The Institute for Child and Family Well-Being: Practice Brief

Mobility Mentoring

Mobility Mentoring offers a roadmap to growth and self-sufficiency through coaching, goal-setting, and the celebration of achievement.

The ability to regulate thoughts, emotions, and behavior is central to a productive and prosperous adult. These skills inform navigating stressful situations, developing long-term plans, understanding the impacts of immediate decisions on those long-term objectives, and parenting children. They serve as key ingredients to providing a nurturing environment that supports the health and well-being of children.

Mobility Mentoring is changing our program, and for the better! Relationships between participants and workers will benefit greatly from this shift.

Children's WisconsinFamily Support Specialist

Executive Functioning refers to the coordination of multiple types and streams of information to arrive at the more effective course of action, including prioritizing tasks, goals, and informationⁱ. Executive functioning is a skill developed through practice, using age-appropriate experiences, and is the foundation for healthy development, cognitive functioning, and successful self-regulation. Strength of executive function skills is predictive of academic and career outcomes.

Mobility Mentoring® (MM) is an innovative, evidence-informed coaching model, developed in 2009 by EMPathⁱⁱ, which focuses on building self-sufficiency, defined as free from government assistance, i.e. mobility out of poverty. MM goes beyond helping clients attain specific goals by helping them acquire the problem-solving and goal-setting skills necessary for successfully managing their lives. The model is built on a foundation of evidence-based Motivational Interviewing (MI), which utilizes incentives and the Bridge to Self Sufficiency rubric to determine their individualized goals within each of the model's five pillars:

- Family Stability
- Well-Being
- Financial Management
- Education/Training and
- Employment/Career Management.

By using *extrinsic* motivation through fiscal and recognition incentives, Mobility Mentoring has shown to increase *intrinsic* motivation, which is identified as a key ingredient for people who report success and happiness in their careersⁱⁱⁱ. An evidence-informed strategy, incentives are also used to present clear, and immediate, benefit of participation when future benefits may be too abstract for participants to see^{iv}. Incentives have shown effectiveness in improving adolescents' adherence to treatment for the adolescent HIV-infected population (when paired with MI)^v, increased after-school program attendance^{vi}, and increased rates of abstinence from cannabis use over and above evidence-based treatment alone^{vii}.

The Institute for Child and Family Well-Being (ICFW) has been supporting dissemination of Mobility Mentoring as an intervention that provides structure and evidence-informed approaches



to case management roles that serve families who are impacted by poverty, trauma and complex challenges. Mobility Mentoring is:

- Trauma informed
- Executive-Functioning informed
- Strengths based
- Affordable
- Adaptable
- Includes supported implementation

Outcomes for Mobility Mentoring includeviii:

- 94% of MM participants are working or in school
- 68% of participant goals are completed
- 76% of participants increase their credit scores
- 59% of participants unemployed at the start were employed by the end of the program
- 57% increased earned income within 24 months
- 43% of participants newly enroll in educational or training programs
- 20% decrease in public subsidies

Through the use of human-centered design and training assistance, the ICFW has been supporting implementation of Mobility Mentoring in the Children's Family Support program, which works with parents of children who have been placed in foster care. While this implementation is early in the process, some of the early lessons learned include:

- Positive response by staff to the Bridge to Self Sufficiency as a tool;
- The flexibility of the model facilitates implementation within the program limitations;
- Challenges in obtaining funding for fiscal incentives;
- Alignment with existing program theory and purpose.

If you're interested in learning more about Mobility Mentoring, please explore these resources:

- Empath Mobility Mentoring
- The Intergenerational Mobility Project
- Using Brain Science to Design New Pathways Out of Poverty

Citations

viii Empath: Economic Mobility Pathways (2018). Mobility Mentoring 2018 Impact Report



Mobility Mentoring supports

Functioning through goal setting

development of Executive

and extrinsic motivation.



¹ Center on the Developing Child at Harvard University (2016). Building Core Capabilities for Life:

The Science Behind the Skills Adults Need to Succeed in Parenting and in the Workplace.

http://www.developingchild.harvard.edu

[&]quot;EMPath – Economic Mobility Pathways. Mobility Mentoring® – In the knowledge-based economy, snapping the cycle of poverty is more complex than ever. https://www.empathways.org/approach/mobility-mentoring.

^{III} L Pavetti, M Stanley (2016). Using incentives to increase engagement and persistence in two-generation programs: a review of the literature with key insights. Family Income Support-Center on Budget and Policy Priorities

^{IV} L Pavetti, M Stanley (2016). Using incentives to increase engagement and persistence in two-generation programs: a review of the literature with key insights. Family Income Support-Center on Budget and Policy Priorities

^v Charania A, Webb H, Cox D, et al P073 Do financial incentives (FI) and motivational interviewing (MI) promote adherence in vertically infected HIV positive adolescents? Sex Transm Infect 2017;93:A40-A41.

vi Vandell, D., Pierce, K.M., & Dadisman, K.(2005). Out-of-school settings as a developmental context for children and youth. Advances in Child Development and Behavior, 43, 43-77.

vii Stanger, C., Ryan, S. R., Scherer, E. A., Norton, G. E., & Budney, A. J. (2015). Clinic-and home-based contingency management plus parent training for adolescent cannabis use disorders. *Journal of the American Academy of Child & Adolescent Psychiatry*, *54*(6), 445-453.