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SPECIAL SECTION

Promoting Self-Determination and Financial Security through Innovative Asset Building Approaches

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Topic: Studies indicate that asset development programs such as Individual Development Accounts (IDAs) can enhance the economic security of low-income populations; however, only a handful of asset development programs have been implemented specifically to serve people with psychiatric disabilities, and larger programs have not collected disability-specific information. *Purpose:* The purpose of this article is to increase our knowledge about the use of IDAs to enhance self-determination and recovery for people with psychiatric disabilities.
Sources used: Background information about IDAs is presented followed by case studies of two IDA programs that serve people with psychiatric disabilities.
Conclusions: The use of IDA programs in enhancing self-determination among people with psychiatric disabilities is discussed, along with barriers and future directions.

Keywords: recovery, postsecondary, community mental health, consumer direction

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Background

Numerous studies have shown that substantial proportions of individuals with severe mental illness have annual incomes falling at or below the federal poverty level (Cook, 2006). Other studies have demonstrated that low-income individuals, including those with disabilities, can effectively work their way out of poverty (Cook et al., 2008). Still other studies have shown that asset development programs can enhance the economic security of low-income populations through the purchase of homes and increasing earned income (Schreiner et al., 2003). What has not been fully demonstrated is the extent to which asset development programs, in combination with effective clinical treatment, supported employment, and consumer-operated services, can accelerate the recovery of individuals with severe mental illness and permit them to decrease or eliminate their reliance on government-funded disability income support programs.

Individual Development Accounts (IDAs) are savings accounts held by low-income, employed individuals into which they deposit earnings from their jobs that are then matched by additional monies from the government and private organizations. IDAs are based on the theory that asset development is essential to elevating people from poverty (Sherraden, 1991), coupled with the knowledge that Americans are asset-poor. To address this problem, the Assets for Independence Act of 1997 created demonstration projects to determine the effects of helping low-income individuals to accumulate financial assets through IDAs. Assets for Independence Act IDAs are administered by the federal Department of Health and Human Services, Office of Community Services under the Administration for Children and Families.

Assets for Independence Act IDAs involve partnerships with local IDA program sponsors (usually non-profit organizations) and private matching donors. For every $1 saved by a participant, the federal Assets for Independence Act matches $1. The private donor matches at least $1 for each $1 saved. As a result, each individual receives at least $2 for each $1 they save in an IDA. The participants' IDA savings must be from earned income and can be used for the purchase of specific assets: a first home; small business capitalization; or post-secondary education (some states allow for other asset purchases).

The local IDA program recruits IDA participants and provides them with general and asset-specific financial education, and identifies a local bank or credit union that will open and maintain the IDA accounts. In general, participants must earn less than 200% of poverty level ($20,799/year in 2009 for an individual), and SSI/SSDI and TANF recipients are eligible. Assets for Independence Act matches are usually capped at $2,000 per participant, although private matches can be higher. As of 2008, there are about 73,000 IDAs run by more than 540 community-based organizations in nearly every state and the District of Columbia (Corporation for Enterprise Development, 2008).

From 1997 to 2003, the Corporation for Enterprise Development conducted the first national demonstration and study of IDAs, called the American Dream Demonstration. This study included 2,353 participants in 14 programs across the United States (Schreiner et al., 2003). In summary, the Demonstration evaluators determined that people who are identified as living at or well below federal poverty level can save using IDAs, that racial/ethnic wealth gaps persist, that IDA program characteristics are important predictors of participant outcomes, and that IDAs are costly because of high levels of individual service provided (Schreiner et al., 2003).

IDA Demonstration and People with Disabilities

The American Dream Demonstration did not collect disability-specific data, despite the high poverty rate among people living with disabilities. However, Lombe and colleagues (2008) used the Demonstration data to explore relationships between proxy measures of disability status (receipt of Supplemental Security Insurance (SSI) and/or Social Security Disability Insurance (SSDI)) and savings outcomes. They used data from the only experimental trial in the Demonstration, the Community Action Program of Tulsa County, in which participants were randomly assigned to either the IDA program (n=537) or a control group (n=566). Over one-third (39%) of IDA study participants were identified as having a disability.

The outcome studied by Lombe and colleagues was average monthly net deposit, which is calculated as net deposits divided by months of participation. Univariate analyses showed that the disability group had significantly lower average monthly net deposit than the non-disability group ($20.72 vs $26.07). In multiple regression analysis, disability status was significantly and negatively associated with average monthly net deposit. In addition, older age, college education, smaller household size and higher household income were positively associated with average monthly net deposit, while African American race was negatively associated with average monthly net deposit. The analysis included measures of program characteristics and found that hours of asset-specific education were positively associated with average monthly net deposit, although hours of program participation, staff contact and general financial education were not. Hierarchical analyses suggested that program characteristics diminish the negative effect of disability status, but only marginally. The measures of disability used in this analysis do not distinguish by type of disability. However, given the high proportion of SSDI and SSI enrollees known to have psychiatric disabilities, it is likely that this group was well represented.

IDA Programs Serving People with Mental Illness

Although people with psychiatric disabilities are likely to live in poverty and possess few assets (Cook, 2006), few IDA programs to date have specifically targeted this population. Therefore, the extent to which asset development programs, in combination with effective clinical treatment and supported employment services, can accelerate the recovery of individuals with severe mental illness and enhance self-determination is untested. What follows are case studies of two IDA programs that were implemented specifically to serve people with psychiatric disabilities. The following program elements are described in detail: program administration; participant recruitment and retention; financial literacy education; credit and debt management; deposit requirements and match rates; program policies and procedures; ongoing support; mental health and vocational services; and program partnerships and collaborations.

Illinois: University of Illinois at Chicago and Thresholds

Since 2006, the National Research and Training Center on Psychiatric Disability (NRTC) at the University of Illinois at Chicago (UIC) has operated an IDA program specifically designed for people with psychiatric disabilities. The following describes a program run from 2006-2009, in partnership with Thresholds, a large psychiatric rehabilitation center in Chicago that serves 5,000 adults throughout the city and surrounding suburbs.

Program Administration. Money for program administration came from a five-year grant that funds the NRTC, awarded by two federal agencies: the National Institute on Disability and Rehabilitation Research of the U.S. Department of Education; and the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration. Asset Builders is a non-profit asset development organization in Chicago that provided IDA administrative support, coordinated access to the banking institution, and provided the federal match. A small philanthropic organization called the Rebecca Susan Buffett Foundation with an ongoing interest in mental health issues provided the local match for the program. A final partner was the IDA program's Community Advisory Board, comprised of asset development experts, a poverty law advocacy organization, people in mental health recovery, and family members.

Recruitment and Retention. All participants in the UIC IDA Program were recruited from Thresholds. UIC staff distributed a one-page overview of the program and held informational meetings at Thresholds to introduce the program. Thresholds staff also discussed the opportunity with potential participants individually, and encouraged them to attend the informational meetings. Meeting attendees were asked to complete a *Participant Needs Assessment* that included questions about their employment, monthly income, willingness to participate in financial education activities, and ability to save a set amount of money each month. At the end of the two-month recruitment period, six individuals had decided to enroll in the program's financial education classes. Although Thresholds has many members, recruitment was limited to a small group because of the finite amount of private matching funds available. In addition, finding members who were employed, available to take the financial education class, and willing to start saving, was more challenging than anticipated.

Financial Literacy Education. In partnership with its Advisory Committee, UIC IDA Program staff reviewed several financial literacy education curricula to determine which would best meet the needs of people with psychiatric disabilities. The group decided to adapt a financial education program called *All My Money,* authored by the University of Illinois Extension Program. *All My Money* is a well-regarded curriculum geared towards lower-income individuals with low literacy. UIC staff participated in a four-day training to learn how to deliver the curriculum. They subsequently requested and received permission from its authors to adapt *All My Money* for the target audience. The adapted curriculum, *Financial Education for Persons in Recovery*, is taught in six, two-hour sessions that are highly interactive and hands-on. Topics include: identifying values and financial goals; tracking and managing income vs. expenses; managing debt; understanding credit; using financial institutions; and building savvy consumer skills. Lessons involve hands-on budgeting activities, small group activities, and homework. As part of the course, UIC staff help each participant learn how to obtain and read their credit reports.

Each of the six class participants successfully completed the financial education course, and five decided to apply to open IDAs. The remaining participant lost her job before course completion, and decided that she needed more time to establish steady employment. IDA staff helped participants complete the application forms used by Asset Builders and gather documentation such as tax returns and evidence of employment. All five remaining participants opened their IDA accounts in December 2006, and saved monthly through August 2009.

In addition to their general financial education, UIC IDA Program participants received ongoing financial literacy and asset-specific training. Ongoing education addressed topics such as personal budget management, holiday spending, avoiding spending traps, and managing psychiatric symptoms that could lead to ill-advised expenditures. Depending on their asset goal, participants received education about homeownership, starting a microbusiness, and navigating the postsecondary financial aid process. Program staff also helped participants obtain some external asset-specific education, provided by banks, mortgage lenders, and community colleges.

Deposit Requirements and Match Rates. Participants were required to deposit at least $25 of earned income per month into the IDAs. The match rate was 2:1, $1 from the federal program + $1 from the private donor for each $1 saved by a participant. Participants were permitted to deposit more than the maximum amount and to make additional deposits in their accounts each month if they wished, and many did. All participants were encouraged to use direct deposit from their paycheck into their IDA, and three did so throughout the program.

Ongoing Budget Review and Mutual Support. Throughout the savings period, UIC IDA staff met with participants at group meetings as well as individually and by telephone. Ongoing support included monthly budget reviews and credit counseling. Budget reviews helped participants examine their expenditure patterns and plan for any needed adjustments. Meetings provided time for participants to discuss barriers they faced in making their monthly deposits and share strategies for resolving these problems. Credit counseling addressed ongoing credit repair and tracked participants' progress in reducing debt and improving their credit histories. While this proved stressful for some participants, they also gained confidence as their scores improved and they came to see how a positive credit history contributed to their economic security. These ongoing sessions combined professional and peer support for staying on track with asset accumulation goals. For example, when two participants experienced job interruptions, meetings focused on providing emotional reassurance, re-connecting them to the agency's employment support program, and working with Asset Builders to ensure that their accounts would remain open even when they weren't making deposits. Close communication between participants and the UIC team meant that these participants knew they could withdraw their savings if they needed to, during their unemployment. However, both were able to avoid doing so and resume their monthly deposits upon regaining employment.

UIC staff hosted annual IDA Program celebrations to mark the conclusion of each year of successful savings. At these events, participants, their guests, and staff shared a cake and other refreshments, and each saver received a small gift honoring his or her accomplishments. At the program's first annual celebration in December 2007, a representative from the Chicago Mayor's Office for People with Disabilities attended and spoke about everyone's positive efforts, while participants reflected publicly on their achievements in saving and pursuing asset-specific goals.

Mental Health and Vocational Services. While participating in the program, savers received a range of recovery oriented rehabilitation services offered by Thresholds based on individualized rehabilitation plans. Since Thresholds was a project partner, clinical and vocational service providers were highly supportive of the participants' IDA savings goals, and worked closely with the Thresholds staffer assigned to the project, as well as with UIC IDA Program staff. This cooperative relationship was key to the successful working of the program. Also important was the full array of vocational services available to participants, including career counseling, job development and placement, ongoing workplace support, and benefits counseling.

Participant Outcomes. Three of the five participants were able to complete their savings plan and make their IDA purchases. The other two had excellent savings, but did not match due to non-IDA issues related to their benefits rather than an ability to save or make purchases. One of these two participants decided to stop working because her income (although part-time and below Substantial Gainful Activity) threatened her medication benefits. She withdrew her savings (with interest) in February 2009, and has pursued volunteer work. The other non-matched saver was preparing to purchase a home and had saved over $2,000. The UIC IDA team linked him with a City of Chicago housing program that provided home ownership classes, down payment grants, and pre-approved him for a $100,000 mortgage. Unfortunately, just at this point the Social Security Administration challenged his disability status at his continuing review. He decided not to take on a mortgage while his SSDI benefit was in question. He also withdrew his unmatched funds plus interest, but plans to keep on saving. When his benefit issue is resolved, he will contact the UIC IDA team who will again help him to link with city and state homeownership programs.

The other three participants matched successfully. Two of these purchased higher education. One had an Associates Degree and is now pursuing a Bachelors Degree. Her savings and match paid for four undergraduate classes and textbooks at a state university that was her institution of choice. UIC IDA staff had provided asset-specific education and support since 2008, including help identifying and visiting schools, meeting with admissions staff, submitting applications, attending orientation and academic advisor meetings, and arranging for paratransit to and from classes. The other participant already had a Master's degree and is seeking a doctoral degree. His savings and match paid for two graduate classes at a state university. UIC IDA staff continues to follow up with these participants and will assist them in establishing new education IDAs next year. The final participant used his savings and match to capitalize a small business. UIC IDA staff assisted him with developing his business plan, identifying needed equipment and supplies, selecting vendors, designing marketing materials, and applying for a business license and bonding. Table 1 shows each of the five participants' total deposits, match, total saved, and asset specific purchase.

Partnerships and Collaborations. The UIC IDA Program was successful as a result of key organizational partnerships. Thresholds served as the clinical and vocational service provider for program participants, helped recruit members, provided space for meetings, provided a dedicated staff liaison between the savers and UIC staff, and prepared reports to UIC regarding the savers' monthly deposits. Thresholds also identified the program's local match that came from the Rebecca Susan Buffett Foundation. Asset Builders provided support to the UIC IDA Program via its Assets for Independence grant, through which it reviewed participant applications, worked with the banking institution to set up accounts, monitored monthly savings, collected federally mandated reporting and evaluation data, and paid out the match at the end of the three years of participation. Charter One Bank provided accounts, monthly statements, direct deposit services, and affordable financial services for program participants. Finally, the program's Community Advisory Committee, comprised of IDA experts, disability policy scholars, and people with psychiatric disabilities, provided information, linked the program to resources, and offered solutions to barriers encountered at different phases of program startup and operation.

Lessons Learned. The major lessons learned from operating this program were that ongoing financial education, supported employment, and benefits counseling are key to successful IDA completion. In addition, the psychiatric rehabilitation services received by participants were important to them, as was the social support and camaraderie engendered through group celebrations and milestone markers. In the two cases where savers did not complete their IDA plans, this was not because they were unable to save. Instead, concern over loss of benefits due to earnings, not assets, caused individuals to stop saving and close their accounts.

Future Directions. In 2009, the UIC NRTC began a new IDA program in partnership with Assets Illinois, a program sponsored by the Illinois Department of Human Services that administers a statewide Assets for Independence IDA Initiative. UIC's new IDA program will support a second group of savers with psychiatric disabilities who are saving for postsecondary education. Participants can save for up to 3 years, a maximum deposit of $650, with a 3:1 match with a cap of $1,950. This can be used to pay for tuition, books, and school supplies at an accredited city college, community college, state university or other public higher education institution. The program is recruiting participants from a number of local mental health agencies, the National Alliance on Mental Illness of Greater Chicago, the Illinois Department of Rehabilitation Services, and the Center's own staff with psychiatric disabilities. Thus far, twelve people have enrolled in the program with recruitment still underway.

New Jersey: Collaborative Support Programs of New Jersey and Community Enterprise Corporation

Table 1–University of Illinois at Chicago/Thresholds IDA Program Participant Outcomes

Participant	Savings Deposit with Interest	2:1 Match	Total Asset	Asset Specific Purchase
1	1,152.34	2,304.74	3,457.08	Undergraduate tuition, fees, books
2	763.80	1,527.60	2,291.40	Graduate tuition, fees
3	758.92	1,517.84	2,276.76	Microenterprise
4	2,696.57	—	2,696.57	Closed 9/4/09
5	2,362.06	—	2,362.06	Closed 2/28/09
Program Total	**7,733.69**	**5,350.18**	**13,083.87**	

The IDA program administered by Collaborative Support Programs of New Jersey, Inc. (CSP-NJ) and Community Enterprise Corporation (CEC) is one component in an array of financial services offered by CEC. The agency believes that reducing stress around financial concerns enhances people's physical and mental health, which in turn supports wellness, recovery, and the ability to live in the community of one's choice (Swarbrick & Stahl, 2009). This array of financial services is designed to help participants develop the capacity to manage their money, pay their bills and taxes, improve their credit, and accumulate personal assets (Swarbrick & Stahl, 2009). The following describes the CEC IDA program administered from 2002-2007.

Table 2–Collaborative Support Programs of New Jersey IDA Program Participant Outcomes

# Participants	25
# Savings Plans Completed	19
Total Savings	$46,313
Assets for Independence Match	$72,659
Local Match (CSP)	$25,579
Local Match (other)	$17,417
Asset-Specific Purchases	3 homes 9 degrees & certifications 7 micro-enterprises
Total Invested in Assets	**$161,968**

Program Administration. CSP-NJ and CEC's first IDA program ran from June 2002 through September, 2007. This project was conducted in collaboration with the State of New Jersey Department of Community Affairs and included 41 participants. The majority of participants was male (61%); 23% identified as African American/black, 13% as Hispanic/Latino, and 59% Caucasian/white. Over three-quarters (77%) were single, and 80% of the participants were 40 year of age or older. Most worked part time, and almost all had a previous relationship with the agency through either the CSP-NJ supportive housing program or the agency's large network of peer-operated self-help centers.

Recruitment and Retention. All of the CSP-NJ participants are individuals living with a psychiatric disability in addition to other coexisting disabilities and special needs. Program members who were interested in learning more about IDAs were asked to complete a Prospective Participant Questionnaire that included questions about monthly income and income sources. Next, they were required to complete a Potential Participant Application Form, which elicited more detailed personal information, including employment information and household financial information. Applicants were advised of the emergency withdrawal policy and asked to verify their income by providing their tax return or other documentation. Next, an Asset Decision Tool was completed to indicate their intention of saving for the purchase of a home, capitalization of a business, or pursuit of education. They also completed a Beneficiary Designation Form, a Financial Institution Release Form so that CEC could obtain information about their bank deposits, and an Agreement for Services including authorization for the program to request a credit report and conduct a credit review. The credit report provided the program with a detailed review of credit history and problems, enabling participants to identify credit problems and begin the progress of credit repair. Following review of each participant's eligibility criteria, the IDA Program Manager accepted eligible participants into the program.

Financial Literacy Education. Upon entry into the program, participants were required to complete eight two-hour classes of basic financial literacy education, covering: 1) Basic Banking; 2) Budgeting; 3) Credit 101; 4) Understanding your Relationship to Money; and 5) Saving and Investing. Next, participants could choose from a number of elective courses on topics such as predatory lending practices, insurance, taxes, and consumer rights and responsibilities. A second phase of education provided a 10-hour asset specific course designed to prepare participants for their specific asset purchase and retention. The homeownership curriculum included classes on home loan financing, qualifying for a mortgage, shopping for a home, the loan application process, homeowner's insurance, the closing process, home maintenance and repair, and preventing foreclosure. The small business development curriculum covered the basics of starting a small business, developing a business plan, and business management. Finally, the post-secondary education curriculum included classes on career choice, aptitude assessment, choosing a college, the application process, reasonable accommodations, and financial aid. In addition to these courses, one-on-one case management meetings were available to participants, as needed, before, during and after the asset specific purchase.

Monthly Review and Credit Counseling Goals. Monthly reviews and credit counseling sessions with program staff encouraged participants to monitor the growth of their IDA accounts and increasing wealth. Reviewing how much had been saved, and how much match has been allocated to their account helped keep participants interested and committed. Many of the financial barriers causing people stress and insecurity were addressed through planning, budgeting, saving, and credit repair.

Credit and Debt Management Goals. While the IDA program was not specifically designed to pay off debt, but rather to increase assets, participants also completed credit repair activities to help eliminate any barriers to obtaining their desired asset. Many paid off consumer debt and raised their credit scores in order to qualify for loans necessary to the attainment of their desired asset. Participants also learned about predatory lending practices and how to avoid these.

Project Reserve and Project Participant Accounts. Segregated cash accounts were maintained at a financial institution insured by the Federal Deposit Insurance Corporation. This involved three separate accounts: an account for the federally funded Assets for Independence project reserve match, an account for the non-federal local match, and an account for the individual participant's savings. Corresponding accounts were opened on the books of the agency reflecting each participant's savings as well as both matches. The bookkeeping for deposits and withdrawals was performed by the agency, with monthly account reconciliation and account statements sent to participants on a monthly basis.

Deposit Requirements and Match Rates. Participants were required to deposit between $25 and $100 per month. The match rate was 2:1. The maximum amount the program matched for home ownership was $2,000, and $1,000 was matched for business capitalization or education. Participants were permitted to save more than the maximum amount in their own accounts if they wished.

Premature Account Withdrawals. Withdrawals prior to savings completion were allowed after six months for qualified expenses or an emergency, with the written approval of the IDA Manager. Emergencies were defined as the need for medical care, to prevent eviction/foreclosure, or to meet living expenses. Emergency withdrawals had to be repaid within 12 months or the participant was removed from the program and forfeited all matched funds. Participants could also apply for a "leave of absence" of up to six months. This did not allow them to access IDA funds, but did provide a planned respite from the obligation of monthly deposits. Amendments to some of these policies were possible (e.g., extension of time lines), but could only be made by agreement of both the agency and the account holder. To prevent emergency savings withdrawals from IDA accounts, CEC established a zero interest Emergency Loan Program to help participants deal with unanticipated shortfalls, and the CEC Money Management-Bill Pay account, which provided individual budgeting and bill paying assistance (Swarbrick & Stahl, 2009). The IDA Manager also specifically monitored IDA participants' progress and specific life circumstances to anticipate problems, and put preventative measures in place whenever possible.

Participant Outcomes. Forty-one participants enrolled, defined as opening an account, starting to save and attending most of the financial education classes. Twenty-five completed all of the financial education classes and 19 of the 25 participants successfully completed their savings plans and purchased their identified asset. The federal (Assets for Independence) match paid to participants totaled $72,658, while the CSP-NJ match paid to participants totaled $25,579, and the match paid from other sources totaled $17,718 (Swarbrick & Stahl, 2009). Seven participants used their savings and match

TABLE 3–RESOURCES FOR MORE INFORMATION ON ASSET DEVELOPMENT AND IDAS

Resource	Website
Assets for Independence (Assets for Independence) Program	http://www.acf.hhs.gov/programs/ocs/afi/
Corporation for Enterprise Development (CFED) IDA Network	http://cfed.org/programs/idas/
World Institute on Disability (WID) Access to Assets Project	http://www.wid.org/programs/access-to-assets
Real Economic Impact Tour (REIT) Tax Assistance and Asset Development for People with Disabilities	http://www.realeconomicimpact.org/REI-Tour.aspx

to start micro-businesses: two vending machine operations; a tutoring and courier service; a music performing, recording, and sales company; a landscaping firm; a wellness consulting service; and a heavy truck mechanic service. Two participants purchased a new home: one home was located in central region county; and another in southern region county. Six participants purchased education: three paid for post-secondary education; and three purchased vocational training (Swarbrick & Stahl, 2009).

Post-Purchase Support. Graduates from the program were encouraged to develop a system of supports to help them maintain and improve upon their new economic status. Graduates had ongoing access to the CSP-NJ and CEC staff expertise, and referrals were made to additional community resources as needed. A Financial Fitness Self-Help Center, staffed by CEC employees with financial expertise, was opened for program graduates who wanted to drop in to use the program's computers for research and attend seminars given by program partners on financial topics of interest. For individuals with more personal topics to discuss, individual appointments with CSP-NJ and CEC staff were available.

Lessons Learned. One of the most important lessons learned by the program was that effective participant retention requires the ability to prescreen applicants for credit issues that can be resolved before they take steps toward asset ownership. Also, like the UIC-Thresholds program, the New Jersey program attributes their success to recruiting participants already involved with their other programs because these individuals are "known quantities" and have access to other services and supports. Another lesson learned was the value of collaborative relationships since IDA programs cannot be successful without partnering with the larger asset building community nationwide. To that end, CSP-NJ and CEC partnered with the New Jersey Department of Community Affairs and various community financial institutions.

A major challenge faced by the program was a dearth of affordable housing stock and lack of financial security among those participants pursuing the goal of homeownership. Many of these savers worked part time, resulting in annual incomes well below poverty level. This made them unattractive loan candidates due to their inability to finance a home and meet mortgage and other payments. Many of the original 41 participants who enrolled had set homeownership as their asset goal. The IDA program began addressing these barriers by identifying local affordable housing options, obtaining additional funds for down payment and closing costs, and providing direct support before, during, and after real estate purchases. The program also worked with affordable housing agencies in the state to advance-wait list participants when they began their IDAs. The program also helped participants secure additional funding, such as county grants, family match money, and mortgage lending incentives to bring down payment and closing costs and the monthly carrying cost within reach. Participants receiving Section 8 benefits were able to covert their benefit to the Section 8 home ownership program. Through the program's community collaborations and use of existing community resources, the program helped participants assemble the resources needed to succeed.

Future Directions. In 2008, the program received $117,647 in match funds and related expenses from Assets for Independence to begin a second IDA program that will run from 2008 through 2013. Matching funds are supplied by the program's financial partners, including CSP-NJ and PNC Bank. Participants are matched at a 2.5:1 or up to $5,000 in savings for a home, and 4:1 and up to $4,000 for savings for a business or continuing education.

Discussion

Given the high proportion of people with mental illnesses who live in poverty and the growing number of IDA programs in the United States, it is likely that current non-targeted IDA programs are serving large numbers of people with psychiatric disabilities. In addition, IDA programs are slowly being developed or expanded within the mental health consumer and provider community. Asset development is part of the larger vision of recovery in psychiatric rehabilitation that includes economic security as an outcome similar to employment or independent living. Individuals in an IDA program may also receive supported employment and supported education services. These services do not duplicate but instead complement and reinforce each other by leading to enhanced self-determination and financial security.

The programs described here indicate that mental health service recipients require a high level of support from IDA programs, which may be more specialized than the support needs of other IDA participant populations. Given the need for specialized support services, coupled with the complex overhead of operating an IDA, the best approach to administering IDA programs that serve people with mental illness may be one of collaboration, where the mental health agency's mainstream staff and financial specialists work together with a non-mental health agency to recruit, enroll, and support agency clients.

Future research also should examine which program elements have the most impact on asset development.

In both the national demonstration and in the two case studies, it appears that IDA programs have been successful for people with psychiatric disabilities though there is limited data available to demonstrate widespread impact. One barrier to the use of IDAs among people with psychiatric disabilities is the perception that asset development threatens vital disability benefits. Although this is not the case, we saw examples of non-IDA related benefit problems interfering with IDA savings and goals. It is clear that education is needed to counter such misinformation.

It also seems apparent that the disincentives to earned income created by SSI and percent-of-income-based housing subsidy programs make IDAs and/or other comparable "sheltered savings" programs a natural way to help people with psychiatric disabilities choose employment, and select careers with decent salaries rather than part-time roles in secondary labor market positions. The success of these IDA participants and the "collaborative efforts" described above demonstrates the value of creating opportunities for persons with disabilities to garner assets to break out of the cycle of poverty and enhance self-determination.

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