

3-10-2021

The Importance of Social Support for Low-Income Job Seekers in **Pathways to Careers in Health Care**

Cheryl A. Hyde  
*Temple University*

Karin M. Eyrich-Garg  
*Temple University*

Follow this and additional works at: [https://research.upjohn.org/up\\_press](https://research.upjohn.org/up_press)



Part of the [Labor Economics Commons](#)

---

**Citation**

Hyde, Cheryl A. and Karin M. Eyrich-Garg. 2019. "The Importance of Social Support for Low-Income Job Seekers." In *Pathways to Careers in Health Care*, Christopher T. King and Philip Young P. Hong, eds. Kalamazoo, MI: W.E. Upjohn Institute for Employment Research, pp. 257-278. <https://doi.org/10.17848/9780880996679.Ch8>

This title is brought to you by the Upjohn Institute. For more information, please contact [repository@upjohn.org](mailto:repository@upjohn.org).

# **Pathways to Careers in Health Care**

Christopher T. King  
Philip Young P. Hong  
*Editors*

2019

W.E. Upjohn Institute for Employment Research  
Kalamazoo, Michigan

## Library of Congress Cataloging-in-Publication Data

Names: King, Christopher T., editor | Hong, Philip Young P., 1972- editor.  
| W.E. Upjohn Institute for Employment Research, issuing body.  
Title: Pathways to careers in health care / Christopher T. King, Philip Young P. Hong,  
editors.  
Description: Kalamazoo, Michigan : W.E. Upjohn Institute for Employment Research,  
2019. | Includes bibliographical references and index. | Summary: "The authors in  
this book present findings, lessons, and recommendations that emanated from HPOG  
research and evaluations for consideration by policymakers, program operators, and  
other researchers"— Provided by publisher.  
Identifiers: LCCN 2019040213 (print) | LCCN 2019040214 (ebook) |  
ISBN 9780880996662 (paperback) | ISBN 9780880996679 (ebook)  
Subjects: MESH: Health Workforce—economics | Health Occupations—education |  
Government Programs—economics | Program Evaluation | Socioeconomic Factors |  
United States  
Classification: LCC RA440.9 (print) | LCC RA440.9 (ebook) | NLM W 76 AA1 |  
DDC 362.1023—dc23  
LC record available at <https://lcn.loc.gov/2019040213>  
LC ebook record available at <https://lcn.loc.gov/2019040214>

© 2019

W.E. Upjohn Institute for Employment Research  
300 S. Westnedge Avenue  
Kalamazoo, Michigan 49007-4686

The facts presented in this study and the observations and viewpoints expressed are the sole responsibility of the authors. They do not necessarily represent positions of the W.E. Upjohn Institute for Employment Research.

Cover design by Carol A.S. Derks.  
Index prepared by Diane Worden.  
Printed in the United States of America.  
Printed on recycled paper.

## 8

# The Importance of Social Support for Low-Income Job Seekers

Cheryl A. Hyde  
Karin M. Eyrich-Garg  
*Temple University*

The conventional focus of many job training programs is to increase the human capital of participants so they can compete more effectively in the labor market. The acquisition of more education, work experience, technical expertise, and “soft” skills (such as interviewing and self-presentation) are critical, but they may not be sufficient for labor market success. This is particularly true for low-income and chronically unemployed individuals, who, despite participation in job training programs, often do not secure employment that will support them and their families. Consequently, these individuals move from various forms of public assistance to dead-end jobs, and sometimes back again. Neither option offers much financial security, let alone meets the overarching goal of many training programs—that of “participant economic self-sufficiency” (Brodsky and Ovwigho 2002; Cooney 2010; Gray 2005; Dworsky and Courtney 2007; Hong, Sheriff, and Naeger 2009; Kim 2009; Levine 2013; Seefeldt 2017; Turner, Danziger, and Seefeldt 2006). Structural barriers, such as the scarcity of jobs, may be mentioned as contributing factors to troubling labor market outcomes, but greater emphasis typically is placed on the training participant’s motivation, behavior, and/or skill acquisition. In other words, inadequate human capital ultimately is believed to account for poor employment outcomes.

While matching one’s human capital with employers’ job requirements is essential, there are countless other factors that impact training and employment success (Barrera, Caples, and Tein 2001; Cleaveland 2002; Cooney 2010; Gingrich 2010). In this chapter, we examine the social support of low-income participants in a federally funded health

professions training program in order to understand the impact of this relational context. What is the extent of their social support, and did participation in the training program bolster this assistance? Given our findings, we delineate implications for workforce development programs, including those supported by the Health Profession Opportunity Grants (HPOG) program.

## **SOCIAL SUPPORT**

Social support, specifically group and network membership, is a primary means of estimating one's social capital, which concerns the presence and value of relationships generated through various forms of social participation (Grootaert et al. 2004; Lin 2000). The kind and quality of resources and support generated by one's actual and potential social capital can influence further accumulation of human capital—an individual's skill sets and knowledge levels (Brass et al. 2004; Casciano and Massey 2008; Flap and Boxman 2001; Ioannides and Topa 2010; McDonald, Benton, and Warner 2012; Phillips 2010; Migheli 2011). Conventionally, human capital is measured or approximated by level of education, training, and workforce experience (e.g., Becker 1964; Mincer 1958), though there also are efforts to recognize the value of “accumulated wisdom” and “commonsense” factors (Bottone and Sena 2011; Marimon and Quadrini 2011). Various forms of social capital allow individuals to more readily acquire and more effectively utilize their human capital.

There is considerable research on the relationship between social capital, specifically social support networks and group memberships, and labor market success across a variety of locations and sectors (for example, see Gezinski [2011]; Stoloff, Glanville, and Bienenstock [1999]; O'Connor [2013]; Tassier and Menczer [2007]). Networks and groups filter information and resource access, serving as critical conduits for job opportunities (Bertrand, Luttmer, and Mullainathan 2000; Chapple 2002; Marin 2012, 2013). These memberships, however, do not need to be solely employment focused. Network and group diversity, and on a broader level social capital that “bridges” an individual's

group(s) to other groups, are key. The early work of Granovetter (1973) on “the strength of weak ties” suggested that network connections could vary in size and strength and were most useful when they facilitated the expansion of opportunity pathways or resource options. Certain types of networks, such as friendship based, can have the added benefit of enhancing labor force participation (Aguilera 2002). There also is evidence that jobs, or more precisely the workplace, provide individuals with access to new or enhanced groups and networks that help them accumulate more social capital over time (Brand and Burgard 2008; Dahlin, Kelly, and Moen 2008). Conversely, individuals experiencing periods of unemployment lose network ties and opportunities (Brand and Burgard 2008).

Potential and actual social support networks, and hence social capital, typically vary over the life course as life events, such as parenthood or retirement, result in access to new networks and groups and perhaps the loss of others (Brand and Burgard 2008; Fiori and Jager 2012; McDonald and Mair 2010). Network development also differs by cultural attributes. Men and women create, access, and pursue different kinds of networks, with the former more likely to build social capital resources that result in accumulated opportunities and eventually greater career options (McDonald 2011; McDonald, Lin, and Ao 2009; Parks-Yancy, DiTomaso, and Post 2006; Stoloff, Glanville, and Bienenstock 1999). Upper- and middle-class individuals have more robust, diverse, and resource-rich networks than do working- or lower-class individuals who tend to have smaller, more insular networks (Dahlin, Kelly, and Moen 2008; Horvat, Weininger, and Lareau 2003). Further, Desmond (2012) found that in high-poverty areas, individuals developed “disposable” ties with relatively new and unfamiliar acquaintances in order to obtain resources in times of crisis. Such connections, however, were “brittle and fleeting” and resulted in instability and mistrust over time.

In this chapter, we focus on the social support networks and primary group memberships of participants in the Health Information Professions (HIP) Career Pathway Initiative, which is part of the HPOG program. We examine this aspect of their social capital to determine if it expanded while they were in the training program.

## TRAINING PROGRAM PARTNER

Our HPOG training program partner was the HIP program, which was coordinated and staffed primarily by the Center for Social Policy and Community Development at Temple University. Program partners included District 1199C Training and Upgrade Fund (partnership between National Union of Hospital and Healthcare Employees) and 50 acute care hospitals, Philadelphia Workforce Investment Board, Philadelphia Department of Public Welfare, Philadelphia Workforce Development, and area health care/medical employers. The focus on health profession training was in response to labor market predictions that the health/medical sector, particularly health informatics, would experience substantial employment growth over the next few years and offer good opportunities for employment with decent wages and benefits. Health sector jobs tend to be concentrated in urban areas, which makes health job training initiatives a potentially important antipoverty measure (Cheung and Aiken 2006; Nelson and Wolf-Powers 2010).

HIP was designed and run as a five-tier training program in various aspects of health information management:

- Tier 1: Medical office and accounts/electronic health records
- Tier 2: Coding specialist—AHIMA certification
- Tier 3: Associate's degree (with transferable credits) from the Community College of Philadelphia with transferable credits to Temple University
- Tier 4: Bachelor Degree in health information management from Temple University
- Tier 5: Master's degree in health informatics from Temple University.

Individuals could enter at any tier for which they were qualified. For example, a student would receive tuition and other assistance if she were accepted into the health information management major (Tier 4) at Temple University. Although the tier program was designed for participants to move from one tier to the next, most HIP participants completed only one tier and then pursued employment; the most common progression was Tier 1 to Tier 2 so that needed certifications could be obtained. Using a participant-centered approach, HIP offered, in addi-

tion to the employment training or tuition reimbursement (depending on the tier), career coaching, child care and transportation assistance, interviewing techniques, and job placement/internship guidance.

For our research, we focused solely on Tier 1 participants. To qualify for HIP/Tier 1, individuals had to pass basic math and writing literacy tests (at the 8th grade level); participate in a series of interviews and orientation sessions that assessed motivation, engagement, and self-presentation; and have no criminal background. The primary target population was Temporary Assistance for Needy Families (TANF) recipients, although the program expanded its pool to individuals at or below 250 percent of the federal poverty line. Two years into the initiative, the “Bridge to HIP” program was instituted for potential enrollees who did not pass the literacy test(s) but otherwise were eligible for Tier 1. This program provided intensive math and reading tutoring so that these individuals could then qualify for Tier 1. A total of 263 students in 13 cohorts completed Tier 1 over the five-year period from June 2010 to August 2015. Program staff included two course instructors who taught medical billing classes, two career coaches who worked with participants while they attended classes, two career placement coordinators who worked with participants once they had completed the training classes, a “Bridge to HIP” staff person, a program coordinator, and a program evaluator.

## METHODS

Because our research began after several Tier 1 cohorts had completed the training program, we were able to follow only 181 participants in 8 cohorts from June 2013 to February 2016. Data were obtained through several sources as follows:

**Training participant interviews.** Individual interviews (N = 181) were conducted at program intake, exit, six months postexit and one year postexit. Unless otherwise noted, data used in this analysis are from program intake and six months postexit. The interview protocol has two components, the Arizona Social Support Interview Schedule (ASSIS) (Barrera 1980) and the Social Environment Questionnaire (SEQ). The



ASSIS measures perceived and actual network size, satisfaction with support, and need for support across seven domains (intimate interaction, material aid, advice, positive feedback, physical assistance, social participation, and negative interactions). The SEQ, designed specifically for this study, was composed of items from various social capital and community attribute engagement protocols (Christakopoulou, Dawson, and Gari 2001; Grootaert et al. 2004; Long and Perkins 2003; Roper Center for Public Opinion Research 2001; Smith, Hout, and Marsden 2013; U.S. Census Bureau 2012). Interviews averaged 90 minutes in length and were taped and transcribed.

**Alumni focus group interviews.** Eight focus groups were held with program alumni (N = 72). These group interviews covered how and why they joined the training program, feedback on the training program, current employment and educational activities, and current challenges and concerns. The focus groups were designed to be conversational. Each focus group lasted about two hours. The interviews were audio taped and transcribed; detailed observation notes were done.

**Staff interviews.** In-depth interviews were conducted with nine HIP staff members. These interviews focused on what the staff viewed as the strengths, accomplishments, challenges, and barriers of the training program participants, and reflections on the design and implementation of the training program. All interviews, which were 60–90 minutes in duration, were taped and transcribed.

For all interviews, quantitative data were cleaned and entered into SPSS for analysis. Qualitative data were thematically coded and analyzed per the constant comparative method (Charmaz 2006; Corbin and Strauss 2008; Cresswell 2007). All respondents were deidentified; any training participant and staff names used in publications and presentations are pseudonyms.

## FINDINGS

Respondent characteristics are presented in Table 8.1. At intake, the sample was primarily African American women, half of whom have

**Table 8.1 Respondent Characteristics at Intake (N = 181)**

| Item                            | Respondents       |
|---------------------------------|-------------------|
| Age $\pm$ SD                    | 36.74 $\pm$ 10.64 |
| Female (%)                      | 80.2              |
| Race (%)                        |                   |
| White/Caucasian                 | 5.5               |
| Black/African American          | 83.4              |
| Asian American/Pacific Islander | 3.9               |
| Hispanic/Latino                 | 3.9               |
| Other                           | 3.0               |
| Education completed (%)         |                   |
| < High school                   | 1.7               |
| High school diploma or GED      | 30.4              |
| Some college                    | 56.5              |
| College degree                  | 10.5              |
| Advanced degree                 | 1.1               |

SOURCE: Authors' calculations.

some college education. The mean age was 37 (focus groups participants were older, with mean age of 48).

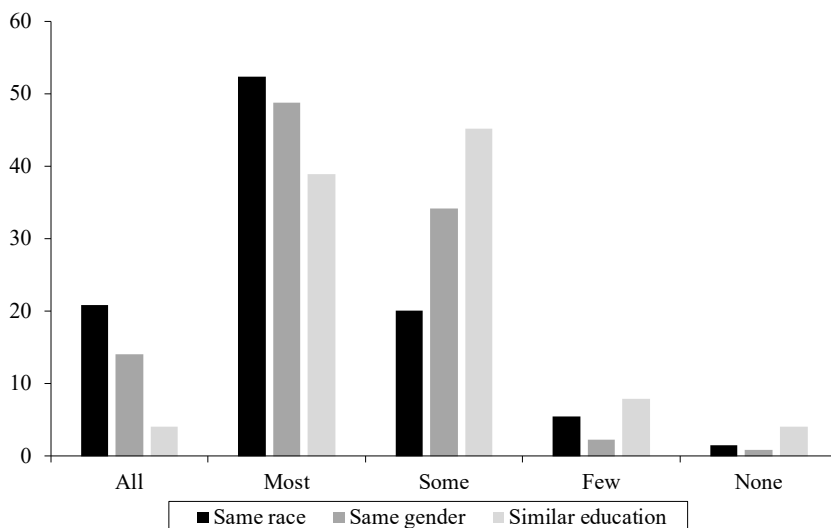
Group memberships are important aspects of network—and more broadly social capital—formation. Data on group and organizational membership at time of intake and six months postexit are presented in Table 8.2. At intake and again at six months postexit, the most frequently mentioned membership was in a religious group/organization. No other organization comes close in terms of respondent membership. There were two important changes: membership in professional or business associations rose from 6.6 percent (intake) to 31.3 percent (6 months postexit), and membership in a group that meets exclusively on the internet grew from 8.8 percent (intake) to 19.6 percent (six months postexit). Both of these increases can be attributed to maintaining membership and participating in several medical coding certification associations necessary for employment. Most of the respondents' primary groups had memberships that were all or most of the same race and gender; there was some variation with similar education (see Figure 8.1).

Findings for the social support networks of program participants at the time of intake and six months postexit are presented in Table 8.3. Potential networks are those individuals whom the respondent might

**Table 8.2 Respondent Social Participation in Groups or Organizations at Intake and Six Months Postexit**

| Item   | Exit + 6 months         |                  |
|--|-------------------------|------------------|
|  | Intake (%)<br>(N = 181) | (%)<br>(N = 112) |
| Member of religious community  | 55.2                    | 57.1             |
| Attending religious services: (N = 168)  |                         |                  |
| < Few times per year   | 19.0                    | 18.0             |
| A few times per year   | 23.2                    | 25.2             |
| 1–2 times per month  | 14.9                    | 18.0             |
| Almost every week  | 11.9                    | 9.9              |
| Every week   | 31.0                    | 28.8             |
| Attending non-worship activities in past six months<br>(Time 1, N = 100; Time 3, N = 64)             | 57.0                    | 54.7             |
| Participated in/members of:  |                         |                  |
| Outdoor activity club/adult sports club  | 8.3                     | 9.0              |
| Youth organization   | 13.3                    | 15.2             |
| Parents' association (PTA/PTO, school service group)   | 21.0                    | 18.8             |
| Veteran's group  | 1.1                     | 3.6              |
| Neighborhood association/block group/crime watch   | 15.6                    | 15.2             |
| Charity, service club, or fraternal organization   | 12.2                    | 13.5             |
| Labor or workers' union  | 5.0                     | 7.2              |
| Professional or business association   | 6.6                     | 31.3             |
| Ethnic, nationality, or civil rights organization  | 6.1                     | 12.5             |
| Other public interest groups/political action groups   | 9.9                     | 8.1              |
| Literary, art, discussion or study group   | 23.2                    | 13.5             |
| Other hobby group or societies   | 11.7                    | 9.0              |
| Support or self-help groups (e.g., AA, Al-Anon)  | 10.5                    | 7.2              |
| Group that meets exclusively on internet   | 8.8                     | 19.6             |
| Other kinds of clubs or organizations  | 13.9                    | 10.8             |
| Primary group works with other groups in the<br>neighborhood? (Time 1, N = 122; Time 3, N = 88)      | 74.6                    | 70.5             |
| Primary group works with other groups outside the<br>neighborhood? (Time 1, N = 117; Time 3, N = 87) | 74.4                    | 73.5             |

SOURCE: Authors' calculations.

**Figure 8.1 Respondents' Primary Social Group—Percentage of Group Members with Same Race, Gender, or Education**

SOURCE: Authors' calculations.

call upon for various forms of assistance. Used networks are those individuals who were called upon within the 30 days prior to the interview. The average total network for the respondents was 9.46 persons at intake and 9.93 persons at six months postexit, which means that respondents essentially added (on average) half a person to their networks during and immediately after the training program. Used networks were comparable for both points in time at 8.06 and 8.52 individuals, respectively, again indicating limited growth in the size of total networks that were accessed in the month prior to the interview. Social participation constituted the single largest type of potential and used networks.

Figure 8.2 presents data on who the members were in these networks at six months postexit. Respondents overwhelmingly relied on friends and then various family members for support, as this example illustrates:

*When it comes to taking classes on Tuesdays and Thursdays, my mom is primarily the one I rely on to pick my kids up. She keeps them while I'm in class because I don't get out of work until 5:30. Regularly, she's the one that picks my son up from school. —Arlene*

**Table 8.3 Average Number of Individuals in Potential and Used Support Networks by Type of Network at Intake and Six Months Postexit**

| Type of network       | Intake |                         |                         | Six months postexit |                         |                         |
|-----------------------|--------|-------------------------|-------------------------|---------------------|-------------------------|-------------------------|
|                       | N      | Potential               | Used                    | N                   | Potential               | Used                    |
|                       |        | Mean no. of individuals | Mean no. of individuals |                     | Mean no. of individuals | Mean no. of individuals |
| Total network         | 180    | 9.5<br>(3.7)            | 8.1<br>(3.4)            | 112                 | 9.9<br>(4.6)            | 8.5<br>(3.9)            |
| Intimate interaction  | 180    | 3.2<br>(2.1)            | 2.7<br>(2.0)            | 112                 | 3.3<br>(2.1)            | 2.9<br>(1.9)            |
| Material aid          | 180    | 3.1<br>(2.1)            | 1.6<br>(1.6)            | 112                 | 3.1<br>(2.2)            | 1.3<br>(1.6)            |
| Advice                | 180    | 3.1<br>(2.0)            | 2.4<br>(1.9)            | 112                 | 3.2<br>(2.1)            | 2.4<br>(1.7)            |
| Positive feedback     | 180    | 4.1<br>(2.3)            | 3.5<br>(2.2)            | 112                 | 3.8<br>(2.4)            | 3.1<br>(2.2)            |
| Favors/help           | 180    | 3.1<br>(2.3)            | 2.4<br>(1.9)            | 112                 | 3.5<br>(2.1)            | 2.8<br>(2.0)            |
| Employment            | 151    | 2.1<br>(1.6)            | 1.5<br>(1.6)            | 112                 | 2.5<br>(1.6)            | 1.6<br>(1.5)            |
| Social participation  | 180    | 4.6<br>(3.0)            | 4.0<br>(3.0)            | 112                 | 4.4<br>(2.6)            | 3.9<br>(2.5)            |
| Negative interactions | 180    | 2.1<br>(1.6)            | 1.6<br>(1.4)            | 112                 | 2.1<br>(1.9)            | 1.7<br>(1.8)            |

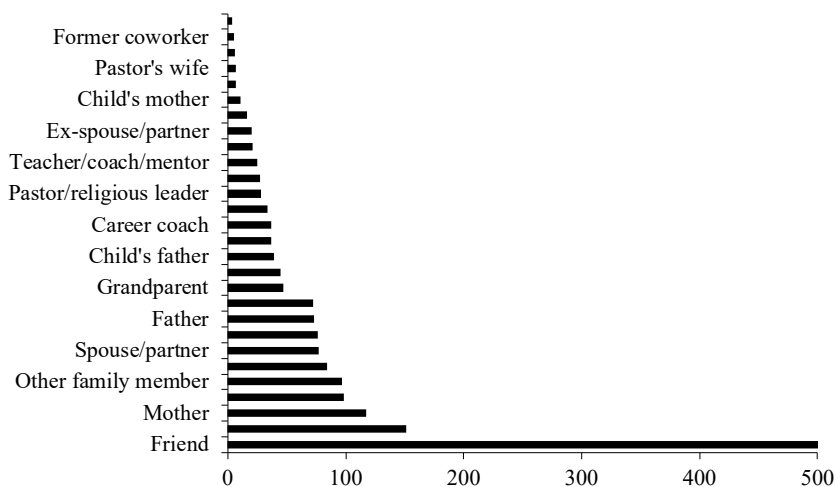
NOTE: Standard deviations in parentheses.

SOURCE: Authors' calculations.

Given that religious organizations were the primary membership groups for these respondents, it is interesting to note that religious leaders and members are not represented to the degree one might expect in these networks. Also note that the only HIP-related network members were the career coaches, who were named by 19 of the 112 respondents.

Staff noticed the variations in levels of support as well as the quality of support for training participants:

*But what I've seen is that it [family support] is usually a very broad range. You have some students who are very supported, have a lot of people in their corner, you know what I mean? To support, to help them get through things. There are students who have no job, no income, and we're like, "Well, how are you getting through?"*

**Figure 8.2 Members of Respondent Networks by Number of Times Mentioned by Respondents, Six Months Postexit**

SOURCE: Authors' calculations.

*And they're like, "Well, my fiancé is really adamant that I finish this program," or "My mother is gonna help me with my child and we're living with her and she's really being supportive." You know? And then you have the other side of the spectrum where, you know, you have students who have no support, nobody, no one cares. And they sometimes struggle, you know, a little bit when it gets to the point where we're getting close, that we're getting further into the training and, you know, you're starting to lose some of your, your, I keep calling it oomph. But you know, you're losing some of your determination. And the students who have support systems kind of have people to kind of say, "Keep going, keep pushing, we got your back, we're here for you." —Don, career coach*

Other staff suggested that some networks, such as familial ones, actually were *impediments* to participant success:

*On my caseload it's always drama with the extended family members. So you really have a couple of close family members that they're close to. Again even with those family members there's issues. So communication issues, conflict, there's a lot of conflict going on. —Sarah, career coach*

*You know, sometimes they [training participants] are the one person trying to do something positive, and they're also the person in their family who are taking care of the mother; have a brother who's an alcoholic, have somebody else who's dealing with something or other. —Serena, Bridge coordinator*

Of particular concern in our study was the connection between networks and employment status. Table 8.4 presents the employment status of participants at six months postexit. Just over one-third of the respondents were actively looking for employment. Almost half of the respondents were employed in health sector jobs, though according to the respondents, few obtained positions in medical billing or coding:

*It took a while, but finally my Career Placement Counselor—I was still working as a stylist—she called me, and I was very frustrated. This was in 2013. She asked what I was doing, and I told her I hate my job. She told me she'd get me out of there. AmeriHealth was hiring. So, I went in there, and that's where I've been. It's been about a year and a half now. . . . I'm working in customer service. I work with members, and doctors, and providers. I help people who are recently enrolled into the health insurance company. It's a Medicaid funded program, so I'm using all of the things I learned on a daily basis. The salary is decent. It's very challenging because there are a lot of time restraints on calls and stuff like that. It's [a] stable job, even though it's not in what I was trained for. —Karen*

Referring again to Table 8.3, at intake the respondents' employment networks were just over 2.0 (potential) and 1.5 (used) individuals, suggesting that participants had only 2.0 individuals they thought they

**Table 8.4 Employment Status of Participants at Six Months Postexit (N = 112)**

| Status   | Frequency (%) |
|--|---------------|
| Transitioned from unemployment to health sector job          | 37.5          |
| Transitioned from non-health-sector job to health sector job | 8.0           |
| Actively seeking employment                                  | 38.4          |
| Employed in non-health-sector job                            | 9.1           |
| Continuing education   | 3.6           |
| Caring for family member and not employed                    | 2.7           |

SOURCE: Authors' calculations.

could count on and fewer than 2.0 individuals who they engaged with regarding employment. At six months postexit employment networks were only slightly larger at 2.5 (potential) individuals and 1.6 (used) individuals. This suggests that employment network development or enhancement did not happen during the training program. Indeed, one source of frustration among participants was the perceived lack of assistance in terms of employment networking done by HIP staff:

*I was under the expectation that after graduation, or during that time, they would have me matched with an internship. It never happened. So, I found some other things to do. —Joe*

*I think that in terms of job placement, I think that some things should've been more available, especially, excuse me, this being a program run out of [university]. Temple has a big umbrella. This is medical billing and coding. They have a hospital. No one in my team to my understanding was even—or how they do the job placement was place with a facility, a hospital, with Temple, one or two out of each cohort. I think they could've been more ready, should've been more prepared to place us coming out. —Yolanda*

*I was under the impression when I joined Cohort 10 that at the end there would be interviews lined up; that the career placement folks had the inside with different companies. But, it was more or less that you go and you find positions. The ones that they did have—the pay was so low that I had to tell my career coach that I cannot work for that pay. It was really low. I have a mortgage and big bills. —Maryanne*

*Back in the day when I went through similar programs they had job placement. After you finish a program, they call you up and tell you to meet with the manager somewhere. You went, and you got the job. That's the only part that's missing from this program, the job placement side of it. They should base it on your merits, and send you out, and vouch for you to an employer. "She was excellent. Give her the job." None of that. —Ethel*

*I'm actually a temp, and I got it through a temp program. And so now I'm actually looking for full-time. . . . I was looking the whole time, but I'm looking through Temple since I'm up here. [interviewer: Have you reached back out to the HIP program?] Actually, Betty is my placement coordinator, but they haven't really been that helpful. I like the program, that's not it, I just feel like*



*they should have a better way of setting you up with a job afterwards, or at least finding a way to get paid. —Connie*

These comments suggest that participants had unfulfilled expectations regarding assistance in securing employment. Some of these expectations are based on the belief that the university system would or should be a source of predetermined jobs and that HIP staff would make the connections:

*It was presented like, all right, boom, as soon as you finish, boom, it's a job. Boom, right here, bang-bang-bang-bang-bang. All right, sounds good. All right, cool. I'm interested. And then it's like, all right, I done went through like five, six interviews and nothing. —Moe*

Program staff, however, viewed the networking for jobs differently and placed responsibility on the program participants. In some cases, staff encouraged participants to develop the skill of networking:

*Well, number one, I think it builds their confidence to be able to talk to people to build networks. A lot of times the students don't have people they can—they don't network at all, you know? And one of the things that I do talk to them about is the importance of networking, the importance of building your network. And one of the main things I say to them is, if you consider the people who you surround yourself with, if you're the smartest, the most successful, the most driven person in that group, then you need to expand your horizons to get more people into your network to help pull you up. —Sarah, career coach*

A more common view, however, was that staff were quite critical of participants' networking capabilities:

*Employment, oh man, they don't have any idea about what to do with employment networks. . . . They're clueless. —Joanna, career placement coordinator*

*[Many students have] good social support, but they suck at social networking. Like, they're horrible at it. They're very insular. They often, you know, I push them to like to connect with people and build professional networks. It's not that they don't know how; it's just that they don't want to. . . . They're insecure. They lack confidence. They're very hesitant to connect to people who aren't from their own community or aren't from their own racial group or gender group or religious group. It just ends up being very hard to*

*get them to see that they have to go beyond your social identity in order to connect with people that could be really valuable to them. A lot of them just don't do it. They make excuses for why they don't do. They just don't do it. —Karen, program coordinator*

In interviews, participants mentioned that the class instructors and career coaches were helpful, largely because they felt motivated by them and that they were invested in their success:

*So, there were instructors that were very dedicated to what they were doing, very regimented. But they pushed you, and they helped you along. They never—it definitely was no student left behind. . . . They were there to help you along, and well, if you can't do it, stay after with me, and we'll talk about what's going on. So you would see the care. So they were very dedicated to what they were doing. —Janet*

Yet, as noted above, only a few participants named the coaches as members of their posttraining networks. In contrast, the work of the career placement coordinators was viewed with disappointment, largely because the facilitating of employment pathways and opportunities was seen as inadequate.

## DISCUSSION

We have presented data on group membership and social support networks for low-income urban residents in a health professions training program. To summarize, their primary group memberships, the most popular of which was in a religious organization, were largely homogeneous in terms of race, gender, and education. Their social support networks were small at the outset and expanded only slightly while going through the training program. Training participants relied heavily on friends for assistance. Few respondents included training program staff in their six-month postexit networks.

Our research suggests that the respondents have generated bonding social capital that is small and homogeneous in scope. Attention is on primary group memberships and friends in a small support network. There is little evidence of creating either bridging or linking social capital, though one positive change was the increased member-

ship in professional/business associations and internet groups postexit, both of which were attributable to accessing medical coding and health profession sites. Nonetheless, largely absent from their networks are individuals who could help with the generation of bridging or linking capital, something critical for improved access to employment and career opportunities after training. These findings are consistent with other studies of economically vulnerable individuals and communities—largely insular worlds in which trust and relationships are with a small number of similarly situated individuals and connections with opportunity pathways and institutions virtually nonexistent (Desmond 2012; Van Eijk 2010; Levine 2013; Seefeldt 2017; Smallacombe 2006).

Training participants and program staff had different views on networking. The participants wanted more help from the program in making employment connections—a desire that echoes some of best practices in the employment training literature (Hendra et al. 2016; King 2014; Strawn 2010). In contrast, staff viewed the lack of employment networking as a *participant* skill deficit. While some staff indicated that they encouraged participants to network, there was little evidence that networking strategies were taught or that the staff helped to create networks for participants to access. In other words, staff focused largely on an “improve human capital” approach rather than expanding their approaches to include viable social network development.

## LESSONS LEARNED

How can the findings about the social support of low-income participants in a job training program inform future development of similar initiatives? Our recommendations are grounded in the need to incorporate social capital development into workforce training programs rather than rely solely or primarily on human capital development. Programs need to understand the relational context of participants, and then help them strategically expand connections.

Networking is not just a key strategy in finding employment but also a skill that needs to be learned and honed. Rather than only encouraging participants to network, program staff need to develop or codevelop networks and then assist participants in accessing them, and include

presentation and follow-up strategies. Participants may not access networks because, as our findings suggest, they don't have networks with sufficient scope or depth. Relying primarily on participants to network is likely a setup for failure in the form of unemployment or underemployment. Events such as job fairs or employer "meet and greets," as examples, would have aided this study's participants. Partnering with churches (primary group membership) in the catchment area to hold employment events could be critically important. In other words, training programs need to incorporate network development and access as one of their component strategies. This also necessitates significant employer engagement, a hallmark in successful sector-based training programs. It was not apparent that cultivating such employer relations occurred within the HIP program.

Our study's participants interacted with, and felt differently about, the career coaches compared to the career placement coordinators. The former worked with the participants over an extended period of time and in the process developed closer relationships with them. In contrast, the latter had relatively little time with the participants, as they worked with them during a smaller window between the conclusion of classes and program exit. In their networks, the only staff mentioned were the career coaches, probably because of the closer ties that were developed within the program. Programs may want to adopt more of a casework model in which a participant is assigned to one staff person from intake to exit. Given the dearth of social support networks, having a staff person invested in their success through the program's duration may prove to be an important motivator, as well as resource, for participants. We also anticipate that program staff would be more likely to appear in a participant's social support network.

Training programs also may need to consider the extent to which a participant's existing network is a help or a hindrance. Staff noted that in some cases, family or friends served to sabotage (intentionally or not) a participant's efforts. Evaluation of the quality or nature of networks, not just their existence, needs to be part of the broader work with training participants. At strategic times during the training program, it may be that family, rather than individual, engagement is needed for participant success.

The training participants in our study engaged in a rigorous program in order to acquire knowledge and skills needed for medical cod-

ing and electronic billing jobs. And while some achieved employment success, most of the participants did not find jobs in the areas for which they had trained. Based on our research, we suggest that labor market success can't rely solely on the individual. Rather, context matters, and in our case, that context was group memberships and social support networks. In addition to the development of human capital, job training programs also need to facilitate social capital development, specifically the "bridging" or "linking" kind that connects network-poor individuals with opportunity pathways.

## References

- Aguilera, Michael Bernabé. 2002. "The Impact of Social Capital on Labor Force Participation: Evidence from the 2000 Social Capital Benchmark Survey." *Social Science Quarterly* 83(3): 853–874.
- Barrera, Manuel. 1980. "A Method for the Assessment of Social Support Networks in Community Survey Research." *Connections* 3(3): 8–13.
- Barrera, Manuel, Heather Caples, and Jenn-Yun Tein. 2001. "The Psychological Sense of Economic Hardship: Measurement Models, Validity, and Cross-Ethnic Equivalence for Urban Families." *American Journal of Community Psychology* 29(3): 493–517.
- Becker, Gary. 1964. *Human Capital: A Theoretical and Empirical Analysis with Special Reference to Education*, 3rd ed. Chicago: University of Chicago Press.
- Bertrand, Marianne, Erzo F. P. Luttmer, and Sendhil Mullainathan. 2000. "Network Effects and Welfare Cultures." *Quarterly Journal of Economics* 115(3): 1019–1055.
- Bottone, Germana, and Vania Sena. 2011. "Human Capital: Theoretical and Empirical Insights." *American Journal of Economics and Sociology* 70(2): 401–423.
- Brand, Jennie E., and Sarah A. Burgard. 2008. "Job Displacement and Social Participation over the Lifecourse: Findings for a Cohort of Joiners." *Social Forces* 87(1): 211–242.
- Brass, Daniel J., Joseph Galaskiewicz, Heinrich R. Greve, and Wenpin Tsai. 2004. "Taking Stock of Networks and Organizations: A Multilevel Perspective." *Academy of Management Journal* 47(6): 795–817.
- Brodsky, Anne E., and Pamela Caudill Ovwigho. 2002. "Swimming against the Tide: Connecting Low-Income Women to Living Wage Jobs." *Journal of Poverty* 6(3): 63–88.

- Casciano, Rebecca, and Douglas S. Massey. 2008. "Neighborhoods, Employment, and Welfare Use: Assessing the Influence of Neighborhood Socioeconomic Composition." *Social Science Research* 37(2): 544–558.
- Chapple, Karen. 2002. "‘I Name It and I Claim It—In the Name of Jesus, This Job Is Mine’: Job Search, Networks, and Careers for Low-Income Women." *Economic Development Quarterly* 16(4): 294–313.
- Charmaz, Kathy. 2006. *Constructing Grounded Theory: A Practical Guide through Qualitative Analysis*. Thousand Oaks, CA: Sage.
- Cheung, Robin, and Linda H. Aiken. 2006. "Hospital Initiatives to Support a Better-Educated Workforce." *Journal of Nursing Administration* 36(7/8): 357–362.
- Christakopoulou, Sophia, Jon Dawson, and Aikaterini Gari. 2001. "The Community Well-Being Questionnaire: Theoretical Context and Initial Assessment of Its Reliability and Validity." *Social Indicators Research* 56(3): 321–351.
- Cleaveland, Chad. 2002. "Why Don't These People Just Get a Job? Fragile Work Attachment in a Cohort of Welfare Recipients." *Social Work Abstracts* 38(3): 1318.
- Cooney, Kate. 2010. "The Promise and Pitfalls of Employer-Linked Job Training for Disadvantaged Workers." *Administration in Social Work* 34(1): 27–48.
- Corbin, Juliet, and Anselm Strauss. 2008. *Basics of Qualitative Research*. 3rd ed. Thousand Oaks, CA: Sage.
- Cresswell, John. 2007. *Qualitative Inquiry and Research Design: Choosing among Five Approaches*. 2nd ed. Thousand Oaks, CA: Sage.
- Dahlin, Eric, Erin Kelly, and Phyllis Moen. 2008. "Is Work the New Neighborhood? Social Ties in the Workplace, Family, and Neighborhood." *Sociological Quarterly* 49(4): 719–736.
- Desmond, Matthew. 2012. "Disposable Ties and the Urban Poor." *American Journal of Sociology* 117(5): 1295–1335.
- Dworsky, Amy, and Mark E. Courtney. 2007. "Barriers to Employment among TANF Applicants and Their Consequences for Self-Sufficiency." *Families in Society* 88(3): 379–389.
- Fiori, Katherine L., and Justin Jager. 2012. "The Impact of Social Support Networks on Mental and Physical Health in the Transition to Older Adulthood: A Longitudinal, Pattern-Centered Approach." *International Journal of Behavioral Development* 36(2): 117–129.
- Flap, Renk, and Ed Boxman. 2001. "Getting Started: The Influence of Social Capital on the Start of the Occupational Career." In *Social Capital: Theory and Research*, Nan Lin, Karen Cook, and Ronald S. Burt, eds. New York: Aldine de Gruyter, pp. 159–184.

- Gezinski, Lindsay Blair. 2011. "Mediating Impact of Social Capital and Human Capital on Employment Outcome among Single Women Who Use Welfare: A Structural Equation Model." PhD diss., Ohio State University.
- Gingrich, Luanne Good. 2010. "Single Mothers, Work(fare), and Managed Precariousness." *Journal of Progressive Human Services* 21(2): 107–135.
- Granovetter, Mark S. 1973. "The Strength of Weak Ties." *American Journal of Sociology* 78(6): 1360–1380.
- Gray, Karen A. 2005. "Women Who Succeeded in Leaving Public Assistance for a Living-Wage Job." *Qualitative Social Work* 4(3): 309–326.
- Grootaert, Christiaan, Deepa Narayan, Veronica Nyhan Jones, and Michael Woolcock. 2004. "Measuring Social Capital: An Integrated Questionnaire." World Bank Working Paper No. 18. Washington, DC: World Bank.
- Hendra, Richard, David H. Greenberg, Gayle Hamilton, Ari Oppenheim, Alexandra Pennington, Kelsey Schaberg, and Betsy L. Tessler. 2016. *Encouraging Evidence on a Sector-Focused Advancement Strategy: Two-Year Impacts from the WorkAdvance Demonstration*. New York: MDRC.
- Hong, Philip Young P., Vamadu A. Sheriff, and Sandra R. Naeger. 2009. "A Bottom-Up Definition of Self-Sufficiency: Voices from Low-Income Job-seekers." *Qualitative Social Work* 8(3): 357–376.
- Horvat, Erin McNamara, Elliot B. Weininger, and Annette Lareau. 2003. "From Social Ties to Social Capital: Class Differences in the Relations between Schools and Parent Networks." *American Educational Research Journal* 40(2): 319–351.
- Ioannides, Yannis M., and Giorgio Topa. 2010. "Neighborhood Effects: Accomplishments and Looking beyond Them." *Journal of Regional Science* 50(1): 343–362.
- Kim, Jeoungee. 2009. "Does Job Training Yield Positive Outcomes for Women on Public Assistance?" *Journal of Policy Practice* 8: 204–223.
- King, Christopher T. 2014. "Sectoral Workforce and Related Strategies: What We Know... And What We Need to Know." In *Connecting People to Work: Workforce Intermediaries and Sector Strategies*, Maureen Conway and Robert P. Giloth, eds. New York: American Assembly, pp. 209–238.
- Levine, Judith. 2013. *Ain't No Trust: How Bosses, Boyfriends, and Bureaucrats Fail Low-Income Mothers and Why It Matters*. Berkeley: University of California Press.
- Lin, Nan. 2000. "Inequality in Social Capital." *Contemporary Sociology* 29(6): 785–795.
- Long, D. Adam, and Douglas D. Perkins. 2003. "Confirmatory Factor Analysis of the Sense of Community Index and Development of a Brief SCI." *Journal of Community Psychology* 31(3): 279–296.
- Marimon, Ramon, and Vincenzo Quadrini. 2011. "Competition, Human Capi-

- tal, and Income Inequality with Limited Commitment.” *Journal of Economic Theory* 146(3): 976–1008.
- Marin, Alexandra. 2012. “Don’t Mention It: Why People Don’t Share Job Information, When They Do, and Why It Matters.” *Social Networks* 34: 181–192.
- . 2013. “Who Can Tell? Network Diversity, Within-Industry Networks, and Opportunities to Share Job Information.” *Sociological Forum* 28(2): 350–372.
- McDonald, Steve. 2011. “What’s in the ‘Old Boys’ Networks? Accessing Social Capital in Gendered and Racialized Networks.” *Social Network* 33: 317–330.
- McDonald, Steve, Richard A. Benton, and David F. Warner. 2012. “Dual Embeddedness: Informal Job Matching and Labor Market Institutions in the United States and Germany.” *Social Forces* 91(1): 75–97.
- McDonald, Steve, Nan Lin, and Dan Ao. 2009. “Networks of Opportunity: Gender, Race, and Job Leads.” *Social Problems* 56(3): 385–402.
- McDonald, Steve, and Christine A. Mair. 2010. “Social Capital across the Life Course: Age and Gendered Patterns of Network Resources.” *Sociological Forum* 25(2): 335–359.
- Migheli, Matteo. 2011. “Capabilities and Functionings: The Role of Social Capital for Accessing New Capabilities.” *Review of Political Economy* 23(1): 133–142.
- Mincer, Jacob. 1958. “Investment in Human Capital and Personal Income Distribution.” *Journal of Political Economy* 66(4): 281–302.
- Nelson, Maria, and Laura Wolf-Powers. 2010. “Chains and Ladders: Exploring the Opportunities for Workforce Development and Poverty Reduction in the Hospital Sector.” *Economic Development Quarterly* 24(1): 33–44.
- O’Connor, Lindsey Trimble. 2013. “Ask and You Shall Receive: Social Network Contacts’ Provision of Help during the Job Search.” *Social Networks* 35: 593–603.
- Parks-Yancey, Rochelle, Nancy DiTomaso, and Corinne Post. 2006. “The Social Capital Resources of Gender and Class Groups.” *Sociological Spectrum* 26(1): 85–113.
- Phillips, Rosemary F. 2010. “Initiatives to Support Disadvantaged Young People: Enhancing Social Capital and Acknowledging Personal Capital.” *Journal of Youth Studies* 13(4): 489–504.
- Roper Center for Public Opinion Research. 2001. *Social Capital Benchmark Survey*. Storrs: University of Connecticut.
- Seefeldt, Kristin S. 2017. *Abandoned Families: Social Isolation in the Twenty-First Century*. New York: Russell Sage Foundation.
- Smallacombe, Patricia Stern. 2006. “Rootedness, Isolation, and Social Capital



- in an Inner-City White Neighborhood.” In *Social Capital in the City: Community and Civic Life in Philadelphia*. Richardson Dilworth, ed. Philadelphia: Temple University Press, pp. 177–195.
- Smith, Tom W., Michael Hout, and Peter V. Marsden. 2013. *General Social Surveys, 1972–2012: Cumulative Codebook*. Chicago: National Opinion Research Center.
- Stoloff, Jennifer A., Jennifer L. Glanville, and Elisa Jayne Bienenstock. 1999. “Women’s Participation in the Labor Force: The Role of Social Networks.” *Social Networks* 21: 91–108.
- Strawn, Julie. 2010. *Farther, Faster: Six Promising Programs Show How Career Pathways Bridges Help Basic Skills Students Earn Credentials That Matter*. Washington, DC: Center for Law and Social Policy, Center for Post-secondary and Economic Success.
- Tassier, Troy, and Filippo Menczer. 2007. “Social Network Structure, Segregation, and Equality in a Labor Market with Referral Hiring.” *Journal of Economic Behavior and Organization* 66(3–4): 514–528.
- Turner, Lesley J., Sheldon Danziger, and Kristin S. Seefeldt. 2006. “Failing the Transition from Welfare to Work: Women Chronically Disconnected from Employment and Cash Welfare.” *Social Science Quarterly* 87(2): 227–249.
- U.S. Census Bureau. 2012. Selected Household Characteristics. 2012 *American Community Survey*. Washington, DC: U.S. Census Bureau. [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_12\\_1YR\\_CP04&prodType=table](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_12_1YR_CP04&prodType=table) (accessed May 15, 2019).
- Van Eijk, Gwen. 2010. “Does Living in a Poor Neighborhood Result in Network Poverty? A Study on Local Networks, Locality-Based Relationships and Neighbourhood Settings.” *Journal of Housing and the Built Environment* 25: 467–480.