2021; Vogel et al., 2021), but also perceived that federal expansion of unemployment insurance benefits helped offset expected payment declines (Vogel et al., 2021).

The pandemic also disrupted ELEVATE's evaluation activities. UW–Madison temporarily required all research with in-person components to cease, including ELEVATE's baseline survey. As a result, ELEVATE counties were unable to enroll NCPs into the study's evaluation from March 18, 2020 until July 7, 2020, when UW–Madison allowed research activities to resume with appropriate safety procedures in place. Prior to resuming study enrollments, all

counties provided DCF and IRP with confirmation that their programs had made adaptations to allow the full array of ELEVATE services to resume via in-person or virtual modalities.

At the time of data collection for this report, the COVID-19 virus continued to infect Wisconsin residents at alarming rates, and vaccination efforts had only just begun. Given the variation in county experiences with the pandemic, and differences in how counties implemented changes that could affect access to services (Vogel & Yeo, 2021), understanding the ways in which ELEVATE counties were forced to pivot to new modalities of service delivery and the consequences of the pandemic for program operations is a key area of focus for this report. Throughout the report, we describe changes agencies made in response to the pandemic and the extent to which those changes remained in place at the time of data collection.

II.   ELEVATE Community Context and Design Features

A.   Community Characteristics

The five counties selected to participate in ELEVATE varied across a broad array of characteristics, as intended in the ELEVATE FOA. As such, labor market conditions and characteristics of county residents differ across implementing counties (Appendix A). The ELEVATE service array is designed to provide a more comprehensive, intensive, and integrated set of services to noncustodial parents than otherwise available. The community contexts in which ELEVATE programs operate have resources that NCPs could access on their own if eligible, independently of the ELEVATE program, though the extent to which these resources were available varied across counties.

- **Some employment, parenting, and case management services are available to NCPs in ELEVATE counties outside of ELEVATE, though offerings and accessibility vary.**

Staff described several involuntary and voluntary means through which NCPs can access related services outside of ELEVATE. In three counties, NCPs behind on their obligations can be court-ordered into Wisconsin's Children First program, which requires NCPs to participate in employment and case management services.[2] NCPs can also elect to utilize local job centers to search for jobs and attend workshops. Some NCPs can access employment and case management through nonprofit providers, community action agencies, or programs such as Wisconsin Works (W-2), Wisconsin's TANF program, or Wisconsin's FoodShare Employment and Training Program (FSET); however, these programs are not aimed specifically at NCPs, and have eligibility requirements with the potential to exclude some NCPs. Several counties have subsidized occupational training programs locally available for eligible individuals. On surveys, most frontline staff indicated that it was "not at all" or only "a little" difficult for NCPs to access case management and employment services outside of the ELEVATE program.

Staff in most counties reported having parenting classes available to the public, though in several others, staff described the ELEVATE parenting provider was the only purveyor of parenting services they were aware of within their counties. However, on staff surveys, most

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[2]A key difference between ELEVATE and Children First is that Children First participants are court-mandated into services (https://dcf.wisconsin.gov/cs/children-first). ELEVATE services, in contrast, are voluntary; participants are not subject to contempt on the basis of failure to participate in services alone.

staff characterized help with access and visitation or mediation as "somewhat" or "very" difficult to access outside of ELEVATE.

Staff noted that take-up of voluntary services outside of ELEVATE was typically low and often sporadic without monitoring and follow-up from a dedicated case manager. Staff expected that the supports provided by ELEVATE case managers, along with co-location and other strategies to coordinate services, would increase take-up of services among ELEVATE participants, and that direct connections between employment and child support services would help facilitate payments.

- **ELEVATE counties operate under the same state policies for setting and modifying orders, though some agency practices vary across counties.**

In Wisconsin, the child support program is supervised by the state and administered locally by counties. As a Wisconsin-administered program, ELEVATE child support programs all follow Wisconsin rules for setting and modifying child support orders. However, while operating within state and federal guidelines, counties have some flexibility to interpret policy and enact operations locally (Gentry, 2017).

In ELEVATE counties, as in Wisconsin overall, child support orders are set and modified via court order. Courts determine the child support amount based on a formula determined by state administrative rules, though the judiciary may deviate from these guidelines; an alternate set of guidelines determines order amounts for NCPs with low incomes (Gentry, 2017). Outside of ELEVATE, Wisconsin NCPs are eligible for review of their order every 33 months or when a substantial change to their circumstances occur. These rules all apply to ELEVATE participants. However, ELEVATE participants are eligible for expedited review of their child support order. On surveys, most frontline staff indicated that it was "not at all" or "a little" difficult for NCPs to access help with a child support case outside of ELEVATE. However, in interviews, staff noted that it can be more difficult for NCPs to know who to ask for help outside of the ELEVATE context and highlighted the expedited nature of desk reviews as a unique feature.

ELEVATE is designed to provide NCPs enrolled in the program with a reprieve from enforcement actions during their participation. While temporary relief from enforcement is a key feature of ELEVATE services, during interviews, staff in most ELEVATE counties described that in the years prior to ELEVATE, their counties had started using certain enforcement tools less frequently than in the past. Some staff noted that their counties had ceased using or used license suspension only rarely due to concerns about the potential for losing a license to impede an NCP's ability to pay. Additionally, several ELEVATE counties noted that their agencies had started to use contempt less frequently than in years past; however, not all counties shared this experience, and some staff in other counties characterized their county's general approach to enforcement outside of ELEVATE as "a bit heavy-handed." Because of the COVID-19 pandemic, all ELEVATE counties paused contempt hearings entirely for varying periods lasting at least several months up to the time of data collection, with counties generally resuming processes slowly and often through virtual modalities (i.e., Zoom or telephone).

ELEVATE programs also allowed counties to forgive state-owed debt in response to participants meeting specific milestones (e.g., for completion of program benchmarks and for making child support payments in full). DCF provided counties a pre-approved debt reduction incentive scheme, which included incremental milestones for completing parenting classes, job readiness activities, and making payments for a total value of up to $2,750. With regards to the business-as-usual child support context, however, staff in most counties noted that outside of ELEVATE,

their counties already routinely used forgiveness of state-owed debt as a "bargaining tool" with NCPs to secure payments on current support.

B.   ELEVATE Child Support Agencies

The characteristics of ELEVATE child support agencies, which play a crucial role in program oversight and leadership, service delivery, and recruitment of participants, also differed in some attributes, including some particularly relevant to program implementation. County IV-D caseload sizes, relevant for recruitment of potential participants, ranged from under 4,000 in Wood to nearly 17,000 in Racine (Table 1). DCF set enrollment targets taking into account a range of factors, including county size and previous program experience.

Table 1. ELEVATE county caseload sizes and study enrollment targets

County	IV-D caseload (as of September 2019)	ELEVATE study enrollment target
Brown	14,397	185
Kenosha	11,888	185
Marathon	5,419	206
Racine	16,822	233
Wood	3,841	195
Total (all counties)	52,367	994[a]

Source: Wisconsin Department of Children and Families, Division of Family and Economic Security (DFES) Administrator's Memo 20-05.

[a] Reflects enrollment targets revised as of July 2021 due to the COVID-19 pandemic.

- **ELEVATE child support agencies vary in their previous experiences with ELEVATE-related services.**

Brown and Kenosha counties previously participated in ELEVATE's parent program, SPSK. Leaders in these counties highlighted the importance of this prior experience in their decision to take part in ELEVATE; ELEVATE funding helped them to continue the efforts already underway within their counties to provide child support services taking an innovative approach. Leadership and staff in these counties also emphasized the value of this previous experience for implementing ELEVATE. They cited the value of learning to be flexible; gaining an improved understanding of what works for their agencies and participants through experience and customer input; and building buy-in among staff for a new approach to services by demonstrating the benefits of SPSK. After the launch of ELEVATE, Brown County was also selected to participate in a federal procedural-justice demonstration project aimed at improving process fairness for child support-involved parents.

While the three new counties did not have the experience of building and implementing a new program through SPSK, they had some previous experiences that they considered helpful for ELEVATE. For example, two of the three non-SPSK counties (as well one of the SPSK counties) had already implemented Children First. Most had previous experience referring eligible customers to locally available employment services through programs such as W-2 and FSET. Leadership in these counties described that they sought to participate in ELEVATE to access funding to help catalyze cultural shifts underway within their agencies and to provide services to noncustodial parents taking a more holistic and less punitive approach.

C. *Partnership Arrangements*

ELEVATE requires child support agencies to ensure that core program services are provided to participants, either directly through the child support agency, through a contractual agreement with a partner or partners, or through a combination of those methods.

- **ELEVATE counties use different partnership arrangements, with new and previous partners, to provide ELEVATE services.**

Across all models, the child support agency provided child support services and worked with one or more partners to provide employment, case management, or parenting services. In three counties, one or more partners provided all services outside of child support. In one county, a child support staff member provided case management, enhanced child support, and employment services for all ELEVATE participants and partnered with a public entity to provide parenting services. During SPSK, this county worked with a local employment provider to offer employment services to participants, but for ELEVATE decided that having employment and child support services offered in-house by the same individual presented efficiencies, facilitated communication and coordination across service types, and helped to ensure that child support remained the program's central focus. In the fifth county, a child support agency employee provided case management and employment services and coordinated with other child support staff to provide child support services and a partner agency to provide parenting services.

Child support agencies leveraged a combination of new and existing partnerships when establishing their programs, with two agencies partnering with new parenting providers and three agencies utilizing existing relationships with partners that were in place to implement Children First and other programs. While most partnerships were in place at the outset of the demonstration, partnerships with parenting partners took longer for several counties to implement, contributing to delays in implementation of parenting classes in some counties.

Partnerships yielded benefits as well as challenges for ELEVATE programs. ELEVATE staff described in interviews that engaging partners with a broad array of expertise and community connections helped to strengthen their county's service array. Program leaders particularly emphasized the benefits of working with longstanding partners with whom they had strong previous relationships, including ease of communication and established norms and trust. However, leaders also found that forming new partnerships could require significant investments of time and effort to ensure that partners understood the program, facilitate a shared vision and goals, and build successful approaches to communication. Several child support agencies also noted that partners sometimes entered the initiative with priorities that differed from their own.

The majority of staff reported understanding and valuing the role of their own organizations and those of ELEVATE partners in the program's operations. All frontline staff reported that the services provided by their own agencies were "very" or "extremely" important for meeting the ELEVATE program's goals, and nearly all (94%) reported the same for their partners. Over three-quarters reported understanding the roles of ELEVATE partners "very" or "extremely" well. Nearly all frontline staff (94%) reported feeling that it was appropriate for child support agencies to take the lead on employment programs for NCPs, though most (80%) were also open to employment agencies taking the lead.

- **Beyond ELEVATE partners, ELEVATE programs worked closely with other community providers.**

In addition to building formal partnerships with other providers to deliver ELEVATE services, ELEVATE programs also leveraged and built relationships with local community partners that could act as referral sources for services beyond the scope of ELEVATE. These included a host of public agencies, nonprofit and private service providers, and employers. On surveys, most frontline staff cited "very" or "extremely" strong partnerships with entities such as employers and employment training providers, mediation providers, public benefits agencies and other social service agencies, courts and legal aid providers, Departments of Motor Vehicles (DMVs), and community colleges. In contrast, more than half of staff members characterized their relationships with domestic violence service providers, mental health providers, emergency housing shelters, and public housing authorities as "not at all," "a little," or "somewhat" strong.

Because many ELEVATE staff came to ELEVATE from other county-administered programs that work with similar populations or provide similar services, staff often had existing relationships to draw on and leverage as they took on ELEVATE implementation. Further, leadership described having often interacted or collaborated with other community partners to varying degrees of intensity on other projects, with several counties routinely meeting with other community partners to talk about new initiatives underway or service offerings available through agencies. Staff and leadership cited these previous relationships as helpful building blocks for not only understanding the local service landscape, but also for easing the process of exchanging information, making requests for assistance, and facilitating referrals.

- **ELEVATE programs value and facilitate co-location, though some benefits have yet to be realized due to the COVID-19 pandemic.**

Given CSPED findings related to the importance of co-location, ELEVATE programs took steps to co-locate ELEVATE service providers within counties at the outset of the program to reduce the number of places participants had to visit to receive services. In all counties, programs' child support staff and staff providing employment services were located in the same building. In most counties, parenting providers were located offsite at the time of data collection, though some of these counties planned for parenting classes to be held on-site when in-person classes resumed. Beyond co-location with partners, most agencies were housed in the same physical space as other community agencies, facilitating connections to other local supports and reducing the number of trips required of a participant obtain help across providers.

Staff cited the benefits of co-location in interviews, noting that co-location helped them to connect participants more quickly and directly to other service providers, eased participant burden by reducing transportation-related barriers, reduced the possibility for participants to get "lost" moving from one service to the next, and facilitated ease of communication across staff. On staff surveys, 100% of co-located respondents indicated that co-location helped them to provide services "quite a bit" or "a very great deal," and 66% of those not co-located believed co-location would help them provide services "quite a bit" or "a very great deal."

While staff lauded the benefits of co-location in interviews, the COVID-19 pandemic also presented challenges because many staff who would typically have worked onsite moved offsite all or some of the time. Three child support agencies closed to customers beginning in March 2020; one stopped meeting with customers in staff areas; and one continued meeting with customers in-person throughout. One of those that closed to customers had resumed face-to-face meetings with all customers at the time of data collection, and all counties began

conducting ELEVATE intakes in July 2020. Employment providers generally followed a similar pattern. Parenting services transitioned to virtual arrangements in four of the five counties and remained virtual at the time of data collection, with discussions underway about possibly returning to in-person modalities; the fifth held in-person classes throughout the pandemic.

Even in counties that took face-to-face appointments with customers, staff described reduced in-person meetings due to staff virtual work arrangements and customer health concerns. At the time of data collection, in interviews most ELEVATE leaders and staff reported working remotely all or some of the time. On staff surveys, most frontline staff reported working remotely, with over a quarter working remotely all of the time and another 50% working remotely one to three days per week.

D. *Leadership and Staffing*

1. Leadership Models

In Wisconsin's ELEVATE program, child support agencies and partners each play a key role in program operations.

- **Child support agencies play a key leadership role in ELEVATE programs.**

Child support agency leadership is a key feature of the ELEVATE program; child support agencies are responsible, as specified by DCF, for providing leadership, oversight, and fiscal management. Across all five counties, one individual from the child support agency—often, but not always, the agency's director—was designated as the ELEVATE program lead, responsible for oversight and coordination of the program as a whole. The program lead coordinated enhanced child support services for ELEVATE participants and oversaw recruitment efforts among child support staff within the agency. Program leads sometimes drew on supervisors or other leaders within the child support agency to help oversee service delivery.

Two county child support agencies hired full-time, dedicated ELEVATE coordinators to lead ELEVATE services. ELEVATE coordinators (or case managers) were responsible for, among other duties that varied across programs, performing intake into the study and program, as well as monitoring participant progress. In the other three counties, partner agency staff served as ELEVATE coordinators or lead case managers. In these counties, partner agency leadership played a crucial parallel role by overseeing employment and case management services provided through their organization, providing oversight and support of the program's case manager housed within their agency, and working closely with the child support agency. From the perspective of frontline staff shared in interviews, supervisors and program leads played a critical role in their work, not only in running the program and providing leadership overall, but also in helping frontline staff to solve problems, acting as a sounding board for questions and difficult situations, and developing new connections and relationships within the county.

On staff surveys, 100% of frontline staff identified one individual as their program's leader and indicated that they knew to whom to go with questions about the program. Over half of frontline staff reported taking part in a one-on-one meeting with their program lead once a week or more, and nearly 75% reported participating in a group-based meeting with their ELEVATE program leader once per week or more. Staff reported high levels of satisfaction with their program's leader, with over 75% of frontline staff reporting on surveys that "lack of good leadership" was not a challenge for their program.

2.   Staffing Models

ELEVATE programs were given latitude to determine how to organize the frontline staff involved in providing ELEVATE services.

- **Leaders aimed to hire customer-focused, empathetic staff in support of program goals.**

Prior to ELEVATE's launch, program leaders had to hire new staff, or move staff in other roles within their agencies into new roles, in order to fill ELEVATE positions. When describing the attributes of frontline staff who they sought for ELEVATE, leadership described looking for individuals with a strong ability to collaborate with partners and work as part of cross-functional teams; experience providing services drawing on principles of compassion, empathy, and equity; strong customer service skills; who supported ELEVATE's goals and vision; and whose goals and approach to their work aligned with ELEVATE's customer-focused approach.

> *"I think you can teach employment skills; you can teach people who we want you to partner with. It's harder to teach disposition and kindness and that attitude of, 'We want the best for you,' you know, 'We want you to succeed.' You don't want to have somebody coming in [to the case manager role] who has a negative judgment about people who use public services or government assistance, or who blames people for their own problems… I don't want anybody being talked down to or condescended to. I want people to treat people with unconditional positive regard. And so, I'm always just kind of looking to make sure that that's how they're providing their service."*
> —Program Lead

In describing the staff they sought to fill supervisory roles, agency directors described looking for leaders with experience interacting with similar populations or working on similar programs to provide high-quality services, but also highlighted the importance of supervisors who were successful mentors willing to work with relatively new staff; and collaborative problem-solvers, with an orientation towards ensuring that teams take a nonjudgmental, compassionate approach to service delivery.

Many ELEVATE frontline staff and supervisors came to ELEVATE with case management experience. Within the ELEVATE coordinator role, two staff members had previous experience working in child support. Within both counties that had administered SPSK, several staff members who provided SPSK services also provided services through ELEVATE. Several staff had backgrounds providing services through other programs that serve individuals in need of employment services, and sometimes NCPs specifically, such as Children First.

- **Most counties experienced turnover in key roles early on.**

A common challenge cited by program leadership during the first year of program operations was turnover in key staffing roles. Three programs experienced turnover in the role of ELEVATE coordinator early in the program's implementation, and a fourth experienced a temporary staffing change due to a change in the ELEVATE coordinator's personal circumstances. Turnover introduced key challenges such as disruptions to the recruitment and intake process; difficulty maintaining connections and continuity with participants; and gaps in knowledge as new staff acclimated to the role. Counties experienced turnover as particularly disruptive when a back-up had not been trained to fill the role, causing disruption to service delivery as counties moved through the process of finding a replacement.

- **Partnerships leverage specialization and staff expertise, but also require alignment of organizational priorities and cultures.**

In interviews, leadership and staff highlighted the relative trade-offs of different staffing models. In counties that consolidated employment, case management, and child support services within the child support agency, staff emphasized that this model allowed for streamlined communication, reduced the challenges of inter-agency coordination, and provided the coordinator insight into how a participant's needs and barriers were related. However, this arrangement also at times created workload challenges, particularly as caseloads grew. Further, this model presented risks if the case manager were to leave, given the centrality of that individual in the program's operations, particularly if back-ups were not trained and kept up-to-date on details of the caseload. Programs that worked across child support agencies and multiple partners emphasized the benefits of each partner having a specialization and experience in their respective fields, but also noted challenges related to communication and collaboration that sometimes arose when working across partners with different approaches and priorities.

3.   Preparing Staff to Do the Work

A key task for leadership at the outset of the ELEVATE program, and throughout the program's implementation as new staff came on board, was helping staff to understand the purpose and goals of the ELEVATE program, how it worked and who was eligible, and the potential value leadership expected the program to yield. This included gaining the buy-in not only of staff providing services directly to ELEVATE participants, but also to child support enforcement workers and other support staff expected to make referrals to the program. Building buy-in amongst child support staff was particularly a challenge for counties that had not participated in SPSK. Leadership and staff in former SPSK counties described that SPSK had "changed the fabric" of child support services in their counties and had already helped many staff transition to new ways of working. Further, they felt transitions to new ways of working and already having an alternative service delivery approach in place helped to build trust and confidence among NCPs that an offer of service from the agency was genuine.

- **Leaders shared information and facilitated training to prepare staff, partners, and communities for ELEVATE.**

Staff and leadership described a number of steps that they took to help prepare staff for ELEVATE's implementation. First, programs shared information with staff who would support ELEVATE's work but not work directly through the program, as well as with community partners, through presentations and meetings. Counties who participated in regular meetings with other community service agencies discussed using these forums as opportunities to share information about ELEVATE at the program's outset and on an ongoing basis.

Additionally, for staff assigned to work on ELEVATE, leadership shared information through email and meetings. ELEVATE staff also reported receiving training on ELEVATE specifically, as well as a host of other topics to support service delivery (Figure 5). In interviews, leadership described UBUNTU

> *"We have this [monthly meeting] for all the different areas—it's child support, it's economic support, it's W-2, it's FSET, it's WIOA. [Our employment provider] is there. Everyone shares out information about what's new in their program or what's newly available to customers. So, if someone maybe is getting FoodShare benefits and is a child support payer, they can also possibly be looked at for additional resources in ELEVATE, or vice versa. We use that as a way to get more referrals if possible, and to share information. Because we may not be in contact with all clients who need the resources."*
> —Program Lead

training on incorporating dignity, empathy building, and awareness of intersectional identities into practice as particularly helpful and well-timed, given that many conversations were happening nationally and locally throughout 2020 related to racism, oppression, and equity. Frontline staff typically characterized their training as helpful and effective.

Figure 5. ELEVATE Staff Training Participation Since ELEVATE's Launch

ELEVATE policies and procedures — 72%
UBUNTU training on interacting with participants — 66%
Child support — 61%
County's ELEVATE parenting curriculum — 61%
Providing services in a virtual format — 61%
Domestic violence — 50%
Wisconsin Works Program — 44%
Preparing parents for employment — 38%
Mediation — 33%
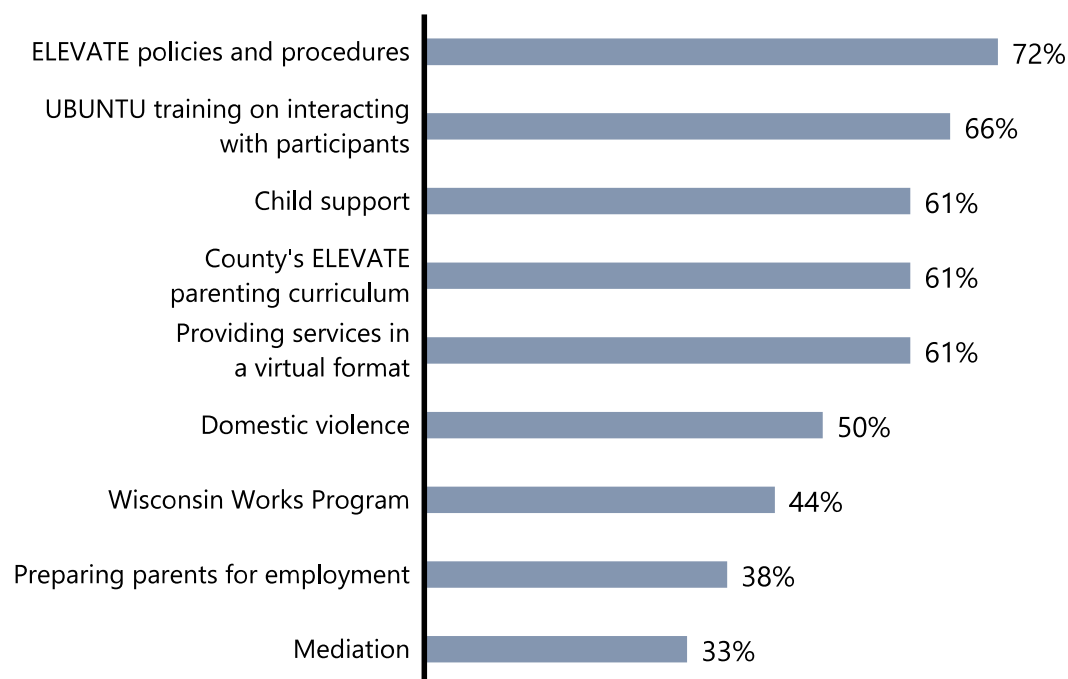
When asked on surveys to identify areas in which they desired additional training, frontline staff most often cited training on helping parents learn to find and keep work; helping participants with criminal records to find jobs; recruiting employers to work with participants with multiple barriers to employment; and handling situations involving potential domestic violence.

- **Leaders and staff generally described understanding ELEVATE's purpose and sharing a common set of goals.**

Across staff and leadership, interview participants highlighted several core goals. Many identified the primary goal as helping NCPs find and keep work, particularly in better-paying and rewarding jobs aligned with their interests, and identifying and addressing individual barriers to work and paying ordered support. Leadership and staff also frequently cited helping NCPs improve their relationships with children, co-parenting relationships, and family functioning overall as key goals in addition to helping NCPs to improve

> *"At the end of the day, I want them to be able to live a self-sustaining life, be able to pay the support that they've been ordered to pay, understand why they're paying that support, and then have somebody they can come to for help if they have questions. Because it's a complex system."*
> —ELEVATE Coordinator

their circumstances and well-being. Child support agency staff in particular described a goal of helping participants to better understand their child support obligations, how the system works, and options for getting help. Program leads in several counties noted that ELEVATE's focus on serving the whole family and improving NCP well-being aligned well with cultural shifts already underway within their child support agencies leading to a more holistic approach to serving families.

The ELEVATE staff survey asked frontline staff about the extent to which they understood the program's purpose and participating agencies' roles. Nearly 90% of reported that the purpose of ELEVATE was clear to them. Although nearly 90% of staff reported that they understood their agency's role on ELEVATE "very" or "extremely" well, staff were slightly less confident regarding the roles of partners, with 76% reporting understanding partner roles "very" or "extremely" well.

- **ELEVATE programs took steps to "keep child support at the center" of the program and integrate child support across service domains.**

Many ELEVATE program leaders identified maintaining a focus on the ELEVATE program's primary goal—improving compliance with formal support obligations—as an important aspect of ELEVATE leadership. Child

> *"I think you have to make sure that you're making the connection between the child support and the employment. If you're doing the child support, and you're doing the employment, but you're not connecting the two, I don't know that it's going to be as meaningful, because part of the disconnect of the payment is not understanding how the order came to be what it was… It's saying, 'The agency is offering these services because you're struggling, and this is how we need to get you on the right track. Do you know what your order is? Do you know what you need to earn to fulfill your order?'"*
> —Child Support Supervisor

support leadership noted that all partners come to ELEVATE with different priorities, cultures, and goals, and "keeping child support at the center" required the active engagement of leadership. Some shared strategies such as working with parenting providers to discuss child support issues in parenting classes, answering questions about child support during parenting classes, and working with employment staff to emphasize the relationship between child support and employment in service delivery. One county enacted a staffing model that involved the same individual providing employment and child support services to facilitate a smooth

transition from obtaining new employment to attaching a new wage withholding order. In interviews, staff and leadership in counties that took steps to weave child support as a central focus throughout the program generally reported feeling that their overall package of services was well-integrated.

- **Counties varied in how they assessed whether ELEVATE is meeting its goals.**

To monitor the success of their ELEVATE programs, leaders looked to a variety of progress indicators. Leaders described in interviews that they monitored the number of enrollments and referrals made, employment obtained and average earnings, and extent of engagement with program services. At the time of data collection, one county was designing a participant satisfaction survey to help understand participant experiences with ELEVATE. Specific measures used varied across counties and leaders in several counties noted that from their perspectives, programmatic success went beyond specific measures to include "intangible or not visible" indicators of success and less easy-to-measure ways in which the program affected participant lives and agency operations. Despite variation in whether or how they defined success, leadership generally reported few challenges in monitoring the success of their local ELEVATE programs.

> *For me, I'm looking at enrollments; I'm looking at entered employments. But it's not always about the entered employment. Sometimes it's just about the progress month to month. Like, we had someone that was a little resistant, and maybe they missed some appointments. Now they're at least showing up for their appointments, and maybe the next month they start completing their assignments. You know what I mean? It's just progress. Progress for one person is different than what progress is for another. Success for one person is different than what success is for a different person."*
> —Program Lead

4. Coordination and Communication

The COVID-19 pandemic introduced significant challenges for collaboration across ELEVATE service providers. As service providers incorporated remote work into their practice, they needed to find new ways to communicate within and across agencies about participant service needs and progress, as well as program operations. The pandemic also introduced unique challenges for new partnership relationships, particularly with parenting partners; staff in several counties noted that parenting programs had not yet launched or were just getting off the ground, and therefore communication routines with these partners were often not yet established.

- **The pandemic forced staff to use new methods of communication.**

As staff transitioned to working remotely, they needed to adopt new tools and practices to facilitate communication. Given the sudden nature of the pandemic, and the traditional in-office delivery of child support services in most counties, staff and leaders noted that they did not always have all of the tools that they needed to work effectively from home at the start of the pandemic, though experiences varied across staff and counties. They also obtained and trained staff on new electronic communication tools, such as Microsoft Teams and Zoom. As needed, agencies procured laptops and tablets for staff, as well as tools such as softphones and headsets.

By the time of data collection, staff consistently described having necessary equipment to work remotely, including platforms for communicating virtually with co-workers. However, access to

the internet remained a challenge for some frontline staff throughout the pandemic. Staff also noted security concerns associated with virtual work, such as ensuring that staff took proper measures to protect data while working offsite. Staff in several counties described that using virtual tools took them longer than providing services in person or required additional layers of coordination to ensure that in-office processes, such as mailings, occurred.

- **Despite challenges, staff generally reported successful communication with ELEVATE partners.**

Across counties, ELEVATE staff and leaders tackled a similar array of decisions as they sought to develop effective communication processes. These included fleshing out effective processes for potential participant referrals, sharing information about new participants across partners, and coordinating across agencies with different priorities and ways of working, sometimes for the first time. Establishing processes was not without challenges, particularly as staff transitioned to working remotely all or part of the time after the start of the pandemic. For example, parenting partners in particular highlighted a desire for streamlining and simplifying processes for referring participants to parenting classes and tracking information about referrals and attendance across agencies in a centralized manner. Staff highlighted five practices that helped facilitate effective communication: (1) regular communication through formal channels; (2) informal communication as needed across staff and leadership; (3) co-location; (4) documentation; and (5) using tools to sharing information about participant needs and progress.

First, many staff cited regular, consistent meetings with other ELEVATE staff as key to working together successfully. Some programs convened all ELEVATE partners; others met separately with employment and parenting providers. Meetings included convenings between staff and leaders to discuss priorities, successes, and challenges, as well as meetings with other frontline service providers to discuss participant progress and processes for working effectively. Staff reported that because of the pandemic, meetings that they likely would have held in person often took place by telephone or video throughout the initial implementation period.

Next, staff described communicating with each other informally through phone calls, text messages, emails, and Microsoft Teams chat features. Staff found these tools especially helpful during the course of the pandemic due to reduced opportunities to interact with each other informally in person. Some staff noted reduced communication with non-ELEVATE community partners who they might have otherwise encountered in regular in-person meetings or spontaneously within physical spaces, and as meetings shifted to virtual formats, some staff noted reduced community partner participation. While staff noted that they remained able to get information and answers to specific questions by email, some felt opportunities for spontaneous information-sharing and relationship-building with non-ELEVATE partners were reduced.

Additionally, staff who worked physically in an office cited co-location as a helpful tool for communicating and working together effectively. Co-location helped staff to get answers to questions quickly and problem-solve face-to-face when staff were on site together. Many staff who were co-located prior to the pandemic lamented no longer being able to easily communicate with other staff in person. Staff also noted that some of the benefits of co-location—such as encountering colleagues in informal situations for brief check-ins, camaraderie building, and ease of access to each other's office when issues arose—were somewhat diluted when public health conditions forced many staff to work off site. To address these challenges, ELEVATE coordinators reported using strategies such as making sure to seek out and talk with enforcement workers and other ELEVATE staff members on days they were in the office, and checking in by phone, text message, or email when they were not.

Further, agency leadership used strategies such as holding virtual group and individual meetings with staff, sending regular email updates to staff, and using virtual tools such as Microsoft Teams video and chat features, phone calls, emails, and text messages to check in with staff.

Counties also highlighted the importance of creating documentation, available to all staff members involved in ELEVATE, to answer questions and clarify processes. For example, counties developed tools and visual aids to document eligibility criteria clearly for staff involved in recruitment. Several counties also highlighted the ELEVATE Policies and Procedures manual as a helpful resource for ensuring that staff have information about the program and to resolve questions about state expectations. Counties also described developing their own internal training manuals, reference guides, checklists, and process flows.
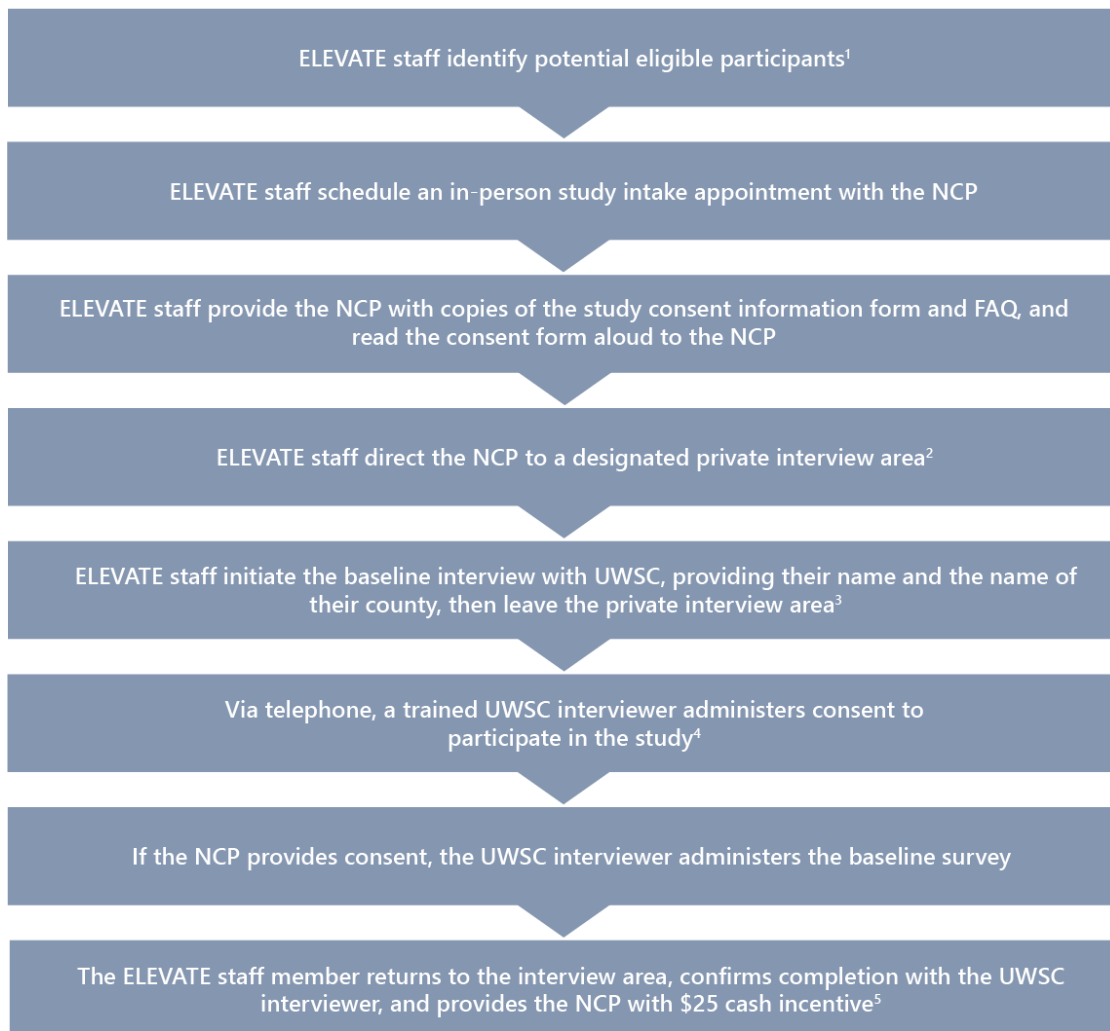
Finally, staff across counties described using electronic tools to track and share information about customers. Counties used Microsoft Word or Excel files to log and share case notes and participation information, county-specific data tracking systems, group email distribution lists, and in some counties, case managers pulled in supplemental information from KIDS (Kids Information Data System) or local data tracking systems. Most staff described that by using these strategies, they felt generally well informed and connected with the information they needed to continue providing services despite the challenges presented by the COVID-19 pandemic.

While staff found these tools helpful, they also noted challenges. In several counties, parenting facilitators in particular highlighted information sharing across agencies as a challenge due to different systems and technical limitations of various partners. Additionally, counties often tracked data across multiple state, county, and program-specific systems. While some counties felt double tracking was time-consuming but effective, staff in others counties expressed concern about the potential for information to be lost or omitted when entering across multiple systems, in addition to concerns about the time required to do so.

III.   ELEVATE Eligibility, Recruitment, and Enrollment

A key challenge in any demonstration is enrolling enough participants to hit study enrollment targets. For ELEVATE, the enrollment process begins with staff identifying potentially eligible participants and making a referral to designated ELEVATE staff. That staff member reaches out to explain the study and facilitates the consent and baseline survey process with the University of Wisconsin Survey Center (UWSC). Upon completion, ELEVATE staff provide the participant with a $25 incentive and commence program intake, then or later (Figure 6).

Figure 6: ELEVATE Study Enrollment Flowchart

ELEVATE staff identify potential eligible participants[1]

ELEVATE staff schedule an in-person study intake appointment with the NCP

ELEVATE staff provide the NCP with copies of the study consent information form and FAQ, and read the consent form aloud to the NCP

ELEVATE staff direct the NCP to a designated private interview area[2]

ELEVATE staff initiate the baseline interview with UWSC, providing their name and the name of their county, then leave the private interview area[3]

Via telephone, a trained UWSC interviewer administers consent to participate in the study[4]

If the NCP provides consent, the UWSC interviewer administers the baseline survey

The ELEVATE staff member returns to the interview area, confirms completion with the UWSC interviewer, and provides the NCP with $25 cash incentive[5]

[1] Staff may identify potential participants through: standard reports from the KIDS and WEBI systems, outlined case management, referrals from other programs, or self-referrals from interested participants.

[2] Each ELEVATE program has identified a private space with a telephone for ELEVATE participants to complete the baseline survey and consent process.

[3] Only staff who have completed Human Subjects training through the University of Wisconsin Institutional Review Board (IRB) are able to facilitate this process. Staff remain available nearby in case the participant has further questions or issues.

[4] At any time, the participant can stop the interview and resume the interview another time without having to restart the process.

[5] Receipt of incentives is generally tracked through cash transfer forms included in the incentive envelopes.

A.   Eligibility and Target Population

The ELEVATE Policies and Procedures manual specifies that ELEVATE programs were to target "un/underemployed NCPs that are not complying, or at risk of not complying, with the child support order(s) for participation in the program." The manual differentiates between NCPs who ELEVATE programs are to target for the *study*, and NCPs who fall outside of the target population but are also eligible for services outside of the evaluation (referred to as "Services

Only Exceptions"). To be considered eligible for the ELEVATE study, NCPs must meet the criteria below (Department of Children and Families, 2020).[3]

1. **Have an eligible child support order**, defined as "a monetary support order, for at least one open and workable case, in the ELEVATE county seeking to enroll him or her." Eligible orders include: (a) orders for current support (i.e., not arrears-only cases) or (b) newly entered or modified orders.

2. **Be non-compliant (or at risk of becoming non-compliant) with their child support order**, defined as: (a) the parent paid less than 50% of the ordered amount for at least 1 month (including those that have made no payments for at least 1 month) or (b) they made zero payments since order was entered or modified.

3. **Be unemployed or underemployed,** meaning that the NCP self-reports: (a) being unemployed at the time their court order is entered or modified, or (b) that being unemployed or underemployed causes them to be unable to pay or puts them at risk of being unable to pay, and/or (c) that improving their employment situation could help improve their compliance with their child support order.

4. **Be medically able to work** (defined as not receiving SSI or SSDI)

5. **Live close enough to access services in the enrolling county.** The NCP must live close enough to the county's ELEVATE offices to regularly access the full range of ELEVATE services available to be defined by the counties.

6. **Be fluent in the English language.**

7. **Be at least 18 years old.**

8. **Have a valid Social Security Number.**

Participants were also ineligible for ELEVATE if they received services through Brown or Kenosha counties' SPSK program, or if they were co-enrolled in Wisconsin's Children First program, or if they were previously co-enrolled in Children First and were currently under contempt.

The manual specifies that counties may also enroll some NCPs as "services only" exceptions, meaning that they are eligible to receive services through ELEVATE funding even though they were not participating in its evaluation. Specifically, counties may enroll NCPs with arrears only cases, or who live outside of the geographically eligible area, or who have limited English proficiency, or who are unable to take part in the baseline survey process due to COVID-19

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[3]The eligibility criteria language presented here reflects the most recently updated language in the ELEVATE Policies and Procedures manual. The language describing the criteria was revised in December 2020 in a collaborative effort by IRP and DCF. Changes included pulling criteria related to ability to work (#4 and #8) and child support order eligibility (#1) from the body of the manual text into the enumerated criteria, as well as explicating that an NCP must have a current support order in the county seeking to enroll him or her (#1); explicating where NCPs must live in relation to ELEVATE offices (#5); and reminding counties of the criteria NCPs must meet related to the baseline survey (#6) and UW–Madison's Institutional Review Board Requirements (#7).

related reasons as "services only" exceptions. Counties may also enroll NCPs who do not wish to take part in the baseline survey as "services only" cases. The manual also specifies that during the period of study enrollment, staff should prioritize recruiting study-eligible participants and enroll potential participants whenever possible into the study group. Staff described that the types of customers they encountered most frequently as ineligible for the study but eligible for the services-only group included NCPs without an order for current support and for arrears only; undocumented NCPs; parents who resided outside of the county or who did not have an active child support case within the county; or those already enrolled in other programs or actively under contempt.

Staff described that their use of eligibility criteria remained consistent even during the COVID-19 pandemic, though staff in some counties noted an increase in NCPs enrolled into the services only group due to unwillingness to visit the child support agency to complete the baseline survey required for the evaluation. While staff generally reported few challenges understanding and applying the eligibility criteria, staff sometimes experienced frustration when an NCP was interested in the program but did not meet the criteria for study enrollment. These frustrations were particularly heightened at times when overall study recruitment numbers were low within the county.

B.   Referrals and Recruitment

During the first year of ELEVATE operations, recruiting sufficient numbers of participants was a significant challenge for counties. Factors contributing to this challenge were communicating effectively about the program's purpose and goals, adequate staffing and referral levels to support recruitment, NCP interest in the program and perceptions of the child support program, and barriers to work and service engagement for many NCPs caused by the COVID-19 pandemic. In response to these challenges, counties refined their outreach approaches.

- **Child support enforcement workers served as a key source of ELEVATE referrals.**

Staff reported that the majority of ELEVATE referrals came from child support workers, including child support staff who work directly with ELEVATE participants, enforcement staff, front desk staff, and call center staff. Typically, a child support staff member would identify an eligible customer, then send information about that person to the ELEVATE coordinator or lead case manager to reach out to the customer and explain the program. ELEVATE program leaders encouraged child support workers to watch for NCPs on their caseloads who met the ELEVATE eligibility criteria, and in some counties, set quotas for the number of referrals each child support staff member was expected to meet. In several counties, leadership developed visual aides to remind staff of the program's eligibility criteria.

Child support staff often initiated referrals after identifying potentially eligible customers when working reports or in the course of routine work processes. The reports counties used to identify potentially eligible participants varied, such as reports indicating recent unemployment, the state-generated CUR-1 report (with counties using varying thresholds as targets for enrollment; for example, staff in one county described targeting NCPs paying 50% or less of their current support obligations, whereas another county targeted NCPs paying 80% or less), and, less often, the ELEVATE eligibility report created by the state. Several counties targeted outreach efforts at NCPs recently released from jail or prison, knowing that they would likely need help finding work and addressing child support issues. One county also used contempt dockets by screening cases appearing in court that day and sharing information about the ELEVATE program with potentially eligible customers prior to their court appearance.

Counties differed in their requirements for contact with participants prior to referring the case to the ELEVATE coordinator. In some counties, staff needed to make contact with the NCP and confirm interest prior to referral; in others, staff needed only to identify potentially eligible NCPs based on case characteristics. Staff noted trade-offs to these approaches; requiring contact and confirmation of interest, from the perspective of some staff, helped to improve the efficiency of the ELEVATE coordinator's outreach efforts by identifying potentially interested NCPs and ensuring that cases had working contact information. Without current contact information, ELEVATE coordinators sometimes experienced frustration attempting to locate better information, a potentially very time-consuming task. However, others noted that NCPs might be less willing to talk to an enforcement worker about the program than the ELEVATE coordinator and found it more effective when the ELEVATE coordinator made an initial outreach attempt.

- **ELEVATE leaders enacted a host of strategies to foster buy-in among child support staff who made referrals.**

Particularly for counties that had not participated in SPSK, gaining the buy-in of child support staff involved in the recruitment process could be challenging. ELEVATE staff noted several challenges in generating referrals from child support staff. One aspect of this challenge was helping enforcement staff who did not work on ELEVATE, but were crucial for generating referrals, to see the child support agency's role, and their own roles within the agency, differently. Staff in some counties noted that caseworkers with an "old school" mentality sometimes did not see the value of the program or were sometimes reluctant to call potential participants on the phone and instead preferred passive forms of outreach, such as mailings.

> *"It takes reminders, and you have to weave it through the narrative. That's why we really need the entire agency, because if the caseworker missed it in conversation, if they call back next week, the support information center is going see that they don't have an employer on file and that's a red flag to them to say, 'Oh, do you have a new employer to report? Oh, you don't? Then let me tell you about this program… Some people need more convincing than others to join. Some people aren't joiners. They don't want the help. But once they are in, they're like, 'Oh, this isn't that intimidating.'"*
> —Child Support Supervisor

Additionally, ELEVATE staff noted that it was sometimes difficult to ensure that child support staff routinely remembered to share information about the program with NCPs and make referrals to ELEVATE, particularly in counties that had not implemented the SPSK program previously. Staff characterized these issues as less prevalent in counties where the SPSK program pre-dated the ELEVATE program and was already a part of the agency's routine offerings. In these counties, many staff had already worked through initial resistance to a new model prior to ELEVATE's implementation.

To help address these challenges, leadership and frontline staff worked to reinforce messaging about the program and its goals to child support and other staff involved in recruitment. In counties that also ran Children First programs, leadership emphasized the need to work with child support agency staff to understand the differences in the two programs, especially that ELEVATE (in contrast to Children First) was a voluntary program rather than court ordered. Perspectives of enforcement workers involved in recruitment in counties that also offered Children First often complemented leadership's perspectives on the importance of clarifying the difference between the two programs.

Counties also shared information about program successes and milestones as a way to ensure that the program stayed at the forefront; to highlight individual and departmental recruitment successes; and to share set and adjusted ELEVATE recruitment targets. ELEVATE coordinators shared these updates via email or in meetings. In interviews, enforcement workers across most counties described noticing and appreciating this information-sharing when it occurred. Some expressed a desire for more information about the outcomes of their referrals; in particular, enforcement workers became frustrated when they made a referral and didn't receive information about whether the NCP enrolled and participated in services because this left them uncertain about whether or not it was appropriate to use enforcement tools for NCPs who did not comply. Despite perceiving feedback efforts as useful, ELEVATE coordinators and leadership cautioned that as caseloads grow, providing individualized updates will likely become quite time-intensive for coordinators.

> *"I got a lot of flak [for working on SPSK] back in the day from some coworkers that didn't believe in the program at the time. They didn't want to help people. Child support was way different back then. And I came into enforcement and kind of interrupted the way they did things. [SPSK] changed things."*
> —Child Support Enforcement Worker

- **Following up on ELEVATE referrals requires time and persistence.**

ELEVATE coordinators reported several challenges related to following up on ELEVATE referrals in addition to the aforementioned challenges related to obtaining accurate contact information. Additionally, coordinators reported that the referrals they received sometimes did not meet study eligibility criteria, though also noted that the accuracy of these referrals tended to improve with time. Additionally, ELEVATE leadership in some counties felt that enforcement workers screened out potentially eligible cases without making contact due to their prior interactions with the NCP; for example, an enforcement worker might decide not to discuss ELEVATE with a particular NCP because of their perceptions of his or her willingness to work. To address this challenge, ELEVATE leadership in these counties described encouraging enforcement workers to make the referral anyway, allowing the ELEVATE coordinator the opportunity to explain the program and its potential benefits.

ELEVATE coordinators in several counties reported that once a potential participant was identified, text messages were as an especially promising outreach strategy in the context of the COVID-19 pandemic, though they also noted that agencies needed to have accurate phone numbers (a piece of contact information subject to frequent change) for this strategy to be successful. One county in particular highlighted the time burden that resulted from needing to document every interaction with participants as a deterrent to texting, which frequently involved a series of short interactions.

- **The COVID-19 pandemic created challenges for generating referral streams outside of child support.**

In addition to child support staff, frontline staff reported that partner agencies, particularly employment partners, sometimes made referrals. At the time of data collection, counties were also seeking to build referrals from other providers, such as parenting partners, local probation and parole offices, and public assistance programs. Staff made referrals to the ELEVATE program most commonly via telephone or email; the ELEVATE coordinator or another designated case manager would then follow up with the potentially eligible participant. Particularly toward the end of the initial implementation period, counties also reported an increasing number of self-referrals and referrals from current program participants.

> *"One of the biggest things I was looking forward to was meeting with community partners in person and creating those working relationships. That kind of came to a screeching halt with COVID. We were going to have an open house and invite community partners, and that didn't happen. You know, you tell one community partner about a program and all of a sudden maybe they send you two or three referrals.... It's one of those things where you got to be in someone's face, probably three, four, or five times before the program really sticks with them and you start getting more referrals from outside sources. So, we've been pretty much isolated to where our referral sources have been simply in-house."*
> —Program Lead

While counties used warm hand-offs under some circumstances, staff felt that the COVID-19 pandemic had impeded their ability to enact this strategy due to many staff working remotely. Whereas staff previously might have physically walked a participant to the ELEVATE coordinator's office to facilitate this warm hand-off, when working off-site, several counties attempted to replicate this process by making a direct phone transfer to the ELEVATE coordinator. This strategy, however, was not always successful, depending on the coordinator's availability. Staff in several counties also shared that the COVID-19 pandemic impeded referrals by limiting child support agency opportunities to share information with community partners who, in normal times, might have served as a valuable referral source for potential participants.

- **Beyond referrals, ELEVATE programs used an array of outreach strategies to recruit potential participants.**

In addition to referrals, ELEVATE programs used a number of outreach strategies to recruit participants into the program, such as cold calls to potentially eligible parents; text messages and emails; mailings and other print material; hanging up fliers and posters in public spaces such as probation and parole offices, libraries, and public assistance offices; internet ads or information postings; and presentations about the program to other organizations or within the community. One county added information about the program to its automated inbound call system, and several placed a running ad for the program on the TVs in their lobbies.

> *"A lot of times I feel it is, you know, maybe they didn't appear at the first court hearing and, you know, the order got set at a certain way. And we give them all the tools and all the resources they need to change it and they don't follow through. So, then they're angry and upset, you know? They don't want anything to do with us or any program that we're offering."*
> —Program Lead

- **Helping NCPs to see child support differently represented a key challenge for recruitment.**

Another recruitment challenge ELEVATE programs encountered was overcoming NCPs' negative perceptions about or prior negative experiences with the child support program. Staff noted that for some potential participants, prior negative interactions led them to suspect the motives of the ELEVATE program or believe that the program could not have anything positive to offer them. Several staff in counties with Children First programs noted that some participants were reluctant to become involved with ELEVATE out of concern that their participation would result in a court order that could create future system entanglements for them. Staff also noted that when child support orders were set without NCPs' full participation in or understanding of the process, and when NCPs did not understand how to request a modification, their frustration and feelings of unfair treatment sometimes impeded their willingness to comply with the order, as well as their willingness to engage with the child support program through programs like ELEVATE.

- **Some counties worried that they lacked enough potentially eligible participants to meet enrollment targets, or lacked adequate recruitment staffing resources.**

Staff and leadership in several counties felt that they lacked sufficient numbers of potentially eligible NCPs to meet study enrollment targets. One county, which had not previously participated in SPSK, noted that their total county caseload was smaller than most other ELEVATE counties, and they therefore found it more difficult to locate potentially eligible NCPs. Another county, which participated in SPSK, found that they had served many NCPs through previous initiatives, rendering those NCPs ineligible to participate in ELEVATE. Staff in one former SPSK county, which had used court-ordered work search as a vehicle for identifying potentially eligible NCPs and sharing information about SPSK, did not use this strategy for ELEVATE, which they felt hampered their ability to identify potential participants. Additionally, across several counties, after COVID-19 pandemic restrictions eased and as local economies began to rebound, staff characterized their local job markets as sufficiently robust to allow many NCPs to find work on their own, reducing interest in ELEVATE services.

Some counties expressed concern that the survey component of the intake process affected their ability to recruit. ELEVATE coordinators experienced frustration when potentially eligible NCPs declined to participate after learning about the survey or, on rare occasion, terminated the survey mid-way through.

Additionally, leadership and staff in some counties felt that the number of staff involved in the recruitment process was insufficient for meeting recruitment targets. They noted that following a referral, the recruitment process required considerable time and effort on the part of the ELEVATE coordinator, and some felt that having more staff involved in recruitment and intake would have facilitated a quicker response to referrals to increase the likelihood of enrollment. Some staff also described that the hours of their ELEVATE program's operation were inconsistent with some potential participants' schedules and expressed interest in having more staff available to perform intake over a broader array of hours.

- **The COVID-19 pandemic intensified some recruitment difficulties and introduced new challenges.**

Staff emphasized significant challenges for recruitment caused by the COVID-19 pandemic. Across counties, staff generally reported that the pool of participants interested in taking part in ELEVATE was smaller than prior to the pandemic due to concerns about health risks and child-care issues. They also felt that expanded unemployment insurance benefits allowed some customers to take a period off of work to deal with these challenges, rather than needing to rush back to work on account of lack of income. As the economy began to recover, staff in some counties felt that job openings were plentiful on account of labor shortages, allowing NCPs to find work more easily on their own outside of the program. Further, during the pandemic, counties eased or limited enforcement and often stopped attending court in person, which some staff felt reduced the opportunity for enforcement workers to engage participants in the course of routine enforcement.

Additionally, staff described increased challenges related to contacting potential participants due to the pandemic. Walk-in traffic and drop-ins, previously an important source of potential participants, came to a stop for agencies that closed and dwindled in agencies that stayed open. They noted that contact information for potential participants changed more frequently due to housing instability and difficulty paying regular bills, making it more difficult to reach potential participants. Further, many staff were working remotely some or all of the time during the pandemic and experienced delays in getting the equipment needed to reach participants. When they were able to make calls or send texts by phone, staff sometimes found that participants believed their calls to be spam or sought to avoid talking with the child support agency, making it difficult to reach them. Additionally, avenues that staff had hoped to utilize to generate referrals, such as community events and local community organizations, were more difficult to leverage as many entities in the community closed.

Finally, when the University of Wisconsin required face-to-face enrollments in all research studies to cease, some counties stopped enrolling potential participants entirely while others enrolled potential participants into the ELEVATE services-only group as an alternative. Staff in some counties noted that this interruption required "start-up time" when recruitment resumed in the summer of 2020 as staff were out of practice with recruitment processes and the ELEVATE program fell "off the radar" of community partners. Staff in several counties also expressed frustration that from their perspective, the pause in enrollment led to a missed opportunity to engage struggling customers.

- **Promising recruitment practices included following up swiftly on referrals and emphasizing program benefits tailored to customer needs.**

Staff reported that referrals and other recruitment methods were most likely to be successful in yielding enrollment when the person or information emphasized the potential benefits of the program; when participants seemed especially interested in the program; and when follow-up on the part of the ELEVATE coordinator occurred quickly after initial contact. Staff highlighted the importance of honing their "pitch" explaining the potential benefits of the program and the uniqueness of the opportunity to participate and tailoring it to the NCP's circumstances. Staff felt supports related to obtaining employment, especially individualized assistance, state-owed debt compromise, and the temporary enforcement reprieve were most attractive to NCPs.

C. *Enrollment Progress*

DCF set an initial enrollment goal of 2,000 participants into ELEVATE across all counties and across the study and services-only groups. Initially, DCF and IRP planned for 1,100 ELEVATE participants to be enrolled into the ELEVATE study group, between January 2020 and March 2022. Due to the interruption in study enrollment caused by the COVID-19 pandemic, DCF and IRP extended the study enrollment period to end in September 2022. Additionally, DCF and IRP reconsidered enrollment targets and revised the overall target to 1,080 study enrollees. This includes 86 study group participants who were enrolled between January 2020 and March 2022, and 994 study group participants to be enrolled between July 2020 and September 2022. The revised projected enrollment targets across counties are 199 study participants in Brown County; 206 in Kenosha County; 223 in Marathon County; 251 in Racine County; and 201 study participants in Wood County. At the time of data collection—as of March 31, 2021—ELEVATE counties had enrolled 314 participants into the study, achieving 29% of the total enrollment target. Enrollments have not been evenly distributed across counties (Table 2).

Table 2: Number of Study Enrollments by County and Month, January 2020–March 2021

Month	Brown County	Kenosha County	Marathon County	Racine County	Wood County	TOTAL
January 2020	6	7	3	10	5	31
February 2020	6	8	8	6	7	35
March 2020	2	6	6	2	4	20
July 2020	3	2	1	5	3	14
August 2020	8	3	12	6	2	31
September 2020	9	7	4	7	1	28
October 2020	8	3	1	4	4	20
November 2020	3	1	1	4	3	12
December 2020	9	5	4	3	5	26
January 2021	8	8	4	3	4	27
February 2021	9	7	9	3	4	32
March 2021	6	4	13	6	9	38
TOTAL	77	61	66	59	51	314

Figure 7 shows progress towards ELEVATE study enrollment targets as of March 2021.

Figure 7. ELEVATE Study Enrollments by County through March 2021 Compared to Total Enrollment Targets
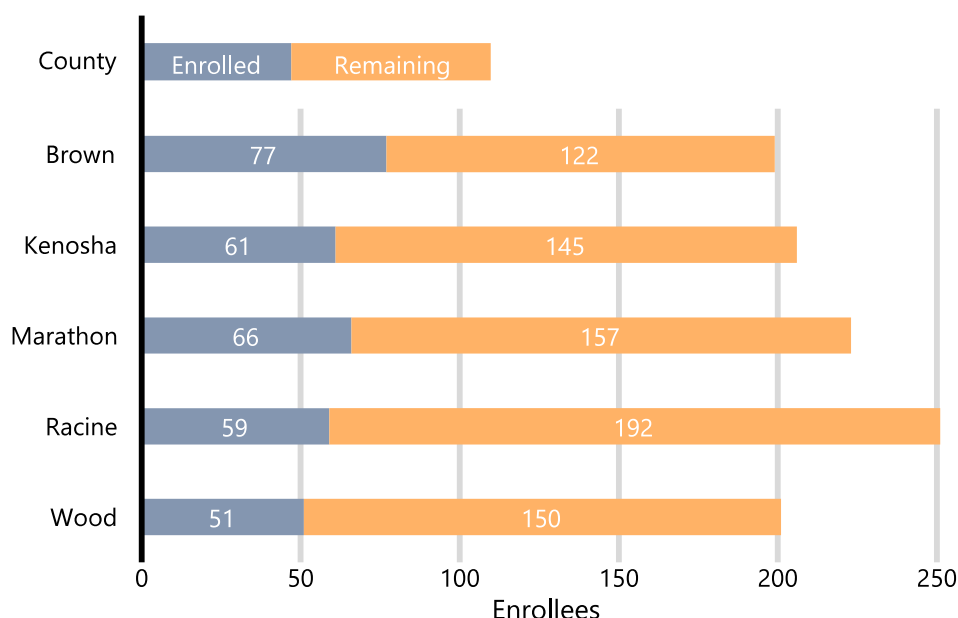
D.   Characteristics of Enrolled Participants

In the first year of the evaluation, the ELEVATE study team examined the characteristics of early study participants in order to help counties better understand their backgrounds and needs. The most recent profile of participant characteristics looks across a number of domains including demographic characteristics, child support and employment-related information, and participant well-being, drawing on data from the first 218 participants enrolled through December 28, 2020. Overall, this early profile revealed that ELEVATE participants face a number of challenges, including high order amounts relative to earnings, low levels of education, and over 80% self-reporting a criminal record. Nearly a third reported mental health struggles and physical health problems, and over half reported economic hardship in the 12 months prior to enrollment. Most reported experiencing barriers to work and paying support, such as transportation issues, limited job skills, and having a criminal record (Costanzo et al., 2021).

• **Many ELEVATE participants experience multiple and complex barriers to work and paying.**

In interviews, staff reported that many participants enrolled in ELEVATE struggled with multiple barriers to work. One commonly-cited issue was a history of criminal justice involvement; staff noted that theft charges were particularly difficult to overcome with employers as, in the words of one ELEVATE coordinator, "no company wants to get stolen from." In one county in particular, staff noted that while some employers have become more receptive to hiring NCPs with criminal backgrounds, NCPs are not always aware of this and, in the words of one program lead, "… have a mindset of, 'I have a felony; I'll never get hired.'"

Other frequently cited issues included housing instability; transportation barriers, including not having a license or vehicle, having a suspended license, and not living near public transportation; lack of job skills and work experience, training, and education; and mental health issues, particularly struggles with anxiety. These perceived barriers were echoed on staff surveys. Staff also reported that some NCPs who lacked experience looking for work "aren't applying themselves enough" to the job search process and found that some were easily deterred by application processes. Further, staff noted that while some NCPs were able to find work on their own, they lacked the experience or skills to manage difficult situations that arose at work, leading them to quit or no-show rather than attempt to work through issues. Across all counties, staff noted a need among participants for, in the words of one ELEVATE coordinator, "someone to support them" as they navigated new and challenging processes.

> "They don't have a steady job. A lot of them have very little education. They're in and out of jail or prison. They have addiction issues. They're homeless. They have too many children with too many orders with different custodial parents and so, therefore, they have no motivation to work. The fact that they're working and 50% of their check is taken and it's still not coming anywhere near meeting the order…It's just, you know, a never-ending cycle that they're in. Maybe they don't have a relationship with their children, they aren't allowed to see their children, and the kids are used as, you know, weapons against the other parent."
> —Program lead, discussing participant barriers

Staff also noted in interviews barriers to paying child support beyond employment alone, including discomfort interacting with the child support program and courts; owing child support across multiple families; and limited contact with children sometimes reducing willingness to pay ordered support. Several staff highlighted the issue of high-burden orders, or orders comprising a substantial portion of an NCP's income, as both a barrier to willingness to work as well as a barrier to attempting to pay the support that they owe. Staff noted that many of these barriers not only affected NCPs' abilities to work and pay support, but also to meet their own basic needs. Staff emphasized that addressing underlying barriers such as homelessness or housing instability, substance use, mental health struggles, and transportation barriers is a necessary precondition for helping participants find and keep work.

- **The COVID-19 pandemic exacerbated existing barriers for some NCPs and yielded a new pool of NCPs in need of help.**

Staff noted that the COVID-19 pandemic introduced a host of challenges for NCPs. Staff described sectors in which many of the NCPs served by their agencies are typically employed as particularly hard-hit by the pandemic (e.g., construction, manufacturing, tourism, and the food service industries), especially in the early stages. In addition to reduced hiring opportunities and work hours, particularly in the early stages of the pandemic, staff noted that some NCPs had young children or school-aged children at home, or new childcare responsibilities due to the work needs of a spouse or partner. Staff found that some NCPs, or NCP family members, had medical issues that made returning to work during the pandemic risky. Others found that mental health issues were exacerbated or emerged in response to the stress and isolation caused by the pandemic; staff also reported that office closures also limited access to mental health supports during the pandemic and lengthened wait times.

> *"The issue of the pandemic is not necessarily prohibitive in terms of NCPs' abilities to secure employment. But there are some NCPs that find themselves in circumstances where they are concerned about COVID exposure and transmission for health-related reasons, for themselves or someone living in their household. In different times, we didn't have that health-related component. We had so many more child-care related issues or issues related to criminal conviction, transportation, homelessness. Now it's another barrier that has hit a new group of people that might not have had barriers to employment before."*
> —Program Lead

In addition to creating new barriers for finding and keeping work, staff in several counties noted that the COVID-19 pandemic contributed to a shift in the composition of individuals served by their county's ELEVATE programs. From the perspective of staff, individuals who had generally not had difficulties paying their child support or staying employed in the past lost jobs due to the pandemic. Some of these NCPs sought help through ELEVATE. Some staff perceived that in contrast to customers typically served by their programs prior to the pandemic, these NCPs had fewer complex barriers impeding their ability to find and keep work, and generally needed less assistance targeted at re-entering the workforce.

IV. ELEVATE Service Delivery

A. Services Overview

The ELEVATE service model includes four primary service domains DCF expected counties to provide to participants: (1) enhanced child support services, (2) parenting services, (3) employment services, and (4) case management services. While counties were expected to provide services in all domains, DCF allowed counties considerable latitude in determining what services to make available through their ELEVATE programs, and within programs, which services were appropriate for a specific participant. As such, in interviews staff sometimes characterized their program's service array as a "menu" of choices customizable to the needs and interests of a particular participant, rather than a package of services all participants were expected to receive.

In interviews, staff also emphasized that local service contexts varied across their counties, leading to differences in the services available through community resources beyond ELEVATE, and therefore differences in their core program models. Some counties had an array of non-ELEVATE partners available to refer participants to for help; however, others did not, and therefore needed to find ways to incorporate services beyond the core ELEVATE model into

their own service arrays if they wished to make them available. Examples included financial literacy, mediation, and job readiness. Further, staff emphasized that the strength of community partners varied across counties. For example, although some counties had strong employment providers in their community, with a broad array of resources ELEVATE customers could access, others perceived their local programs to be difficult to access or under-resourced.

B.   Overall Service Receipt and the COVID-19 Pandemic

The COVID-19 pandemic presented considerable challenges to counties in implementing ELEVATE services and caused counties to adjust service modality, format, and content. Whereas counties had planned for most activities to occur in-person, when in-person options were limited, counties needed to shift toward virtual modalities to sustain service delivery, such as telephone, text, email, and video. Some counties transitioned exclusively to virtual modalities, while others made in-person options available in combination with new ways of working. On staff surveys, frontline staff estimated that they spent 24% of their time interacting with participants occurred in-person in an office setting and the rest occurring through a virtual modality. Most commonly, these virtual interactions took place over the telephone; less often, they occurred via video meeting, phone, or text message.

- **Staff celebrated successes in adapting to virtual service modalities, though were often eager to resume offering more in-person options.**

Overall, staff and leaders celebrated that their rapid adaptations to virtual modalities allowed them to continue providing services to customers in a time of great need. After a brief transition period in which counties often described reduced interaction with customers, most counties found that they were able to resume most services. While counties had planned for some group-based activities, such as parenting classes and, in some counties, job readiness classes, the pandemic curtailed group convenings. Some counties had just started to resume group-based activities at the time of data collection, primarily online.

> *"I think the biggest success [with virtual service delivery] was just the fact that we were able to keep services going, with very few staff and very few customers in the office. So, making that transition and all of the collaboration that we needed to do to do it."*
> —Program Lead

While counties found that they were able to continue providing most services available directly through ELEVATE, albeit with some interruptions and delays, they also found that some services they had planned to refer customers to were no longer available due to the pandemic. For example, job training programs offered through partners often were put on hold or canceled.

Many staff expressed relief and appreciation for having virtual options to work with participants, as they believed their efforts to be helpful, particularly in a time of significant economic hardship. Most staff hoped to maintain some aspects of virtual offerings that provided flexibility to connect with participants more frequently and by multiple methods. They also anticipated returning to in-person offerings when public health conditions allow.

- **Staff perceived that virtual modalities presented challenges for some customers and some services, but for others, improved service accessibility.**

Staff described that obtaining access to and using the necessary tools for virtual interactions was difficult for some ELEVATE participants, particularly those living in rural areas. Approximately 36% of frontline staff on surveys described that it was "very" or "extremely" difficult for participants to obtain regular access to the internet as well as to a phone, and 31% noted that it was "very" or "extremely" difficult for participants to find a private place to talk when interacting virtually. Staff noted that many participants lacked the necessary technology to take part in video meetings, and that some areas within counties had spotty cell coverage. Staff also noted that some participants simply preferred in-person interactions to virtual modalities.

> *"I prefer in-person services just because I think you're able to establish more of a rapport with individuals. Sometimes it takes several appointments to establish that trust, especially with some of the clients that we serve because a lot of them have been through the system…Sometimes it's better to do that in person. And then, some of our customers also don't have iPhones or don't have access to a computer. So, having virtual visits is a barrier for them."*
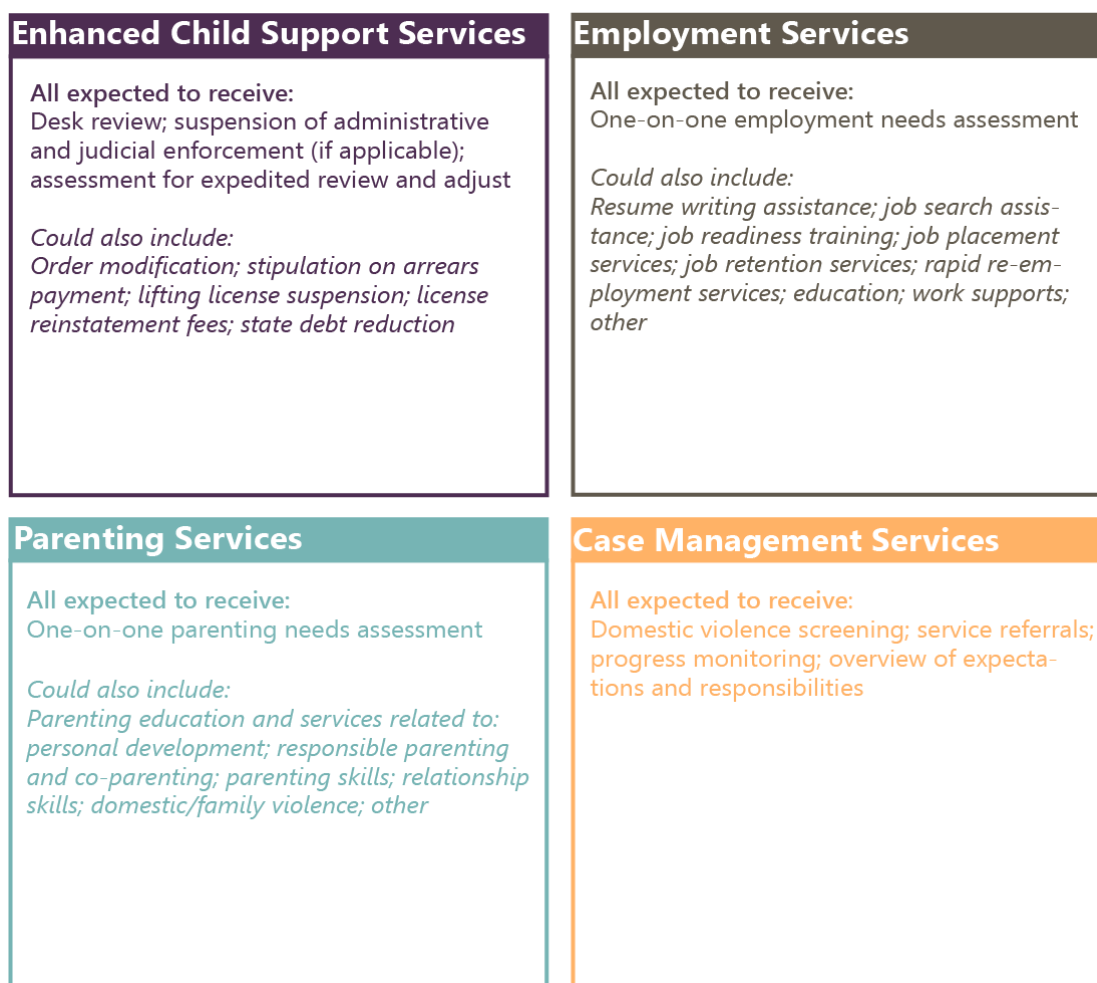> —ELEVATE Coordinator

Staff also described that virtual options worked better for some services than others, and perceived that difficult conversations, or conversations on complex topics, were sometimes more difficult virtually than in person. Staff lamented the lack of opportunity to build rapport with customers in person early in the process. In addition to rapport building being more difficult, staff described more impediments to holding participants' full attention and more difficulty gauging participant reactions throughout the course of an interaction. Some staff also noted more difficulty holding participants accountable and keeping them engaged in services when they occurred virtually; they perceived it was easier for participants to "drop off" from virtual platforms. Staff also described that work supports were more effectively and quickly provided in-person than virtually and shared that they sometimes experienced impediments to staffing cases or sharing information with partners without opportunities for in-person interaction.

However, staff also noted that virtual service options allowed some participants to overcome barriers to engaging in services in person. Across interviews and staff surveys, the top barriers to in-person services cited by staff included the amount of time required for the participant to get to the office from their home, especially for those in rural areas; transportation barriers; child care or other caretaking responsibilities; concerns about getting sick; physical or mental health challenges, particularly anxiety; and discomfort with agencies. Staff also described having more frequent interactions with participants who stayed engaged using virtual tools than they otherwise might have through in-person services alone, due to the ease of sending and receiving communication from participants via text message or email outside of one-on-one meetings. Some staff also reported working outside of regular business hours during the pandemic, which they found made it easier for participants to reach them.

C.   Services Offered through ELEVATE Programs

DCF provided parameters about services all ELEVATE participants were expected to receive within each of the four main service categories and the flexibility to augment these services with optional offerings (Figure 8). These offerings often differed across counties and, by design, differed across participants. In this section, we describe the services ELEVATE programs described providing in the first year of implementation.

Figure 8. ELEVATE Service Model

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Enhanced Child Support Services

All expected to receive:
Desk review; suspension of administrative and judicial enforcement (if applicable); assessment for expedited review and adjust

Could also include:
Order modification; stipulation on arrears payment; lifting license suspension; license reinstatement fees; state debt reduction

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Employment Services

All expected to receive:
One-on-one employment needs assessment

Could also include:
Resume writing assistance; job search assistance; job readiness training; job placement services; job retention services; rapid re-employment services; education; work supports; other

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Parenting Services

All expected to receive:
One-on-one parenting needs assessment

Could also include:
Parenting education and services related to: personal development; responsible parenting and co-parenting; parenting skills; relationship skills; domestic/family violence; other

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Case Management Services

All expected to receive:
Domestic violence screening; service referrals; progress monitoring; overview of expectations and responsibilities

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1.   Tracking and Reporting Service Data

For the purposes of the evaluation, ELEVATE services are tracked by ELEVATE coordinators in an Excel spreadsheet provided by the IRP team. Data from these spreadsheets are transmitted from counties to the IRP team each month. The goal of tracking these data is to reflect the amount and types of services provided by each county.

The first version of the services tracking spreadsheet, which was used to generate the numbers provided in this section of the report, was minimalistic in design in response to concerns raised by counties and DCF about data collection burden. It captured:

•   Date of service and service provider;

•   Employment services provided, modality, and duration;

•   Parenting services provided and whether the provider received ELEVATE funding for the service;

•   Work supports provided, monetary value, and modality of provision; and

- Referrals provided.

The evaluation team planned to gather information about date, duration, and length of parenting classes from parenting providers and information about child support services from the Kids Information Data System (KIDS). Case management services (beyond those reflected in other categories) were not captured.

In the course of data collection for the initial implementation analysis, the IRP team identified a number of challenges related to service-data tracking within counties that limit the data on service receipt that we present in this report. First, across most counties, staff had varying levels of uncertainty or confusion about where and how to record services. Staff identified that the entry categories available to them did not align well with the services they offered through their ELEVATE programs, and some desired a more detailed tracking system to monitor service provision within their counties. For this reason, while we share preliminary information derived from the original ELEVATE service tracking spreadsheet below, we present these initial findings with caution and with several caveats. First, the data reflect only employment and parenting services broadly, along with referrals made and work supports provided (not case management services or child support services). Next, given county reports of difficulty knowing where and how to track services in the early version of the spreadsheet, we expect high levels of inconsistency and inaccuracy in data tracking across counties, limiting the reliability of this data. Finally, we are unable to present data on specific services provided.

Given these caveats, Figure 9 below highlights the proportion of ELEVATE participants (enrolled from January 2020 through December 2020) who received any ELEVATE services in their first 6 months of enrollment, as aggregated into the four tracked within the original version of the services spreadsheet categories—employment services, parenting services, work supports, and referrals to other programs. Most participants received at least one service of any type, and approximately half of participants received any service in person. About one-third received one or more work supports, and one-quarter received one or more referrals to other organizations. Whereas most participants received one or more employment services, only 8% had an entry indicating receipt of one or more parenting service of any type. However, we note that many ELEVATE coordinators expressed uncertainty about whether and how to enter parenting services, suggesting the possibility of under-reporting of actual participation in parenting classes.

Figure 9. ELEVATE Participant Receipt of Any Service in First Six Months of Enrollment
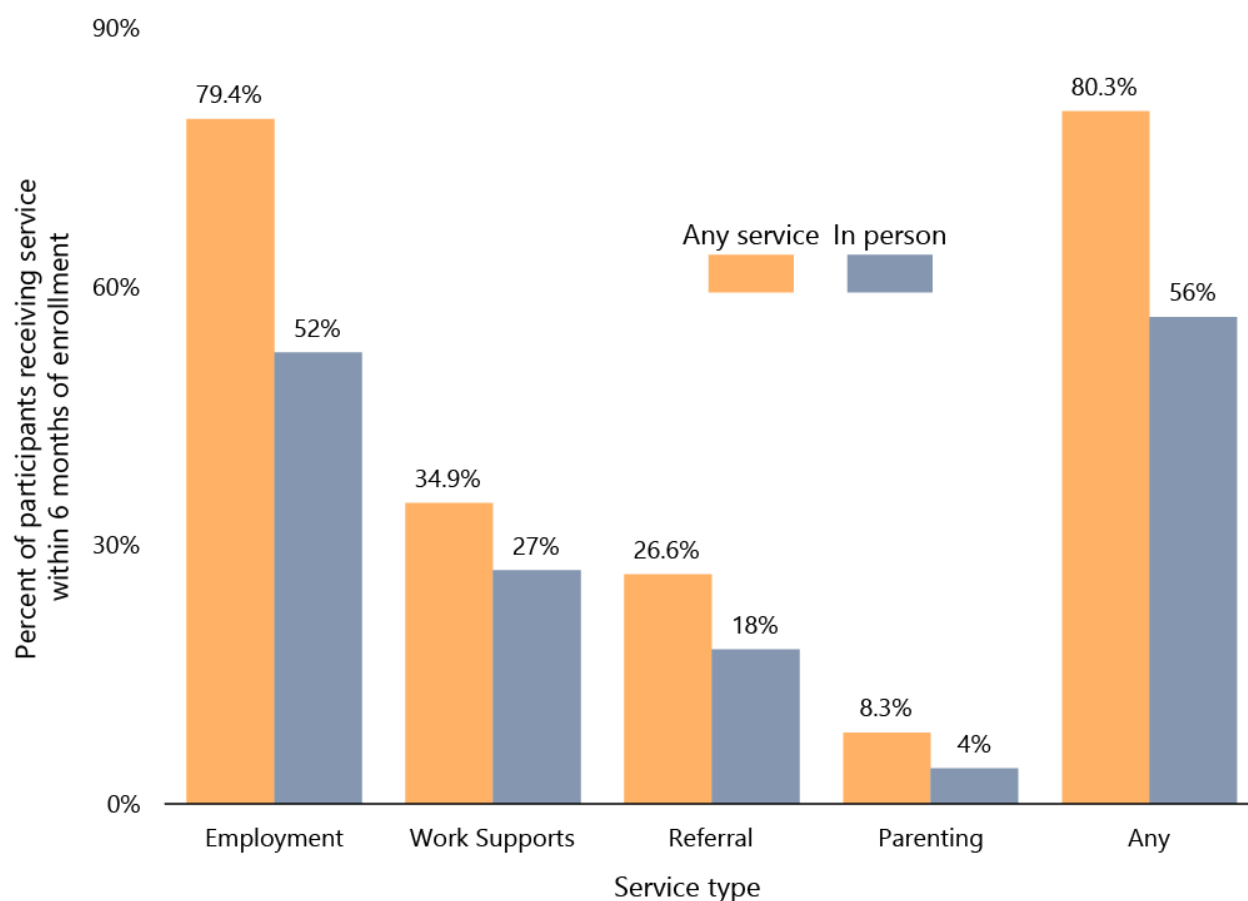
In response to these concerns about the usability of the data and county interest in gathering more detailed service information to help inform internal tracking efforts and programming, the ELEVATE evaluation team made substantial changes to the services tracking spreadsheet and released a new version in August 2021. Changes included better alignment with the broad categories of services offered through ELEVATE; the addition of various case management services informed by county input on services provided; refined subcategories to better align with services provided by counties; and a glossary of definitions to facilitate consistency. We hope that using these improved tools will provide data of sufficient quality to draw on for the final implementation analysis. The final implementation analysis will also draw on multiple data sources related to service receipt not currently available, e.g., the ELEVATE follow-up survey and administrative data from the KIDS system on child support system actions.

2. Case Management Services

Case management services are a key feature of ELEVATE programs. As specified by DCF, all ELEVATE participants are expected to receive the following case management services: an overview of expectations and responsibilities, progress monitoring, service referrals, and domestic violence screening. ELEVATE's lead case managers—ELEVATE coordinators—are also responsible for enrolling participants and performing initial intake assessments, determining service needs, performing outreach to CPs, and monitoring their progress throughout their time in the program. In two counties, ELEVATE coordinators were employed by the child support agency. In three counties, they were employed by a partner organization. In all but one county,

ELEVATE coordinators also provided employment services to ELEVATE participants and in one county, the ELEVATE case manager also provided child support services. Across counties, case managers coordinated with other service providers regarding services they did not provide directly.

- **Case managers worked with participants to assess needs and interests, set goals, and establish benchmarks for monitoring progress.**

For ELEVATE study participants, case management services typically began on the day of intake into the study. Following study enrollment, case managers would either begin the assessment process with the participant immediately or schedule an appointment to conduct the initial assessment at a subsequent appointment, which often occurred over the telephone. Initial assessments generally involved informal assessments aimed at covering the topics identified through WWP, a parenting needs assessment, and provision of work supports and referrals for which needs were identified. In most counties, the initial assessment fed into the creation of a written action plan, in addition to or separate from an employment plan. This plan served as an important benchmark for progress monitoring and plans often evolved as participants progressed and goals evolved.

> *"Be persistent and patient. I think those are the two really big things. And be sure you aren't judgmental. You know, don't judge a book by its cover… be open to breaking down those barriers, and be flexible. It's important to be flexible and compassionate, and to be aware of the needs of the population you are serving."*
> —ELEVATE Coordinator

ELEVATE coordinators across counties described prioritizing action items based on areas of particularly high need identified during the initial assessment; for example, if a participant identified an immediate need for work supports or assistance coordinating with the DMV, staff described moving on these high-priority items as quickly as possible. This quick action both helped to initiate the process of addressing barriers, but also, from the perspective of staff, provided a tangible demonstration of their commitment to helping the participant.

Coordinators stressed relationship and rapport building as a key aspect of working with participants at this stage, as well as the importance of setting expectations for program participation. Case management services were typically provided through one-on-one appointments and occurred via virtual options such as telephone most often, or in some counties during the pandemic, in-person at the participant's request. To facilitate progress and maintain engagement, most counties implemented regular check-ins with participants, ranging from weekly to every few weeks, with other case management check-ins as needed to follow up on case issues or when the participant reached out to staff. Coordinators also followed up with other ELEVATE providers to track participant engagement in services.

> *"A lot of the intake is having the discussion with the customer and asking the right questions… it's really building that rapport with the person first. I always believe in, before I dive into a lot of the personal questions, or difficult questions, making sure that the person is comfortable with me and knows they can trust me. Then that way we can have those conversations and the customer will open up and tell you what they need."*
> —ELEVATE Coordinator

- **Domestic violence screening processes varied across counties.**

The approach counties took to screening for domestic violence issues varied across counties. In several counties, ELEVATE coordinators reported using Wisconsin Court System (CCAP) and other databases to identify indicators of domestic violence, but did not ask participants explicitly about domestic violence issues. Several described screening using informal or formal screening processes with participants during the initial assessment. One county reported not screening for domestic violence.

- **Collaboration with ELEVATE partners, and referrals to other community service providers, were important components of case management.**

Across counties, ELEVATE case managers emphasized the importance of working closely with other ELEVATE providers involved in a participant's case, assessing for individual participant needs and identifying connections to services that could meet those needs, monitoring progress, and communicating information to participants and other providers. ELEVATE coordinators in three counties noted spending considerable time staffing cases with non-ELEVATE partner organizations who serve ELEVATE customers through other programs, such as child welfare partners or partners to whom the ELEVATE coordinator makes referrals for more intensive employment services than those available through ELEVATE. One ELEVATE coordinator also described spending substantial time helping participants navigate the Section 8 housing voucher process, find housing, or attempting to keep participants from being evicted.

Across counties, ELEVATE staff described identifying resources to help address participant barriers and making referrals as a core component of case management. These included barriers directly related to employment and compliance, but also barriers indirectly related to work that make it difficult for participants to achieve stability and meet their own basic needs. Staff made referrals to other ELEVATE providers, such as parenting facilitators, as well as to community resources outside of ELEVATE. Referrals that staff described making frequently included substance use, housing assistance, education or literacy resources, employment training and credentialing programs, clothing assistance, public benefits or food assistance, other government programs such as FSET or W-2, legal assistance, and mental or physical health services. Less often, staff reported making referrals for disabilities or domestic violence services.

Practices for making and following up on referrals varied across counties and sometimes across participants or service needs. For example, an ELEVATE coordinator in one county described physically walking participants to referral sources located in or near the building whenever possible as a strategy for improving uptake. Another described identifying referral needs during the initial assessment, then consolidating them into a single email for the participant. Coordinators varied in the extent to which they followed up on referrals, with some viewing follow-though as the participant's responsibility, and others reporting following up on referrals when they saw them as particularly important to a participant's progress.

- **The COVID-19 pandemic made it more difficult for ELEVATE participants to access some community resources.**

Staff described that heightened demand, as well as program closures and resource limitations, made it more difficult for participants to access some resources typically available in the community. In particular, staff noted long waitlists for medical care and substance use and

mental health services. Staff in several counties noted that during the pandemic, many county providers experienced an increase in requests for assistance from members of the general public experiencing hardship, which sometimes meant ELEVATE participants had a more difficult time accessing community supports. Further, staff found that some programs or offices to which they typically referred participants closed or transitioned to virtual-only offerings, which limited ELEVATE participant uptake in supportive services.

3.   Enhanced Child Support Services

Enhanced child support services commenced shortly after an ELEVATE participant's enrollment. As specified by DCF, all participants are expected to receive a desk review, suspension of administrative and judicial enforcement if applicable, and an assessment for expedited review and adjust. DCF specified that other enhanced child support services could include order modification, stipulation on arrears, lifting child support holds on licenses, payment of license reinstatement fees, and state debt reduction.

> *"At first, I was a little bit worried about having just one worker [handle review and adjust for ELEVATE], and how time consuming it might be, because she also has her regular caseload. But once we started doing it, she was finding that so many of the orders were set at minimum wage or at the poverty guidelines, so it wasn't as time-consuming as we worried about at first."*
> —Program Lead

In some counties, participants' child support cases moved onto the caseload of ELEVATE coordinators or another dedicated ELEVATE child support worker. In others, participants remained on the caseload of their regular enforcement worker; staff in these counties highlighted the importance of communication between the ELEVATE coordinator and enforcement workers about participant progress and program status to ensure that enforcement staff knew whether it was appropriate to take enforcement actions at various stages of a participant's time in the program.

- **Staff reported performing desk reviews consistently and promptly after enrollment, though found that many participants did not qualify for a modification.**

ELEVATE coordinators either performed a desk review themselves or worked with a child support staff member to do so shortly after enrollment into ELEVATE. On staff surveys, frontline staff reported "always" performing desk reviews for participants (71%) or sometimes or most of the time (29%). Staff in nearly all counties described expediting reviews for ELEVATE customers; staff in one county did not. Staff described that if the participant appeared eligible for a modification, they then moved forward with initiating this process by engaging custodial parents and the courts as appropriate, generally expediting it by several months compared to the regular services environment. However, staff in most counties noted that many

> *"[Our agency's review and adjust specialist] handles all of the reviews in the agency, and she works them in the order that they come in, so she can meet her timelines. The people who are in ELEVATE, they are able to cut to the front of the line, because the ELEVATE coordinator does their own reviews. So, they get the quick turnaround…. At the end of the day, it's still the court's decision. But they are getting in front of the court a lot quicker."*
> —Child Support Supervisor

participants were not eligible for a modification due to most orders already being set as low as allowable by the guidelines.

A promising practice for expediting hearings highlighted by one county was the ELEVATE coordinator's ability to schedule hearings on ELEVATE-dedicated court calendars directly,

rather than working through the agency's review and adjust specialist. However, a challenge faced across counties was that the COVID-19 pandemic caused courts to close for a period of months or more across counties, sometimes contributing to delays in modifications.

- **Staff reported suspending enforcement tools when possible, though some participants did not qualify, or other barriers limited full uptake.**

Immediately (or within up to a week) after enrollment, ELEVATE coordinators also assessed, or worked with child support agency staff to assess, whether it was appropriate to suspend administrative enforcement tools. If participants stopped engaging in services, child support staff resumed use of these tools.

The action staff reported being able to take most frequently was lifting the child support hold on a driver's license. However, staff in three counties noted that their agencies rarely or never used license suspension as a matter of routine practice, due to concerns about the impact of license suspension on NCPs' abilities to work; therefore, many NCPs did not qualify for this service. Additionally, staff noted that in many instances, the child support hold was not the only barrier participants had to regaining their license; rather, fines and fees impeded license reinstatement for some, and other participants had an outstanding need for an Intoxicated Driver Program (IDP) assessment due to a previous Operating While Intoxicated (OWI) conviction. At the time of data collection, several counties provided assistance with certain types of reinstatement fees and fines.

> *We don't suspend people's driver's licenses here. That's a practice we stopped quite a while ago. We realized it was counterproductive… all we did was take away one of the tools they had to be able to find employment. So, we don't do that, and so that's not something that we are able to hang out there and say, hey, join this program and we'll end your license suspension, because we won't suspend it in the first place.*
> —Program Lead

While staff lauded enhanced child support services as a key area of programmatic support, as well as a helpful recruitment tool, staff in several counties also noted that suspension of enforcement tools sometimes caused confusion or frustration on the part of custodial parents. Staff found that custodial parents sometimes called them or responded in frustration to their outreach upon learning that enforcement tools would be suspended.

- **Staff viewed state-owed debt reduction as a helpful incentive, though many participants have yet to realize the full benefits.**

ELEVATE participants were also eligible for compromise of state-owed debt in response to achieving program milestones, staggered in month-specific increments based on making consistent payments. Staff highlighted this opportunity as a selling point for the program and a helpful incentive for facilitating participation; in several counties, parenting facilitators were particularly hopeful about incentivizing participation in parenting classes.

Across counties, staff reported that few participants had achieved milestones leading to debt compromise by the time of data collection. One county noted that they had planned to provide debt reduction in response to participation in job readiness classes, however, those classes were not occurring due to the COVID-19 pandemic. Therefore, reduction for that milestone had not been provided yet. Delayed or interrupted launching of parenting classes meant few participants had completed enough classes to qualify. Further, staff in most counties described

that their counties routinely use debt compromise in the course of routine case management, leaving some participants without debt to forgive. As debt reduction had yet to occur regularly, several ELEVATE coordinators expressed uncertainty about the milestones associated with debt compromise in their counties or the process for debt compromise, representing an area in which support from DCF could potentially help to clarify goals and processes and support tracking procedures.

4.   Employment Services

Employment services were an area of key focus for all ELEVATE programs. DCF expected counties to provide all participants with a one-on-one employment needs assessment and described that other employment services could include resume writing assistance, job search assistance, job readiness training, job placement services, job retention services, rapid re-employment services, education, work supports, or other services. In four counties, the ELEVATE coordinator or case manager also served as the employment case manager for ELEVATE customers; in one county, overall case management and employment case management functions were split across two individuals.

> *"Resume and job search help are a fundamental need a lot of folks have. I would also say somebody to essentially talk to them—to build their confidence. Or somebody just to hear them; to get their point of view; to acknowledge what they are saying; to rebuild them from the ground up. Get the resume, and let them know that they can do something, that they don't have to struggle all the time."*
> —ELEVATE Coordinator

- **All counties performed employment assessments, though only some created written employment plans.**

Employment services typically began with employment assessments to identify participants' needs, skills, and goals; counties varied according to whether they performed assessments using formal tools, informally through the initial assessment process, or a combination of these. At the time of data collection, two counties did not use written employment plans for each ELEVATE participant and three counties did use them; two of the three described using them from the outset of the program, and one had implemented their use more recently. Staff in counties that used employment plans emphasized their importance for case planning and progress monitoring.

- **Most employment services were provided individually, and staff aimed to tailor employment services to an individual's needs and goals.**

Employment services were typically provided one-on-one and from the start of the pandemic through the conclusion of data collection were often provided through virtual means. Several counties had planned to provide group-based job readiness and employment soft-skills classes but had not yet had launched them due to the pandemic. One of the two counties that had previously participated in SPSK made an intentional shift away from providing group-based job-readiness classes toward providing one-on-one employment assistance exclusively; from the perspective of staff, this approach allowed them to better "meet people where they are" regarding service needs and helped overcome attendance and engagement barriers that they experienced for group-based employment services during SPSK. The other former SPSK county had planned to provide a combination of group job-readiness classes and one-on-one

services, though plans for group-based services were thwarted by the COVID-19 pandemic. Several staff in this county lamented the lost opportunity for participant relationship building.
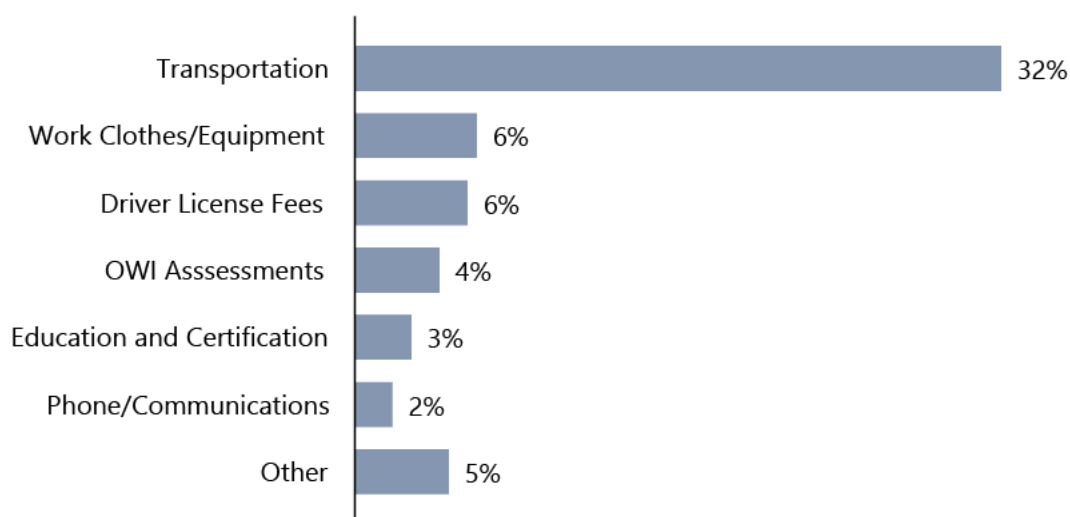
Across counties, staff described aiming to provide services tailored to an individual's needs and goals. For this reason, staff generally described employment services as different across participants within a county, depending on their circumstances and needs.

- **ELEVATE programs offered a common set of job market entry services but differed in their approaches to helping participants find and keep work.**

The employment services that staff described providing most frequently and consistently across counties included resume assistance, job search assistance, and provision of work supports. Staff in most counties described sharing job leads with participants via email as they arose, either individually or as a group, and most provided financial literacy or budgeting assistance to participants.

Work supports aimed at overcoming barriers participants might have to employment were highlighted as a unique, attractive, and key feature of ELEVATE programs across counties. Counties varied in the specific types of work supports that they provided. Most commonly, these included resources such as transportation supports like gas cards or bus vouchers; physical equipment, such as uniforms, work boots, tools, or professional clothing; and fees associated with licensure or credentialing. Several counties reported less-common examples of work supports, such as providing driver's education classes, bicycle purchases, paying for car repairs, or covering a security deposit. About one-third of participants received a transportation-related work support, whereas fewer than 10% received other types (Figure 10). The final implementation analysis is expected to include estimates of the monetary value of work supports.

Figure 10. Proportion of ELEVATE Participants Who Received Each Work Support Type

Support Type	Percentage
Transportation	32%
Work Clothes/Equipment	6%
Driver License Fees	6%
OWI Asssessments	4%
Education and Certification	3%
Phone/Communications	2%
Other	5%

Across counties, staff also described working with a variety of local community partners to refer or enroll participants for additional needs such as education resources, financial literacy education, short-term job skills training, job coaching, and occupational training. Examples of employment programs identified by counties included phlebotomy, certified nursing assistant programs, Commercial Driver License (CDL) programs, and forklift training. Counties also described working with local partners such as the DMV or nonprofit organizations to overcome indirect barriers to employment, such as transportation-related fines or fees.

Particularly in counties with previous experience providing employment services through SPSK and other programs, staff emphasized the importance of job-readiness preparation, including the development of soft skills to help facilitate positive on-the-job relationships for participants; job retention services to follow up with participants after they found a job, to support their transition into employment and help continue to build career skills; and working with local employers to identify potential placement opportunities.

The extent to which staff described seeking out and working with local employers varied. In two counties, ELEVATE coordinators or a dedicated ELEVATE job developer engaged in outreach to employers directly with a goal of facilitating matches between ELEVATE participants and job openings. Two others utilized job-development units within their employment partner organization or another community partner providing employment services. Another helped customers apply for jobs but had not yet started performing outreach to employers to build employment pathways for participants.

Counties differed in the extent to which they had established processes in place for monitoring job retention, as well as in their approaches to job retention services. Two counties reported checking in periodically with participants after they obtained employment, monitoring reports identifying respondents who lost employment, and proactively following up with these participants to offer assistance in finding a new job. From the perspective of staff in these counties, some participants are reluctant to reach out proactively after losing a job, so monitoring and follow-up on the part of the program is crucial. Another county provided 90 days of employment retention services for all participants, during which staff check in regularly with employers and participants and offer work supports, such as work supplies and gas cards.

When desired by participants, this county also referred participants to their agency's workforce team for job retention services beyond 90 days. Two counties described less routinized procedures for monitoring and following up on retention, with one county describing generally leaving it up to the participant to check in with the program after gaining employment or after a job loss.

- **Counties leveraged local programs to connect participants to more intensive employment services.**

Most counties also worked with local community partners who provided a more intensive level of employment services than available through ELEVATE directly, such as intensive job readiness, job placement, and job retention services, or services for specific populations, such as individuals with previous criminal convictions. One county sought out and engaged in an inter-agency team of staff from county agencies working to help individuals find jobs, such as staff embedded in other community programs, job developers, and job coaches with local agencies. The team works together to perform outreach to local employers and invite employers to meet with the team regarding open positions. Staff in this county highlighted considerable success in connecting with employers willing to meet with the inter-agency team and has found that by pooling information and leads, they have been to leverage the resources of the full group and streamline the process of obtaining information about available jobs, making it easier to help them meet the needs of their respective customers.

Some counties also co-enrolled participants with other programs available in the community when eligible, such as programs specifically for TANF participants, though staff in several counties cautioned against co-enrolling participants in too many programs, particularly those that offered a "grab bag" of services that might not align well with participant needs or that required significant levels of engagement that could make it difficult to successfully commit to multiple programs. A promising practice to help ease the burden of co-enrollment for participants identified by staff in two counties was to hold joint case management meetings with the participant and the case manager from the co-enrolled program. Staff noted that this approach reduced the number of meetings the participant needed to attend and found that it could help facilitate continuity, messaging, and information sharing across providers.

- **Staff viewed active listening, empathy, and addressing indirect barriers to employment as crucial to employment service success.**

Across counties, all staff identified several aspects of providing employment services they saw as crucial to success. First, staff noted that many participants came to the program without experiences of being successful at work, without much confidence in themselves, and with limited trust in systems. To help address this challenge, staff stressed the importance of listening to participants, developing plans consistent with their goals and needs, and taking the time to cultivate a trusting relationship with the participant. Staff highlighted the importance of providing services in an open, nonjudgmental, empathetic manner, and giving participants space to share their feelings, as well as providing a level of service that aligned with the participant's stage in the employment seeking process and needs.

Staff also highlighted the importance of identifying and connecting participants to resources to address indirect barriers to finding and keeping work, such as substance use issues or housing instability. Staff also emphasized the importance of not assuming that participants had

experience creating a resume, or basic skills such as literacy, and stressed that getting to know participants and build a trusting relationship was often the key to identifying such barriers.

A key indirect barrier to employment that counties strove to mitigate was transportation. Staff in smaller counties described the challenge of limited employment options within their county's geographical area, limited public transit options within their county, and participant transportation barriers, such as lack of a vehicle or lack of a license, that made it difficult for some participants to access jobs within driving distance of their residence. Transportation issues were a key barrier highlighted by larger counties as well; even in counties that had public transit options, some participants lived far from them, and some jobs, particularly factory and warehouse positions, were likely to be located beyond the limits of public transit. Counties addressed these challenges by providing bus vouchers, taxi vouchers, gas cards, and taking steps to help participants obtain or regain their licenses. A promising resource identified by one county was a local resource for assisting with transportation barriers for newly employed individuals; the coordinator described a local program that provided transportation for the first 90 days of an individual's new employment when jobs were located outside of the public transit system.

- **The COVID-19 pandemic constrained modalities for engaging participants in employment services and limited supplemental employment resource availability.**

All counties transitioned to offering more services virtually during the pandemic, and staff in several counties provided employment services exclusively from the start of the pandemic through the time of data collection by email, text, and phone. These new modalities came with challenges. Some staff felt that it was harder to reach, engage with, and build rapport with customers when providing employment services virtually. Some staff also found it more difficult to help participants build skills using virtual tools. For example, one staff member shared that whereas she previously would have walked participants through the process of editing a resume face-to-face, she started doing this work separately and then simply sending the revised copy to the participant during the pandemic, which she perceived as less effective for long-term skill building.

Additionally, staff reported increased difficulty engaging participants in employment services, which staff described as always a challenge but made worse by the pandemic. Some staff noted that some customers were reluctant to engage in face-to-face job search or to interview for jobs with an in-person component due to health concerns. One county lost the ability to provide group-based job readiness classes and struggled to provide a group-based, virtual alternative; due to low attendance, this county switched to one-on-one job readiness activities. Counties also described that community partners often temporarily ceased providing employment and training programs due to the pandemic, limiting access to participants. These limitations were frustrating for some staff, who expressed in interviews a desire to help participants obtain skills that were likely to yield a higher-earning profession.

> *"Many training programs that were available around the area were shut down, along with many of the facilities... Many of the programs had enrollment restrictions due to COVID and had to essentially find other means of providing the programs, as well as figuring out how to get participants to attend. Many of the programs had to lower the enrollment numbers to allow for in-person groups. Programs have started to kick off again, now that they have evolved for those still concerned about COVID, but things have slowly started to open again, most by appointment only."*
> —ELEVATE Coordinator

Staff also shared that the pandemic disrupted their ability to collaborate with other employment providers with whom they staff cases due to cross-program enrollment among participants; while these meetings often resumed virtually, staff found that fewer partners attended and sometimes experienced reduced engagement within groups. One county, which had joined a fruitful collaborative group of staff from other local employment programs that worked together to coordinate services and share job leads, found that group activities were disrupted temporarily and less effective when they resumed virtually.

- **Staff desired additional resources and supports for providing employment services effectively.**

Staff in several counties also expressed a desire for more formal tools and training to support providing employment services. For example, some staff felt that it would be helpful to hear from guest speakers or trainers on best practices for providing employment services, building relationships with local employers, and serving customers with multiple barriers to employment. Some staff also expressed a wish for employment plan templates and tools for tracking progress towards goals, and several staff suggested that the monthly project calls could be a helpful forum for obtaining such information.

5. Parenting Services

DCF specified that all ELEVATE participants are to receive a one-on-one assessment of parenting needs. Early in a participant's time with the ELEVATE program, and often at the first intake appointment, ELEVATE coordinators assessed the participant's needs for and interest in parenting services. Key in this assessment was determining whether participants were interested in taking part in parenting classes, and in some counties, other parenting-related services.

> *"I don't necessarily think that everybody needs that intensive parenting piece, or even any parenting resource. Because they're already seeing their kids and things like that. I think that the main core piece that a lot of people need is the employment piece. It's the main one. And understandably, because they're behind on their child support order, so, they need a job to pay. If they were working, they'd be making their order."*
> —Partner Agency Director

The core component of parenting services available through ELEVATE is parenting classes with peer support. Parenting classes were provided through local community agencies; these were standalone programs in four counties and offered through the county human services agency in the fifth. Typically, ELEVATE programs formalized partnerships with parenting providers and paid partners for services provided to ELEVATE participants, though at the time of data collection, one county did not have a formal agreement in place with their parenting provider and did not render payments for services. In all counties, ELEVATE participants took part in classes with other NCPs who accessed the classes independently or participated due to their enrollment in another program with a parenting class requirement.

- **Many ELEVATE service providers perceived parenting services as less central than other services to ELEVATE's model.**

Across counties, some staff perceived that parenting services were not necessary for all participants. These staff emphasized that the needs of participants varied; they felt that some did not need help with parenting or co-parenting, or that other barriers to work and paying faced

by some participants were of higher priority. Consequently, some staff characterized parenting services as the least well-integrated and the least-frequently engaged in ELEVATE service. Similarly, parenting facilitators in several counties reported perceiving that other partners viewed parenting programs as less central to ELEVATE's service array than other services. Other staff and leaders, in contrast, felt that most parents could benefit from supports related to parenting and highlighted the importance of identifying barriers to access and visitation and other parenting needs early in the process. One child support agency director highlighted the historical separation between child support and visitation as contributing to perceptions that parenting services are "different," "separate" or "less important."

Counties also varied in their perspectives on where parenting services fit into the ELEVATE model. Some counties described that in their experience, many participants did not want or need help with parenting, and therefore made referrals for parenting services only when a parent expressed interest. Another county emphasized building relationships with children as central to the ELEVATE service array and viewed addressing parenting barriers as one of the first issues participants needed to address, prior to or in tandem with employment barriers. Staff in another county described often working with participants on employment issues first, which they found helpful for building rapport and trust, then later identifying and addressing parenting needs that might not originally have risen to the surface at initial intake.

- **ELEVATE programs took different approaches to implementing parenting classes.**

The approaches that ELEVATE programs took to referring parents to parenting classes varied across counties. Some counties provided information about all ELEVATE participants to the parenting facilitator, who then included participants on emails about upcoming classes and activities, in addition to direct outreach. In other counties, ELEVATE coordinators referred only participants who expressed an interest in taking part in classes. Coordinators often made referrals via email, sharing the participant's name, contact information, and any relevant notes. ELEVATE parenting facilitators then performed outreach using a variety of formats, including phone, email, and text messaging. Several facilitators reported that this outreach required persistence, as participants often did not respond to their first outreach attempt.

> *"It's good to communicate all different ways, every way you can think of. So, I leave voicemails. I text message. I email. But it's best to get them on the actual call. With my salesman ability— I try to be as warm as possible."*
> —Parenting Facilitator

The parenting curricula used for ELEVATE differed across counties. Three counties used Nurturing Fathers, and one used Parents Forever. A fifth county offered ACT Raising Safe Kids for parents of younger children and a self-created compilation of curricula for parents of teenaged children. Classes ranged from 4 to 20 hours of programming. Some counties used an open enrollment approach, wherein participants could join the classes at any point and complete classes in any order; other counties used a cohort-based approach, in which participants needed to start the curriculum with the first class and completed courses in a sequence with other parents who began at the same time.

Content of the curricula also varied. Common topics included child development, communication, parenting and co-parenting skills, and anger management. Several counties highlighted addressing myths and misconceptions about child support as an area of focus within classes. One parenting facilitator found it helpful to bring the program lead from his county's child support program into class to talk about child support, answer questions, and help clarify how NCPs could get help. He emphasized the importance of utilizing "credible messengers," such as parenting facilitators or others with community connections, to prepare NCPs to engage with child support ahead of the meetings.

> *"The question will often come up— how does child support work? I met [the program lead] and I saw that passion in her. So, we made a partnership where she will come over to the groups once a month during our sessions, and she will answer any questions that the fathers might have. That was kind of an innovative approach for us, because a lot of the populations we work with, they don't trust much… And the guys just really gravitated towards [the program lead] and she was able to answer those questions spot on."*
> —Parenting Facilitator

Counties tried a range of strategies for organizing the classes to maximize uptake. Classes were often held weekly, across as few as two or as many as 16 sessions. Several counties made adaptations to the session format due to the COVID-19 pandemic; for example, one experimented with holding one longer session on a weekend day rather than across two days, and one lengthened the curriculum's duration from 13 weeks to 5 months, in order to shorten classes to 45-minute sessions due to the new virtual format.

Counties considered participants to have completed the parenting class after completing all or most sessions (even if sessions were completed out of order). At the conclusion of classes, several programs provided completion certificates to participants; one ceased doing this during the pandemic due to the many adaptations they had made during the pandemic, though planned to resume this practice after resuming the course's typical formats. Some held graduation ceremonies for participants and families. Several counties described providing state-owed debt reduction to participants at the end of parenting classes.

In two counties, noncustodial fathers and mothers participated in the same classes. Two provided classes to fathers only; one made referrals for mothers to other classes available in the community and the other did not have an option for mothers in place at the time of data collection. Another county had not yet encountered having a noncustodial mother interested in attending the classes using the ELEVATE-specific parenting curriculum; staff indicated that they planned to address noncustodial mothers' needs on a case-by-case basis, with an option to refer the participant to other age-based classes available in the county.

- **The COVID-19 pandemic significantly disrupted plans for parenting classes.**

Of all the core ELEVATE services, parenting services experienced the greatest disruption due to the pandemic. Across counties, parenting services had either not yet started or were just beginning when the pandemic reached a crisis point in March 2020. All parenting facilitators and

ELEVATE programs had planned to conduct parenting classes in person and in a group-based setting. All ELEVATE programs had to put their parenting classes on hold when public health conditions did not allow for group convenings. Additionally, several programs had planned to provide outings or activities for participants and families but were unable to do so on account of the pandemic. At the time of data collection, three counties had resumed classes via virtual modalities in recent months, , including Zoom or Google Meet with phone-in options for participants without video access. One had yet to resume parenting classes though expected to in the near future, and the other had just recently started holding classes in person.

> *"We haven't had the opportunity to really have a great session where they can play off of each other. You know, where you have parents all in a room together, kind of saying, 'Oh, I went through that, and this is what I did.' And you know, you don't get that same type of feeling in the group as when you have that. I think that's really what we're hoping to get back to once we can be in person."*
> —Parenting Facilitator

Facilitators found that some participants did not have access to or did not feel comfortable using virtual tools to participate in classes. They made accommodations to allow participants to join the virtual sessions by telephone, and in some counties, started sending parenting class materials to participants in advance as a way to help them navigate course information. Despite their efforts, facilitators highlighted building rapport and facilitating peer connections as a significant challenge in these alternate modalities.

Some facilitators found that due to scheduling conflicts, low enrollment, or discomfort with group activities, some customers preferred to take part in services individually and offered one-on-one options to accommodate; others found that on occasion, only one parent signed up for a virtual class would attend, leading to a one-on-one session between the facilitator and participant. Facilitators also reported making changes to the duration of class sessions, session times, and the number of sessions parents were expected to complete; as a result, most reported adjusting or cutting material to adapt to these reductions in total class time. Facilitators also reported changing the time of sessions to help accommodate participants' work schedules.

- **Outreach and recruitment into parenting classes represented a key challenge for ELEVATE programs.**

Facilitators and other staff highlighted a low level of uptake as a key challenge in parenting classes. Staff perceived that parents opted not to take part in classes for a number of reasons, such as time constraints and technology limitations. Many staff also cited lack of perceived need or want for the classes among parents. Staff perceptions on this need were mixed, with some staff expressing the perspective that all participants could likely benefit from peer support and help with co-parenting, while others felt that parenting classes were not a service all participants needed.

Facilitators in several counties also described additional challenges with outreach and recruitment into the program, such as receiving inaccurate contact information for some participants and a lack of interest among others. In several counties, other ELEVATE staff described disorganization and lack of outreach efforts on the part of parenting facilitators as impeding participation in parenting classes.

Facilitators also reported spotty levels of attendance, a challenge that facilitators perceived as increased due to the pandemic but also noted as a broader challenge often experienced outside of the pandemic context. To help maintain participation, facilitators described taking steps such

as making multiple and persistent attempts at engagement; providing reminders prior to classes via phone calls and texts; following up when participants missed classes; and asking for participant feedback on the classes.

- **Counties augmented ELEVATE parenting classes with other parenting services.**

Several counties also augmented their ELEVATE program's parenting curriculum with referrals to other types of classes, such as classes aimed at parents of children in a specific age range. One of these counties was able to connect interested participants to an array of additional parenting resources, such as supervised visitation services, through their county's human services department; this county also used Access and Visitation funds to provide dedicated spaces for supervised visitation that both ELEVATE participants and other parents could utilize. Another county sometimes referred ELEVATE participants to individualized home visiting services available through their county's parenting provider; this county worked closely with their county's child welfare agency to coordinate parenting class enrollment and staff cases of parents engaged in both systems. Several counties also made services such as mediation and access and visitation available to ELEVATE customers, either through trained mediators who provided services through ELEVATE directly or through referrals to outside mediation services. The cost of these services was typically paid for with Access and Visitation resources. Several counties noted that the COVID-19 pandemic hampered their efforts to connect participants with mediation services, due to limitations on in-person interactions.

- **ELEVATE coordinators and parenting facilitators reported varying levels of connection to, and information exchange with, each other.**

ELEVATE coordinators reported a range of experiences interacting with parenting coordinators once participants started to engage in parenting services. In one county, the ELEVATE coordinator helped facilitate parenting classes. From this coordinator's perspective, this helped facilitate collection of information about participant attendance, engagement, and program completion, as well as participant issues and barriers that arose during parenting classes. Several counties reported frequent communication with and updates from parenting facilitators about attendance and participant progress. ELEVATE coordinators and parenting facilitators from these counties emphasized the importance of careful recordkeeping and strong communication practices across agencies to ensure that participants received the debt reduction associated with participating in classes. Two counties described less coordination with parenting facilitators after making referrals for parenting classes. One county reported receiving attendance information but little other information and one county reported challenges obtaining information about attendance and participant progress.

6.   Maintaining and Monitoring Engagement

Once they enrolled a participant into ELEVATE, staff needed to tackle what they described as a key challenge for the program—keeping participants engaged in services.

- **ELEVATE programs used a variety of strategies to combat attrition and maximize engagement, and they desire input on promising practices.**

Staff cited a range of reasons that participants might not engage in services, such as lack of interest in the services available; lack of motivation on the part of the participant; and barriers to engaging in services or employment, such as transportation issues, child care responsibilities,

or pandemic-related concerns about returning to work. Staff differed in their perceptions of the pandemic's effects on attrition; some staff found it harder to keep customers engaged when providing services virtually or due to competing demands participants faced in the pandemic, while others did not perceive an increase in attrition compared to previous experiences.

In general, staff noted that their likelihood of maintaining engagement improved if they were successful in getting the participant engaged in services quickly. Staff in several counties highlighted participants dropping off immediately after enrollment as a key challenge. Staff attributed multiple factors to these drop-offs in engagement, such as lack of true interest and a desire to temporarily stave off enforcement, "immaturity," competing demands for time, incarceration, or participants' perceptions that they no longer needed program services because they found a job lead or started working.

> *"Sometimes you get them in for the survey, they get their money, you try to get ahold of them a couple of days later and they're nowhere to be found, you know?... They seem like good guys when I meet them. You know, it's just, 'Where did you go?'"*
> —ELEVATE Coordinator

To address these challenges, staff took steps to rapidly engage participants, such as scheduling an intake appointment to follow the baseline survey process within a few days or conducting initial intake immediately the same day; performing desk reviews or helping with resumes immediately upon study enrollment in order to give the participant rapid feedback about a way in which the program could help them; and staying in touch frequently via phone calls and text messages, particularly early on in a participant's time in the program. Staff also sought to overcome participant barriers to service engagement by offering services through multiple modalities and providing work supports, such as transportation assistance, to help address challenges accessing services.

Staff also sought to maintain engagement throughout the duration of a participant's time in the program. Staff described taking steps such as reminding participants of appointments in advance and following up when participants no-showed for appointments using multiple modalities, as well as reminding participants of the benefits of the program and program expectations, to help maintain engagement. One county particularly emphasized the importance of weekly check-ins to, in the words of the ELEVATE coordinator, "remind people that we're here; don't forget about me!" They also sought to keep contact information for participants current and often requested multiple forms of contact information. At all points in the engagement process, staff emphasized the importance of identifying ways that the program could benefit participants and highlight those benefits through discussion and actions. Maintaining engagement was a topic of focus across counties, and many staff expressed a desire to learn more from other counties or DCF about successful strategies for maintaining engagement.

- **Staff used an array of tools to monitor and share information about participant engagement in services.**

After their enrollment in ELEVATE, staff used a host of tools to track the services ELEVATE participants received as well as participant progress towards program goals. These included internal tracking spreadsheets, the ELEVATE services tracking spreadsheet developed by IRP, the WWP system, KIDS, internal agency-specific databases and worklists, and other participant case notes external to systems. For tracking attendance at parenting classes, parenting facilitators and case managers shared information via email, through messages, and

spreadsheets. Case managers also monitored worklists to track child support payments and new employments.

ELEVATE staff reported several challenges with tracking service data. The biggest challenge was the time required to do so; for ELEVATE coordinators, working across multiple systems often required duplicate entry. Additionally, while staff found the availability of information through these systems helpful when information was entered promptly and thoroughly, staff experienced frustration when other staff members forgot to enter information. Staff described that when different ELEVATE staff in their county used different systems, it provided opportunities for staff to forget to double-enter data across systems, creating informational gaps.

• **ELEVATE programs varied in their approach to "disenrolling" participants.**

DCF directed counties to "disenroll" participants from ELEVATE via the WWP system, giving counties latitude to determine the criteria under which disenrollment should occur. The ELEVATE Policies and Procedures manual specifies that participants should be disenrolled from ELEVATE within the WWP system "when the NCP participant has been determined to have "'inactive,' 'complete,' or 'alumni' status" (Department of Children and Families, 2020, p.13). The manual provides six reasons for which a participant could be disenrolled:

- Successful participation: Employed and making regular payments

- Successful participation: Other

- Determined to be ineligible: Inability to work

- Determined to be ineligible: Other

- Unsuccessful participation: Inactive

- Unsuccessful participation: Other

Given this flexibility, counties varied in their definitions of and approach toward disenrollment. Two counties described that they did not use disenrollment at all, because from their perspectives, participants should receive check-ins on an ongoing basis to determine whether additional supports were needed, even after successful completion of specified goals.

Counties that disenrolled participants described that the most common reasons for disenrollment included the participant obtaining employment, starting to pay ordered support regularly, becoming incarcerated, ceasing to participate in services, or indicating to program staff that they no longer needed program services. Most counties indicated that if a participant desired to re-enroll in services following disenrollment, the individual would be allowed to do so, though one county expressed hesitation about allowing participants to return.

7.   Perceptions of Service Alignment with Participant Needs

Frontline staff perceived that many of the services provided through their ELEVATE program aligned well with participant needs, as well as opportunities for future growth.

- **Staff perceived successes in helping participants to meet basic employment service needs, as well as opportunities for growth in providing more intensive employment services and parenting services.**

Staff noted several areas of potential improvement, including parenting services, which frontline staff felt could be helpful to participants if they were more willing to engage in them: family violence services, which staff participants were often reluctant to report a need for and were limited in some counties, particularly for perpetrators; and mediation and access and visitation services. These reports aligned with frontline staff surveys, on which fewer than half of staff described their programs as "very" or "extremely" successful in providing parenting and domestic violence services, and only one-third characterized their programs as successful in providing mediation services and help with access and visitation.

Additionally, while frontline staff reported successes delivering basic employment services aimed at helping parents obtain work, such as resume and job search assistance, some staff described in interviews that their county's ELEVATE program was less focused on providing intensive services intended to help participants obtain better-paying jobs or jobs requiring training or more specialized skills. These reports aligned with staff surveys, on which 43% of frontline

> *"A lot of [participants] are capable of obtaining a job but not maintaining it because of things like getting into an argument with your boss and how do you overcome conflict in the workplace? And if you don't just agree with a task like what do you do?"*
> —ELEVATE coordinator

staff described their programs as "not at all," "a little", or "somewhat" successful at providing job retention services; 46% reported the same for job placement services, and 39% for job development services. Additionally, only 46% of staff described their programs as "very" or "extremely" successful in providing job readiness—a category of service for which the COVID-19 pandemic disrupted plans for in-person group-based activities in some counties.

These perceptions also align with staff perceptions of the services ELEVATE participants would benefit from receiving more of, with 30 to 40% of staff reporting that participants needed more job retention, job placement, and job readiness training, as well as access and visitation or mediation assistance, than they currently receive through the program.

- **Staff identified gaps in local services to help participants address barriers.**

Staff identified a number of service domains outside of the realm of ELEVATE, and often of limited or no availability in their communities, that they felt ELEVATE participants frequently needed in their journeys toward finding work and paying child support regularly. In interviews, staff expressed a desire for more access to employment training and education programs that they perceived could help participants access higher-wage jobs, as well as subsidized employment and transitional jobs programs.

Across counties, staff highlighted mental health services, substance use treatment services, housing assistance, and help with fines and fees beyond the realm of child support as key gaps that often made it difficult for participants to meet their own basic needs in addition to their child support obligations. Several staff highlighted a need for anger management services and domestic violence services aimed at perpetrators of domestic violence, as many local resources were aimed primarily at survivors. Assistance with civil and criminal legal matters was also an area of unmet need identified by many staff. At the time of data collection, one county had begun the process of exploring a relationship, paid for with Access and Visitation resources, with their county's local legal aid provider for the legal clinic to assist participants with access and visitation paperwork and representation.

> *"One of the things we look at is if their driver's license is suspended due to child support. Most of them have had it suspended, and then they keep getting caught with driving without their license. And so it's tickets and things like that, that we're unfortunately not able to help with. We tell them, 'We can work with you and help you set up a payment plan. But we can't legally pay your fines and tickets.'…If you have $1,500 in fines and fees, no government dollar is going to help with that. So then the issue is, you need to pay those off. Some of the legal barriers people face are just beyond our control."*—Partner agency lead

Across counties, many staff shared that the COVID-19 pandemic had further constrained access to these non-ELEVATE resources because they became temporarily unavailable, because wait lists grew longer during the pandemic, or because they shifted to a virtual format that was inaccessible or unappealing to NCPs. In particular, staff in several counties noted that waitlists for mental health and substance use services had grown longer; some frontline workers also felt that NCPs were less willing to participate in these types of services remotely. Many of these unmet needs align with services frontline staff identified on staff surveys as most difficult for NCPs to access in their communities. When asked how difficult it was for NCPs to access various services in their communities, half or more of staff described the following types of services as "somewhat," "very" or "extremely" difficult for NCPs to access: (1) housing assistance (with 77% of staff answering "somewhat," "very" or "extremely" difficult for NCPs), (2) expungement services (75%), and (3) child care or assistance with child care costs (62%).

V.   Reflections and Looking Forward

A.   Strengths and Successes

As they reflected on their experiences implementing ELEVATE to date, particularly in the exceptionally challenging context of the COVID-19 pandemic, counties highlighted a number of strengths of their local ELEVATE programs.

- **ELEVATE programs celebrated identifying and implementing strategies to serve customers amid a vastly changed service landscape.**

The COVID-19 pandemic caused ELEVATE programs to substantially modify plans for implementing services, with very little time to pivot and amid a continually changing landscape. ELEVATE programs expressed appreciation for their leaders and staff for creative problem-solving in the face of substantial change. They highlighted the abilities of their staff members to help address participant needs; having the capacity to provide holistic services across multiple domains; their abilities to tailor and customize services to participant needs; and their willingness to flexibly adapt to new modalities to keep services going.

Leadership praised the dedication of their staff to providing NCPs with high-quality services and willingness to adapt to the ever-changing conditions forced by the COVID-19 pandemic, and for their part, staff emphasized dedication and strong leadership on the part of their program's directors. Leadership and staff also highlighted the importance of having a "champion" for ELEVATE within their county's program and expressed gratitude for the staff who acted in this capacity. Further, staff and leaders in several counties noted the "hands on" nature of DCF's involvement in ELEVATE and expressed appreciation for the state's responsiveness to questions during these challenging times. As a result of these efforts, programs found that they were able to build relationships with many customers and engage many participants in services despite challenges. Staff and leadership also celebrated successes in helping participants find and keep work and in connecting participants to resources and services that they believed would help them be successful long-term.

- **ELEVATE programs identified success in building teams, establishing partnerships, and leveraging community resources.**

ELEVATE leaders and staff invested considerable time in ELEVATE's early implementation in establishing partnerships, filling key staff roles, and determining the community resource landscape. Leadership and staff felt their programs experienced considerable progress in these domains during the first year, despite challenges related to working apart from one another. They cited creating teams and fostering team cohesion, building new partnerships and nurturing existing partnerships, fostering a collaborative environment across partners, and identifying and leveraging other community resources to help augment their efforts as early successes of their ELEVATE programs.

- **ELEVATE programs observed positive inroads in facilitating cultural shifts within child support.**

In several counties, leadership and staff described observing some positive changes in agency culture, particularly in the interactions between child support agency staff and NCPs. They noted that requiring a new form of outreach from enforcement staff to NCPs helped some staff to build greater empathy for the challenges NCPs face, and that success stories helped child support agency staff to observe how providing help to parents could be beneficial to the agency as a whole and for reducing the number of NCPs on their own caseloads.

Several counties highlighted the role ELEVATE can play in giving caseworkers a positive problem-solving tool to help NCPs resolve barriers and demonstrate the agency's interest in helping NCPs succeed. In particular, staff in some counties highlighted the role of parenting classes in helping to improve participants' perceptions of the child support program. By bringing staff into the less-threatening environment of a parenting class to share information with participants or to address myths and misconceptions about child support, staff perceived that parenting facilitators played an important part in helping to improve relationships.

> *"I think we work really well with the other community resources that we have. Our team brings different things to the table because they have been involved in different programs and have different partnerships in the community… I feel like we've made a lot of strides in having a more open dialogue with other agencies. We don't think we're the best at everything and only want them to use our resources. We really want to connect people to where it's best for them to get the information."*
> —Child Support Supervisor

- **ELEVATE programs refined their service delivery models in the first year and looked forward to an eventual post-pandemic service environment.**

In the first year of implementation, ELEVATE programs took steps that helped to refine their service delivery models, from developing communication tools and streamlining processes, to addressing staff transitions and identifying back-ups for key roles, to firming up partnership arrangements. Leadership and staff highlighted strengths specific to their county's models of service delivery, co-location with other service providers, successful collaboration with ELEVATE partners and successful leveraging of other community relationships, delivering services in an integrated fashion, and taking a customer service approach to service delivery within their county. Many staff hoped for progress in the public health landscape in the months to come to allow them to fully implement the aspects of their programs that had been hampered on account of the pandemic.

B.   Key Challenges

ELEVATE programs contended with a number of challenges in their first year of implementation. Some of these challenges resulted from implementing new programs; others were caused by the unforeseen challenge of the COVID-19 pandemic.

- **Changing the culture and perceptions of child support agencies is an essential and substantial challenge.**

The child support agencies participating in ELEVATE sought out the funding opportunity in part to facilitate shifts in culture and approaches to service delivery within their child support agencies. While efforts to take a new approach and change staff perceptions of parents were often underway already, ELEVATE helped to catalyze these shifts.

Leadership and ELEVATE coordinators highlighted the challenge of obtaining buy-in from child support agency staff, especially in counties that had not implemented SPSK previously. Promising practice identified by counties to help address this challenge was regularly sharing information about the program and its benefits with child support staff and partners, such as through report-outs at regular meetings, presentations to new staff, and reporting information about program successes on an ongoing basis. Staff from counties that had previously implemented SPSK also emphasized the importance of making the program part of the "fabric" of the child support agency, which required both sharing information about the program and celebrating successes, as well as monitoring and encouragement on the part of leadership to ensure that all agency staff offered ELEVATE to eligible participants consistently.

> *"We've had to really sell the program. We've had to sell it to our workers as much as we've had to sell it to the participants, so that the workers really think this is something worthwhile and in the long run, will help get somebody paying so they don't have to send letters and hound them to pay their child support…. They aren't going to come to me necessarily and say, 'ELEVATE is BS.' But, there's skepticism certainly among a lot of workers about it. Like, 'Okay, here's the latest thing that the state is trying to push on us.' You know, 'More of that feel-good kind of stuff, instead of what we really need, which is hardcore enforcement.' So, we're trying to sell ELEVATE to staff and make the case that it's something that will in the end make people better payors and better parents."*
> —Child Support Supervisor

Also key in changing how agencies and customers perceive each other is demonstrating in tangible ways to customers that child support agencies are changing. ELEVATE programs provided training and engaged in strategic hiring for employees with a customer-focused orientation. Many ELEVATE staff felt that offering help through ELEVATE—particularly given its voluntary nature—helped to improve customer perceptions of the agency.

- **Recruiting participants into ELEVATE, and maintaining their involvement, represents a key challenge for programs.**

Across counties, recruitment and maintaining participant engagement were often described as some of the greatest challenges faced by programs. Aspects of these challenges included reaching NCPs successfully, obtaining buy-in to the program and building trust, and maintaining interest in continued engagement. Staff noted that the COVID-19 pandemic and effects on local economic conditions exacerbated these challenges, though some challenges, such as overcoming NCPs' perceptions about the child support agency, were likely to affect their program regardless of the pandemic. Leadership and staff identified promising practices to help overcome these challenges, such as engaging participants in new modalities like texting and email; maintaining comprehensive contact information for participants to have multiple methods for reaching a participant; and taking steps to build rapport and positive relationships with participants.

> *"[Child support] is branded, in a sense. What does your brand communicate? What do people think when they hear child support? From what I get from the guys, as soon as they hear it, it's 'I'm going to jail,' or 'I'm about to get my license taken,' or 'I'm about to get my credit report messed up,' or 'I'm about to lose my fishing license.' I mean, they even take your fishing license. A guy might use fishing to kind of get his mental health going, his peace of mind. He can't even do that legally."*
> —Parenting facilitator

- **Helping participants address complex barriers is an ongoing challenge.**

Many ELEVATE participants come to ELEVATE with limited work experience, employment-specific barriers to work (such as limited education and job skills) as well as indirect barriers, particularly past incarceration, housing instability, substance use, and mental health needs. ELEVATE programs were able to provide some services that help to address these challenges and ELEVATE case managers described looking for opportunities to address indirect barriers beyond difficulties able to be directly addressed by ELEVATE. To help address challenges outside of ELEVATE, ELEVATE programs are seeking out local resources, building referral partnerships, and leveraging the knowledge and networks of partners. Yet, some gaps in community resources persist. Building and drawing on resources that can help serve participants will remain a key area of focus for programs in the years to come.

- **Some programs desire a greater degree of flexibility in target population and service customization beyond ELEVATE's program and evaluation design.**

In some counties, leadership and staff expressed a desire to provide services to NCPs beyond ELEVATE's target population. This desire sometimes led to frustration with ELEVATE's study group eligibility criteria. For example, staff in some counties lamented not being able to include arrears-only cases; cases in which the NCP was currently under a contempt order, which could take many months to resolve in some counties; and cases in which the NCP did not live and have a child support order in the same county. A county that had participated in SPSK described frustration that for the year in between SPSK and ELEVATE, they had been able to serve all NCPs that they identified as a good fit for a bridge program without taking into account an evaluation's eligibility criteria, and returning to more restrictive criteria felt as though they were "stepping backwards" in their approach to service delivery. These frustrations sometimes carried over to frustration with study group recruitment targets. Some counties felt the targets were unrealistic even after adjustments were made due to the COVID-19 pandemic. Several

counties expressed concern that meeting study enrollment targets occupied outsized emphasis relative to providing high quality services once participants enrolled.

Additionally, some leadership and staff also described experiencing challenges with the requirements associated with ELEVATE's evaluation. Some of these were specific to the intake process and baseline survey content, including the time requirements associated with the baseline survey process, which some counties felt impeded NCP willingness to enroll; the in-person requirement for survey completion, which counties experienced as particularly constraining in the context of the pandemic; and respondent and staff experiences with some of the more sensitive questions included on the baseline survey. Several counties expressed a desire to have had more input on the program and evaluation's design such as limitations on participant eligibility, the enrollment process, and related administrative procedures.

C.   Areas of Additional Guidance Desired

Leadership in several counties highlighted some areas in which they desired additional clarity or emphasis from DCF or IRP.

- **Some counties seek more direction on expectations for programmatic content, program performance benchmarks, and evaluation outcomes.**

Some counties sought more direction from the state on minimum requirements for services that counties should provide to help participants improve employment prospects, such as requiring that all counties implement written employment plans for all participants. DCF has initiated a change aligned with this concern by adding employability plans to the WWP system. Some also sought more direction on expectations for core service offerings, particularly in the realms of employment and parenting. Some leaders sought this direction as a means to facilitate greater consistency across counties in programmatic offerings, with one expressing frustration that ELEVATE is, from their perspective, "five programs in five counties," rather than a cohesive program across counties. In several counties, some interview participants expressed concern about implications for the evaluation and future programmatic roll-out if the services provided by counties are very different.

Staff from most counties expressed a desire for more information from DCF on whether they were meeting DCF standards for recruitment and program outcomes. Several described feeling as though they reported out on metrics each month during monthly calls but did not leave the calls with a clear sense of how their report-out aligned with expectations. One ELEVATE coordinator expressed a desire for "more accountability and feedback on a more frequent basis." On staff surveys, reports from frontline staff suggest an opportunity for increased information-sharing about program outcomes; about half of staff reported getting information about how well their organization is meeting program expectations "very" or "extremely" often and 42% reported hearing how partners are doing "very" or "extremely" often. These findings highlight the opportunity for additional outreach from DCF to clarify expected program outcomes; to consider standardizing process measures; to work with agencies to provide feedback; and identify opportunities to connect data to continuous quality improvement efforts. In interviews, areas in which counties described a desire for additional feedback included progress toward recruitment targets (particularly when they fell short), the content of services provided by counties, and employment performance measures.

Similarly, findings from the staff survey suggest an opportunity for the evaluation team to share information about evaluation outcome measures for programs. On staff surveys, some staff

reported a lack clarity on the criteria by which ELEVATE's success will be judged; only 47% of frontline staff reported that they understood these criteria "very" or "extremely" well. These findings highlight the opportunity for additional outreach from the evaluation team to clarify outcome measures, particularly given that most counties have experienced turnover and staffing changes in key roles since ELEVATE's launch, suggesting that some staff might have yet to hear from the evaluation team about what the evaluation's outcome measures are. In addition, findings suggest the importance of working with staff and program participants to identify the role of lived experience in measuring success and considering a broader set of outcomes that are meaningful to agencies and families.

Additionally, several counties expressed a desire for more information, such as through monthly project meetings, about expectations and best practices for providing employment and parenting services and overcoming barriers to meeting child support obligations. Staff expressed a desire for more trainings from experts on providing high-quality services, maintaining engagement, and helping participants overcome barriers to work. Several counties also suggested bringing in child support experts who could potentially help educate child support staff on how, from a national and state perspective, the role of child support is changing. Staff in several counties expressed that information about domestic violence services, though important and certainly an area in which staff required training, occupied an outsized proportion of monthly meeting time relative to information about employment services and supports and parenting challenges faced by noncustodial parents. One staff member summarized this concern as, "So are we an employment program, or are we a domestic abuse program?"

- **Counties are eager for more opportunities to share information with each other.**

Across counties, staff expressed a desire for more opportunities to share information with each other about challenges encountered and promising practices. Related to this concern, staff from several counties expressed concern or frustration that monthly meetings focused largely on report-outs of metrics that they felt could be better relayed by email. These staff expressed a desire for monthly meeting time to be spent on allowing counties to share information with each other about challenges faced and promising practices, perhaps organized around key topics areas. DCF instituted some changes consistent with these concerns, such as providing space on monthly agendas for staff to share information with each other, as well as connecting ELEVATE coordinators with each other for information-sharing across counties.

- **Some counties experience the documentation and reporting requirements related to Access and Visitation program funding as challenging and desire more assistance.**

Several counties also expressed experiencing challenges with the documentation and reporting requirements related to Access and Visitation program funds in particular. Staff from most counties described the Access and Visitation reporting requirements as burdensome, time-consuming, and complex; found some of the questions to be speculative or having the potential to mis-attribute changes in outcomes to programmatic efforts; and often found the directions to be unclear. Counties expressed a wish for ways to streamline and shorten this reporting process. One county questioned the value of the information resulting from the reports relative to the burden required to complete them. Several counties described not fully understanding requirements related to when Access and Visitation funds needed to be spent. One county noted the experience of not realizing that unused Access and Visitation money needed to be spent down in a particular timeframe and expressed a desire for additional technical assistance from DCF in this domain.

D.   Potential Implications for the Impact Evaluation

The information shared by programs through this data collection effort provides several potential considerations for ELEVATE's impact analysis. First, these findings highlight that counties have taken a flexible, adaptive approach to ELEVATE program implementation, yielding differences in services received by participants across and within counties. As such, ELEVATE's impact evaluation will identify the effects of offering a "menu" of service options within a range of parameters to program participants, rather than the effects of a set of core services received by all participants.

Next, the findings identified that within the realm of child support services specifically, some ELEVATE features, such as state debt reduction and forgoing the use of license suspension as an enforcement tool, are already routinely used in the business-as-usual service environment. This finding raises questions about the extent to which differences in service receipt, at least for some ELEVATE child support services, will be observable between the ELEVATE group and comparison group in the impact analysis if non-ELEVATE (comparison counties) also use these strategies routinely.

Additionally, findings from this initial implementation analysis identified that the COVID-19 pandemic affected many aspects of ELEVATE operations. These include changes to ELEVATE service delivery models, socioeconomic and labor market context, as well as potential changes in the characteristics of ELEVATE participants (e.g., some staff perceived that NCPs who enrolled during the pandemic often had fewer barriers to employment). This information suggests that the evaluation team will need to consider analytic options to account for the changing context of the pandemic and its potential for biasing results from the impact analysis. However, this initial analysis also indicates that the pandemic impacted almost all of the facets of ELEVATE (e.g., program service availability, enrollment, NCP economic circumstances, etc.), and that the effects of the pandemic began shortly after enrollment and have continued throughout the service-provision period. Taken together, these factors likely limit the ability to analytically adjust for the multiple impacts of COVID and elevate the importance of the implementation analysis in contextualizing findings.

Finally, initial analysis findings suggest several variations in implementation that could be associated with potential differences in program impacts. For example, counties reported differences in experiences developing a service array, securing staff buy-in, building partnerships, and recruiting participants based on whether or not they participated previously in SPSK (i.e., Brown and Kenosha counties compared to Racine, Marathon and Wood counties). Counties also differed as to whether they provided Children First in addition to ELEVATE (Racine, Kenosha, and Wood) or not (Brown and Marathon). It is possible that counties that offer both voluntary and mandatory programs have different experiences with recruitment, uptake, and outcomes than counties that offer ELEVATE alone.

E.   Next Steps

ELEVATE program implementation will continue for several years beyond the time period covered by this interim report. During this time, the evaluation team will collect information across multiple sources to inform the final implementation report, examining how programs are functioning at full implementation. We will also conduct focus groups with ELEVATE participants and custodial parents associated with ELEVATE participants. Additionally, the evaluation team will generate a final impact report, summarizing the effects of ELEVATE on participant

outcomes in the domains of child support compliance, payments, and orders; NCP employment and earnings; satisfaction with child support services; and sense of responsibility for children.

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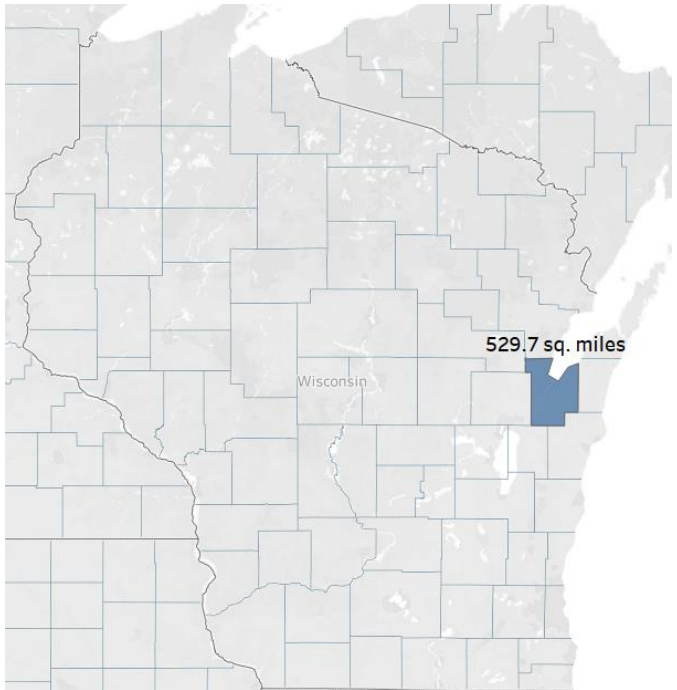
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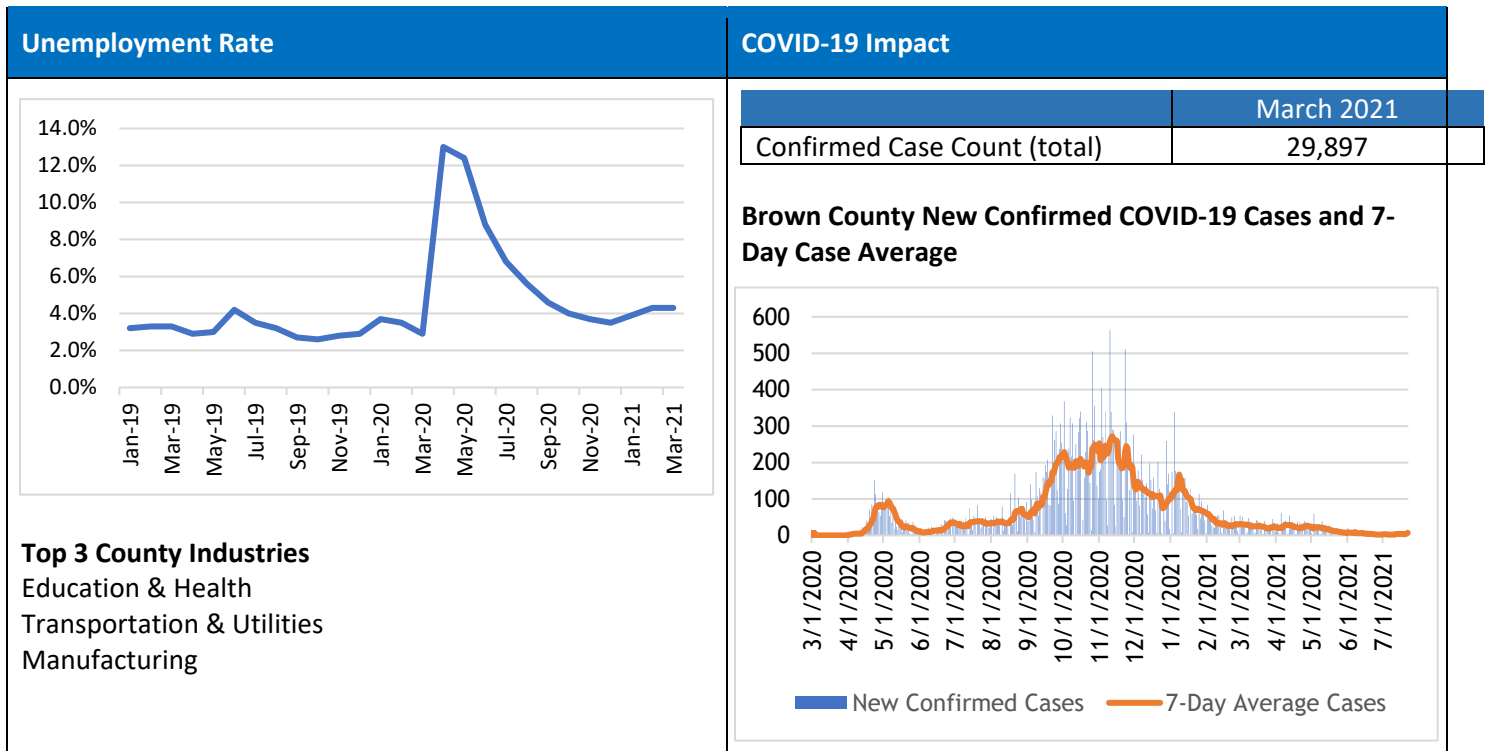
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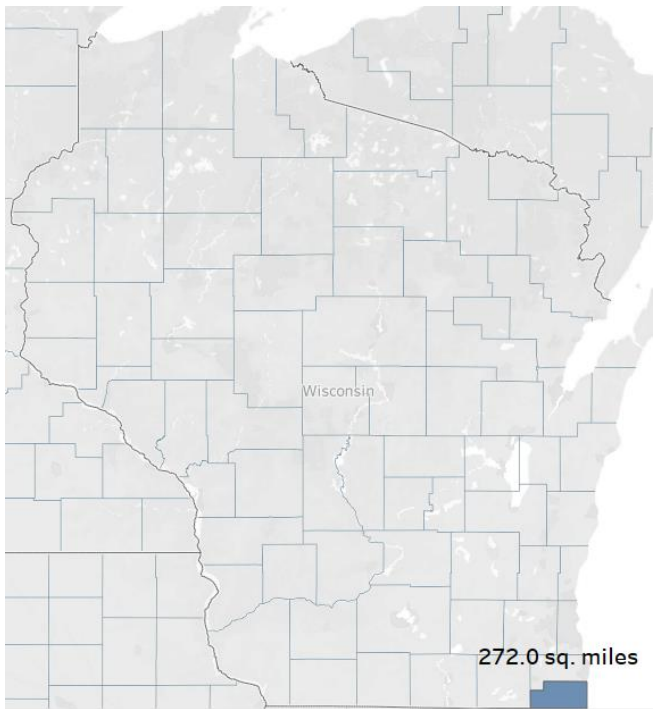
Appendix A.1: Brown County Profile

<table>
<tr><td colspan="2" align="center">**Brown County**</td></tr>
<tr>
<td>
Lead Agency: Brown County Child Support Agency
Employment Partner: N/A
Parenting Partner: University of Wisconsin Extension
Study Enrollment as of March 2021: 77
County Offers Children First? No
</td>
<td>

529.7 sq. miles
Wisconsin
</td>
</tr>
</table>

County Characteristics	
	January 2020
Population	264,542
Educational Attainment (%)	
HS Graduate or Higher	92.0%
Bachelor's Degree or Higher	29.6%
Population Below Poverty Level (%)	8.6%
Children Below Poverty Level (%)	13.8%
Median Household Income ($)	$59,963
Race (%)	
White	87.8%
Black/African American	3.0%
American Indian and Alaskan Native	3.4%
Hispanic or Latino	9.0%
Asian	3.4%
Native Hawaiian/Pacific Islander	0.1%
2 or More Races	2.4%

Unemployment Rate	COVID-19 Impact

Top 3 County Industries
Education & Health
Transportation & Utilities
Manufacturing

	March 2021
Confirmed Case Count (total)	29,897

Brown County New Confirmed COVID-19 Cases and 7-Day Case Average

Appendix A.2: Kenosha County Profile

Kenosha County	
Lead Agency: Child Support Agency, Division of Workforce Development, Kenosha County Department of Human Services **Employment Partner:** Goodwill Industries, Inc. **Parenting Partner:** Sharmain Harris & Associates **Study Enrollment as of March 2021:** 61 **County Offers Children First?** Yes	 Wisconsin 272.0 sq. miles

County Characteristics	
	January 2020
Population	169,561
Educational Attainment (%)	
HS Graduate or Higher	90.2%
Bachelor's Degree or Higher	25.7%
Population Below Poverty Level (%)	12.0%
Children Below Poverty Level (%)	9.9%
Median Household Income ($)	$60,293
Race (%)	
White	87.2%
Black/African American	7.4%
American Indian and Alaskan Native	0.8%
Hispanic or Latino	13.5%
Asian	1.8%
Native Hawaiian/Pacific Islander	0.1%
2 or More Races	2.8%

Unemployment Rate
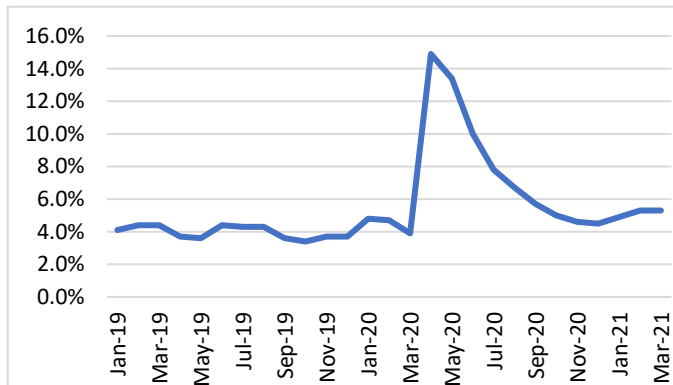
Top 3 County Industries
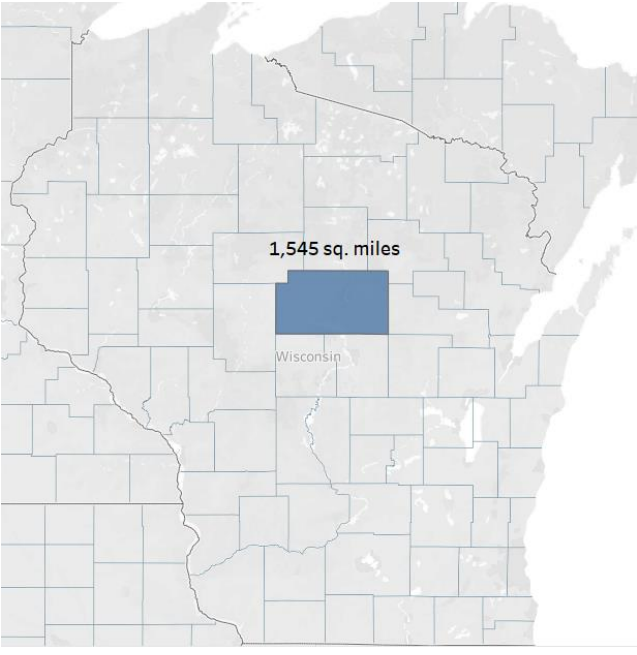Transportation & Utilities
Education & Health
Manufacturing

COVID-19 Impact

	March 2021
Confirmed Case Count (total)	14,662

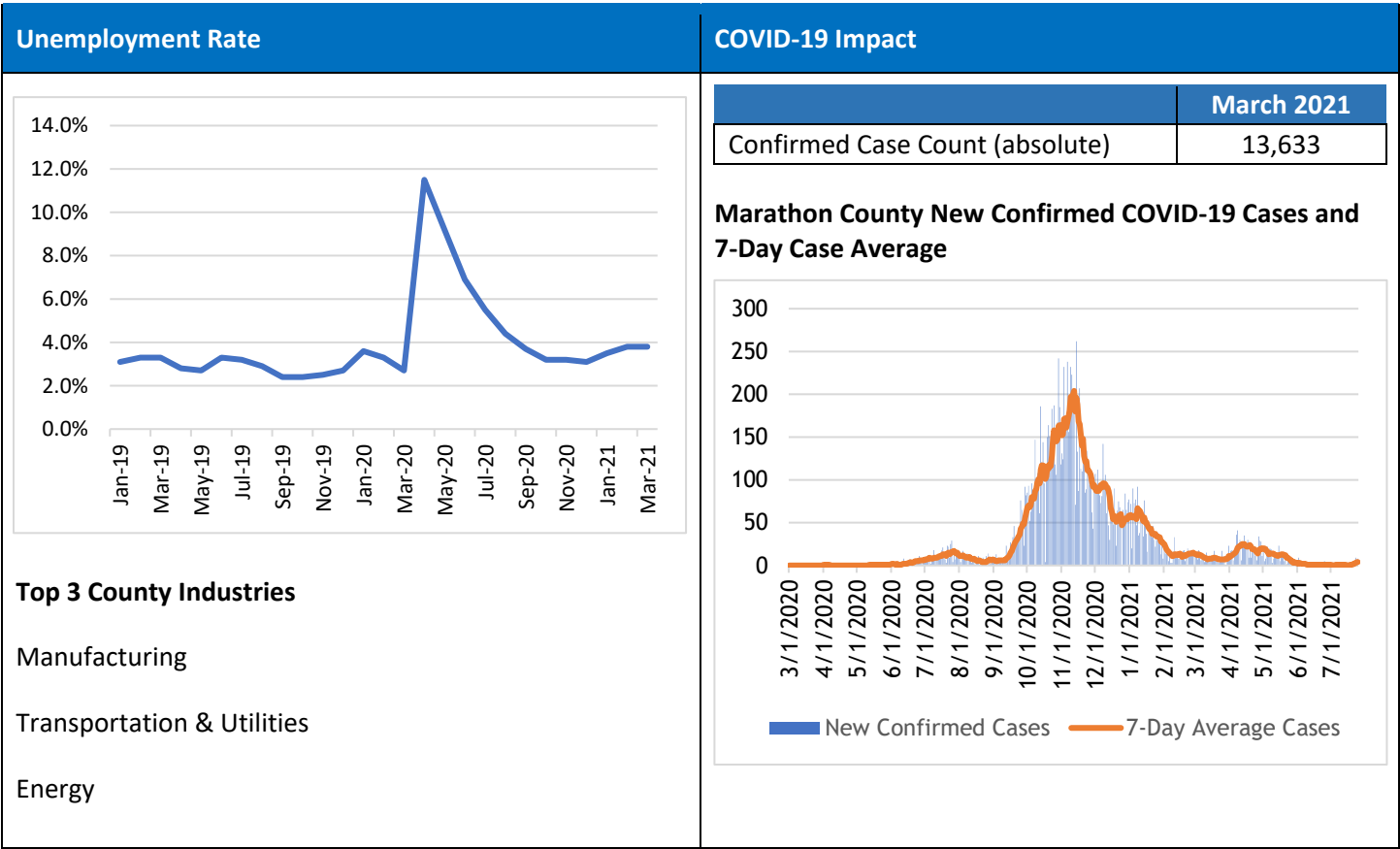**Kenosha County New Confirmed COVID-19 Cases and 7-Day Case Average**
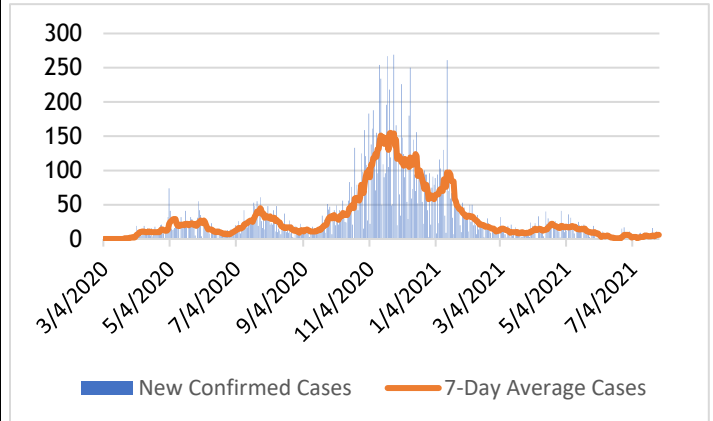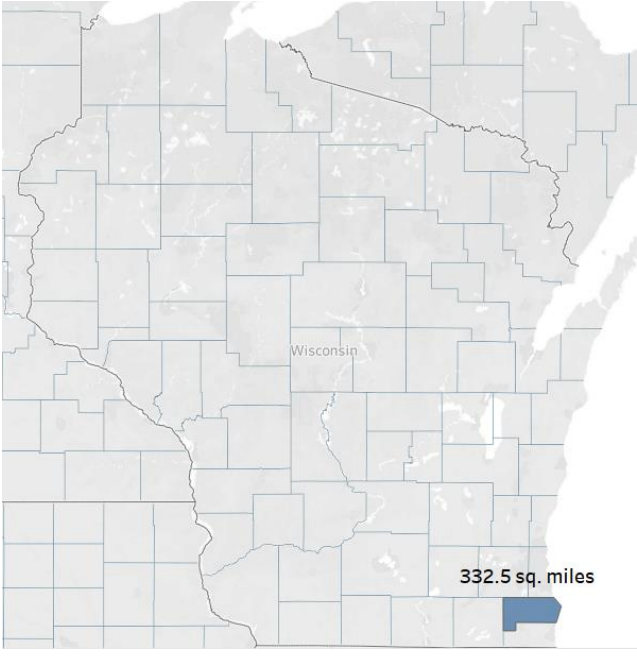
Appendix A.1: Marathon County Profile

Marathon County

Lead Agency: Marathon County Department of Social Services - Child Support **Employment Partner:** N/A **Parenting Partner:** Ruby Shines **Study Enrollment as of March 2021:** 71 **County Offers Children First?** No	1,545 sq. miles Wisconsin

County Characteristics	

	January 2020
Population	135,692
Educational Attainment (%)	
HS Graduate or Higher	91.7%
Bachelor's Degree or Higher	25.6%
Population Below Poverty Level (%)	7.5%
Children Below Poverty Level (%)	11.1%
Median Household Income ($)	$59,543
Race (%)	
White	90.8%
Black/African American	0.9%
American Indian and Alaskan Native	0.6%
Hispanic or Latino	3.0%
Asian	6.1%
Native Hawaiian/Pacific Islander	0.1%
2 or More Races	1.6%

Unemployment Rate	COVID-19 Impact

	March 2021
Confirmed Case Count (absolute)	13,633

Top 3 County Industries

Manufacturing

Transportation & Utilities

Energy

Marathon County New Confirmed COVID-19 Cases and 7-Day Case Average

**Appendix A.4: Racine County Profile**

<table>
<tr><td colspan="2" align="center">**Racine County**</td></tr>
<tr>
<td>
Lead Agency: Racine County Office of Child Support Services

Employment Partner: Racine County Workforce Solutions

Parenting Partner: Racine Family YMCA

Study Enrollment as of March 2021: 60

County Offers Children First? Yes
</td>
<td>

Wisconsin

332.5 sq. miles
</td>
</tr>
</table>

County Characteristics	
	January 2020
Population	196,311
Educational Attainment (%)	
HS Graduate or Higher	90.0%
Bachelor's Degree or Higher	24.7%
Population Below Poverty Level (%)	12.6%
Children Below Poverty Level (%)	16.9%
Median Household Income ($)	$59,749
Race (%)	
White	83.3%
Black/African American	12.0%
American Indian and Alaskan Native	0.7%
Hispanic or Latino	13.6%
Asian	1.3%
Native Hawaiian/Pacific Islander	0.1%
2 or More Races	2.6%

	Unemployment Rate		COVID-19 Impact

Unemployment Rate
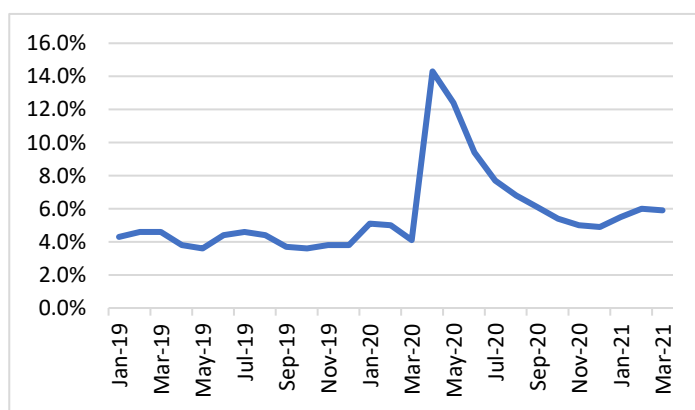
Top 3 County Industries

Manufacturing

Education & Health

Trade, Transportation & Utilities

COVID-19 Impact

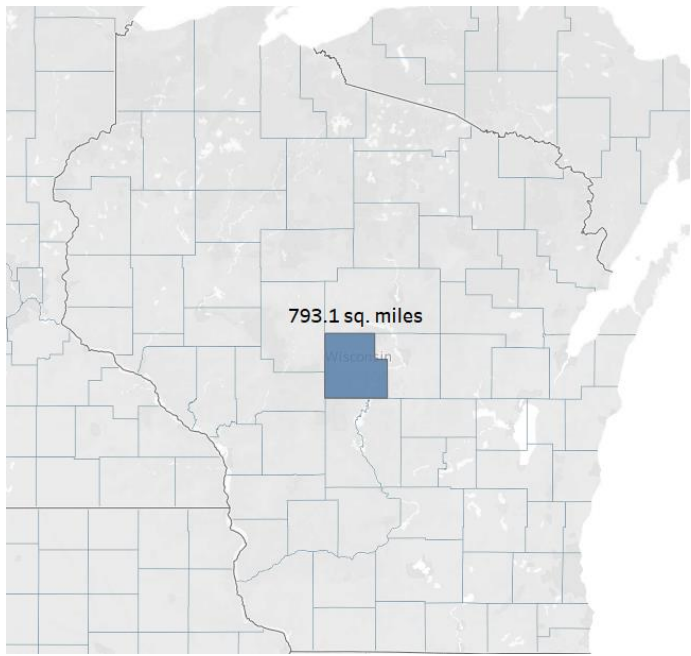|	March 2021
Confirmed Case Count (total)	20,252

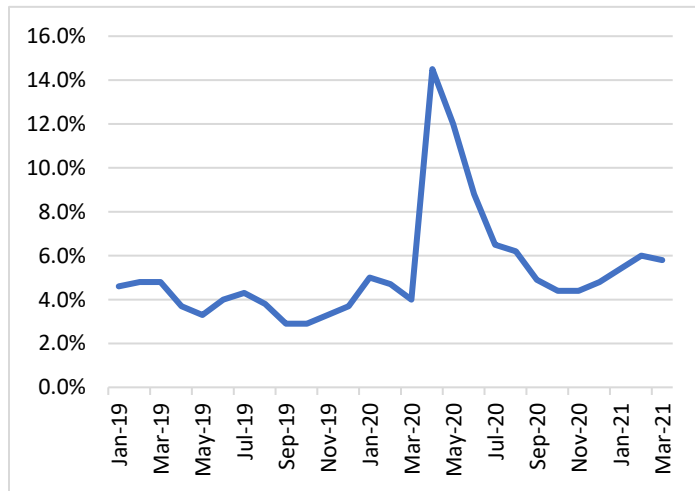**Racine County New Confirmed COVID-19 Cases and 7-Day Case Average**
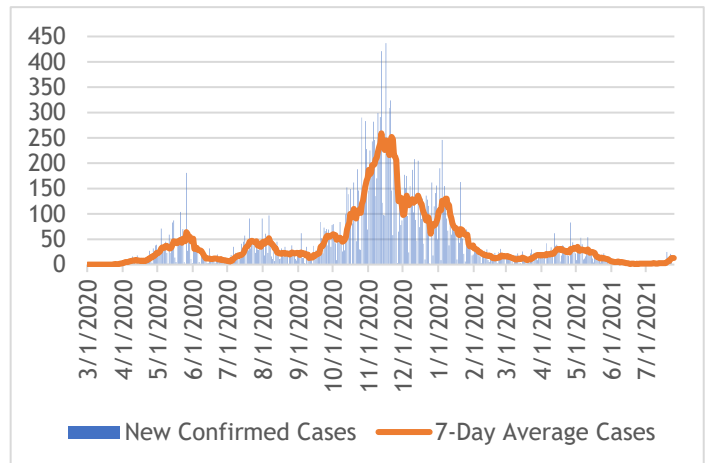
Appendix A.5: Wood County Profile

Wood County

Lead Agency: Wood County Child Support

Employment Partner: CW Solutions

Parenting Partner: CW Solutions

Study Enrollment as of March 2021: 51

County Offers Children First? Yes

793.1 sq. miles

County Characteristics		
		January 2020
Population		72,999
Educational Attainment (%)		
HS Graduate or Higher		92.8%
Bachelor's Degree or Higher		21.6%
Population Below Poverty Level (%)		10.1%
Children Below Poverty Level (%)		20.2%
Median Household Income ($)		$53,473
Race (%)		
White		94.7%
Black/African American		1.0%
American Indian and Alaskan Native		1.0%
Hispanic or Latino		3.2%
Asian		2.0%
Native Hawaiian/Pacific Islander		N/A
2 or More Races		1.3%

Unemployment Rate	COVID-19 Impact

Top 3 County Industries

Education & Health

Trade, Transportation & Utilities

Manufacturing

	March 2021
Confirmed Case Count (total)	6,673

Wood County New Confirmed COVID-19 Cases and 7-Day Case Average