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The Impact of a Multifaceted Program on Fragile Individuals.
Evidence from an RCT in Italy

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ABSTRACT

The Impact of a Multifaceted Program on Fragile Individuals. Evidence from an RCT in Italy[1]

The increase in poverty rates among families and individuals in Italy over the past two decades can be attributed largely to repeated periods of economic crisis. Mounting concern over the problem has driven interest in the role of policy in supporting household welfare. Responding to the currently limited access to (or provision of) public aid and assistance, private institutions and philanthropic foundations have stepped up their efforts to create new initiatives for alleviating poverty. In this paper, we use a randomized control trial (RCT) to evaluate the impact of an Italian program aimed at supporting vulnerable individuals in four separate but related areas of household welfare: employment, financial circumstances, family responsibilities, and housing conditions. The program, known as Integro, was introduced in 2018 by the Compagnia di San Paolo, one of Italy's largest philanthropic institutions. Our findings indicate a positive and statistically significant impact of Integro on three of the four target outcomes considered, with only the fourth (housing conditions) not being affected. We also sought to identify any initial conditions potentially influencing the extent to which participants benefit from the program. Is Integro equally effective for everyone? According to our data, the program provides the best outcomes for males reporting lower human capital and greater socio-emotional stability.

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1. Introduction

Poverty rates among families and individuals have risen dramatically in Italy over the last two decades. The proportion of families living in poverty grew from 3.5% in 2007 to 10% in 2022 (ISTAT, 2023). This has led to greater awareness of the importance of policies and programs designed to support the household welfare of vulnerable individuals. Since poverty is, in fact, a multidimensional problem (Aikire and Santos, 2014), projects and initiatives for reducing it need to address its many different facets. Most recent policies and programs have focused on increasing labor market opportunities; however, employment policies alone may not be enough to reduce poverty, given the probability that vulnerable individuals are more likely to find low wage jobs.

The *Compagnia di San Paolo*'s Integro program for combating poverty, the subject of the present study, adopts a holistic care model approach. It places the individual at the center of the program's development and delivery and aims to provide an integrated response to the range of needs expressed. Participation in the program helps vulnerable adults access a network of services in the areas of housing, employment, and social services, to encourage them on their paths toward economic independence. Housing and employment are inextricably linked, and vulnerable families need to rely jointly on labor market opportunities and housing availability to find more stable jobs and thus improve their living conditions and prospects. The first step of the program was to review the needs of the beneficiaries, assessing their economic circumstances, need for work, need for training, housing conditions, and current management of family relationships. Each participant worked with the project case manager to select the most suitable activities for their needs from those made available through the program.

This paper focuses on two research questions. The first was to estimate the program's effectiveness in enhancing four different outcomes: employment, financial circumstances, family responsibilities, and housing conditions. The findings from our randomized control trial show that Integro had a positive impact on the participants' employment situation, on their finances and on their family responsibilities, while no impact was found on their housing conditions. The second research question was to investigate potential variations in the program's benefits relating to differences in the participants' starting conditions, including their gender, level of human capital, standard of living, and socio-emotional stability.

The paper is organized as follows: In Section 2, we provide a summary of various approaches and results from studies on this topic, along with a discussion of our contribution to the existing literature. Section 3 outlines the program's characteristics, the evaluation design, and the data collection process, Descriptive statistics of the data are analyzed in Section 4. Section 5 details the methods, while section 6 reports the empirical results. Section 7 is dedicated to the cost-

benefit analysis. Finally, Section 8 concludes the paper.

2. Literature

The recent literature has focused on the impact of different labor market policies (for a review, see Card, Kluve and Weber, 2010). However, the limited effectiveness of labor market policies on poverty and the growing number of the working poor has encouraged analysis of combinations of programs aimed at addressing different dimensions of poverty (Heidenreich and Rice, 2016).

One important link is between employment instability and housing instability among the poor. If housing instability begets employment instability, then policy makers seeking to increase job security should also include in their analysis programs that promote housing stability. Recent empirical research has demonstrated that employment and housing insecurity are, in fact, significantly correlated, thus representing a double risk factor for vulnerable individuals.

Among recent studies from the US, Desmond and Gershenson (2016) found that low-income workers who lost their homes also experienced involuntary dismissals from their jobs. The researchers analyzed the impact of policies jointly aimed at supporting people facing employment and housing insecurity. Their findings suggest that initiatives promoting housing stability could promote employment stability as well. Parkes et al. (2011) report the experience of "integrated programs" in Chicago which bridge housing and employment policies. Their results show that such programs had positive effects not only on the participants' job skills and employment readiness, but also for their more stable and permanent housing. They conclude that initiatives of this type are worthwhile, because the provision of decent, affordable, and stable housing can be regarded as a human capital investment analogous to education or job training, and therefore strengthen the workforce.

Other examples of similar policies and programs to contrast poverty have been implemented in different European countries. Their results have been discussed in Heidenreich and Rice (2016), who conclude that greater coordination is needed among policies from different fields, such as family policy, employment policy and social policy, to offer more integrated support. Collinson et al. (2024) have shown significant links between housing and labor market experiences. Using administrative data from two large metropolitan areas in the United States (Cook County, IL, and New York City) they document that, before appearing in housing courts, tenants have experienced declines in earnings and employment, along with increases in financial distress and hospital visits. Eviction orders therefore increase homelessness and reduce earnings and

household consumption.

Further empirical evidence comes from studies concerning the impact of multifaceted policies in several developing countries (programs including consumption support, training, and savings encouragement) to help participants to achieve a sustainable level of existence. According to Banjeree et al. (2015), the effects were found to be significant on several outcomes, including consumption, productive and household assets, financial inclusion, income, and revenues. Their empirical evidence shows that it is the combination of several activities that proves to be effective in improving individual outcomes.

In Italy, to our knowledge, only a few multifaceted programs have been implemented and evaluated. Some of them have focused on supporting employment through job search, training, and mentoring activities (Baici et al., 2022; Donato et al., 2018), while others have focused on housing (such as rent subsidies and social housing), without considering other related dimensions (Caruso, 2017; Baldini and Poggio, 2014). A multifaceted program was recently implemented in Turin to support families with children through cash transfers and support in a variety of areas, including job search programs, training courses, and assistance in family budgeting and saving. Evaluation of the program determined that the participants who benefited most from the program were those who received cash transfers and attended courses (Del Boca et al., 2021).

3. The "Integro" Program: Evaluation Design and Data Collection

Eligible participants were individuals aged 29 years or older, with an Italian Equivalent Economic Situation Indicator (ISEE) falling below a specific threshold amount in euros.[2] The program was publicized by nineteen non-profit associations already involved with and experienced in assisting at-risk families. Between January and May 2019, the associations collected 379 applications from people interested in participating. To rigorously evaluate the impact of the program, we randomized the potential beneficiaries into two groups. The first was made up of the 217 treated people who received services, while the control group consisted of 162 individuals who were excluded from the program.

The first step of the program was to review and analyze the needs of the 217 beneficiaries, assessing their economic circumstances, need for work, need for training (Italian language and professional courses), housing conditions, and current management of family relationships.

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[2] The Equivalent Economic Situation Indicator, acronym ISEE, is a measure used to assess the economic situation of families in Italy. It takes into account income, assets (movable and real estate) and the characteristics of a family unit (in terms of size and type). The maximum threshold for access to Integro was 6,000 euros. A couple with two children, with ISEE equal to 3,000€, have an annual income from work of around 7,000€.

Virtually 100% had needs in more than one of these areas. The official acceptance of a beneficiary into the Integro program was then sanctioned by the signing of a project. Each individual project described the objectives and activities made available by the implementing body and established a collaborative agreement between the institution and the beneficiary. The key feature of the project was its adoption of a holistic care model that places the individual at the center of program's development and delivery and aims to provide an integrated response to the range of needs expressed.

More than 95% of the treatment group were assigned to a training and job search assistance service, a third of them were helped with the management of the home, and slightly more than 50% received support to deal with family organizational problems and relationships. For the training activities, participants took part in an initial 9-hour laboratory called the "Capability Opportunity Lab" to explore their expectations of the program and reflect on their current skills and abilities. More specific training courses were offered later. For example, the participants could attend Italian and professional courses such as accounting courses, or training for a license to drive small vehicles inside warehouses. However, most of the training was done on the job, and the most common approach to work was through internships. The beneficiaries thus had the opportunity to learn, to get job experience, to make themselves known to the company, and to earn a salary that was financed by the project.

Two types of support activities were offered to address housing concerns. The first involved rapid, emergency assistance to find placement in temporary housing solutions. The second comprised housing support in the form of counseling and assistance to deal with problems in household management. To aid individuals burdened with significant caregiving responsibilities, vouchers were provided to encourage the utilization of babysitters and enrollment in summer schools for children. To foster greater independence, beneficiaries also received guidance on purchasing and using the "Libretto di famiglia INPS," managed by the Italian social security institution. The *Libretto di famiglia INPS* is a personalized booklet of pre-paid vouchers, enabling families to compensate on-call babysitters and to access vouchers or tax discounts at a national level.

Regarding the income support component of the program, during the period between enrollment and evaluation, 80% of the beneficiaries received general support to cover family expenses (approximately €1,500 per beneficiary), 30% received financial aid for rent payments (around €1,000 per beneficiary), 15% were assisted in settling debts (around €500 per beneficiary), and a few beneficiaries (5%) received support for medical visit expenses (approximately €200 per beneficiary).

Overall, each beneficiary participated in an average of 283 hours of Integro program activities. The aim of the courses, activities, and services provided was to enhance individuals' skills in areas where they were most at risk, to encourage independent pathways toward economic autonomy and greater social integration, and to support the participants in gradually reducing their reliance on social assistance.

As part of the program evaluation, the associations promoting the program requested all individuals enrolling for it to complete an intake questionnaire on Google Forms (between January and May 2019). Prospective participants were asked about their socio-demographic circumstances, work and income conditions, and physical and psychological well-being. This was done before randomization into the treatment and control groups: the associations had no incentive to manipulate the interviews, as they were unaware of which individuals would receive treatment or whether they would be assigned to activities held at their association or at another association in the network. At the program's conclusion, from February and June 2020 – approximately 13 months after the initial intake questionnaire - external interviewers conducted follow-up interviews via WhatsApp video with the members of both the treated and control groups.

4. Descriptive Statistics

Table 1 reports the average value of a selection of variables drawn from the first questionnaire, before (non)participation in the program; we include a few socio-demographic variables and all variables that do not end up being balanced between the treated and control groups. The distributions of the other variables collected at the first interview (2019) but not shown in Table 1 were similar for both groups.

TABLE 1 AROUND HERE

The characteristics of all the potential beneficiaries can be seen in Table 1. Around 60% were female, 50% living with a partner, and 86% had children. More than three-quarters had already received assistance from the institution that helped them apply for Integro. Only 10% had regular work, around 44% could not afford to pay the rent, and a very negligible number of people said they would be able to manage unforeseen expenses of €500. Around 69% of them had undergone medical examinations for health issues in the previous 12 months. Overall, all of them expressed hope of improving their economic situation in the future (3.9 out of a 1-5 scale, from 1 "no hope" to "5" much hope).

Considering the whole sample and the information collected at the first interview (2019), we can see that most characteristics were quite well balanced between the treated and the control individuals. However, compared to the treatment group, the control group had more health concerns, was more likely to have received prior support from the institution,[3] and expressed greater trouble in managing unforeseen expenses. Moreover, they expressed greater hope for the future.

TABLE 2 AROUND HERE

Between the in-take questionnaire in 2019 and the follow-up interview in 2020, we lose around 18% of the sample. Table 2 shows the determinants of the attrition process, meaning the probability of not taking part in the interview. Included in the model are all variables which seem to affect the probability of not being interviewed. Each variable considered is also interacted with the fact of being part of the control group, so that the strength of the determinants is free to vary across the treated and control groups. For the treatment group, never having had children increased the probability of not attending the interview. For the control group, instead, being a woman, having dependent children, and being able to manage health expenses decreased the probability of not responding. Ceteris paribus, people in the control group are more likely to drop-out, but their characteristics compensate for this and, in the end, participation rates are quite similar (82.4% for the treatment group and 82.1% for the control group).

Considering attrition, we once again check the balance of the same variables – as measured by the intake questionnaire – for those who took part in the follow-up interview (Table 3). In Table 3 (left panel), we still see two differences: better health for the treatment group and better hopes for the control group. To take these differences into account, we calculate and apply probability weights.[4] The results are shown in Table 3 (right panel) and indicate that the variables are now well balanced. All other variables, collected in 2019 for the individuals participating in the second interview in 2020, are well balanced between the treated and control individuals and are not shown for the sake of brevity.

TABLE 3 AROUND HERE

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[3] In the pre-intervention data, we observe a positive relationship between having already received help from the association and being in employment.

[4] The weight is calculated as 1/p for the treated and as 1/(1-p) for the controls. P is the probability of being treated which depends on "medical examinations" and "hope for an improved economic situation".

The final sample is made up of 310 individuals (177 treated and 133 controls), observed twice, for a total of 620 observations. This is the sample on which our main analyses are based.

Who applied to the program versus who was eligible? If we compare eligible people (between 29 and 65 years of age, with an economic household indicator below a certain threshold) with those who actually applied, we find that applicants were younger on average (41 years old compared to 44), more likely to be women (61% compared to 52%), less likely to be in a couple (50% compared to 56%), and much more likely to have children (82% compared to 39%).[5]

5. Methods

In this paper we answer two questions. The first concerns the effectiveness of the program on employment, financial circumstances, family responsibilities, and housing conditions. The second research question concerns potential differences in the level of benefits from the program across individuals with different initial conditions (gender, level of human capital, standard of living, and socio-emotional stability)

We first estimate the impact of Integro on the variables of interest using a diff-in-diff estimator:

$$(y_{i,t+1} - y_{i,t-1}) = \beta_P(Integro_{i,t+1} - Integro_{i,t-1}) + \beta_T(time_{i,t+1} - time_{i,t-1}) + (u_i - u_i) + (\varepsilon_{i,t+1} - \varepsilon_{i,t-1}) \qquad [1].$$

Where y represents the possible outcomes of interest, measured before and after the potential participation in the program; *time* is a dummy variable which indicates the year of the interview (2019 rather than 2020); u_i represents the unobservable characteristics of the individual which are assumed fixed over time; and ε is the usual white noise. We consider 12 outcomes in 4 areas: employment (having a training certificate, job satisfaction, whether they have regular work); financial circumstances (their ability to make ends meet and to meet expenses for utilities and commuting); family responsibilities (whether they have co-resident children, whether they have children they provide for economically, whether they have taken children for a pediatric checkup in the last 12 months); and housing conditions (whether they have stable housing - owned or rented -, their ability to meet expenses for household appliances, their satisfaction with their lodgings). The coefficient of interest is β_P. We implement linear regressions, with probability weights, robust standard errors, and randomization inference.

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[5] To make the comparison, data from the Italian part of the European Survey on Income and Living conditions was used, extracting all unemployed people over 29 and under 65 with a simulated ISEE of less than €6,000.

Our results assume that, in the absence of treatment, the trends of the two groups would have been parallel. Our two samples were not intentionally "selected," they resulted from a randomization process, which should ensure comparable increases (and levels) in the outcome variables. To be more confident, Table 4 allows comparison of mean values of the outcomes for the treatment and control groups, measured by the intake questionnaire (2019), among those for those participated in the follow-up interview (2020) and constitute the sample for estimation of the effects. No significant differences in outcomes are observed between the two groups before the treatment.

Turning to the second research question, we now explore heterogeneous effects of the program by gender, by different level of human capital, standard of living and socio-emotional stability. We fully interact the model [1] with each of these dimensions:

$$(y_{i,t+1} - y_{i,t-1}) = \delta_P(Integro_{i,t+1} - Integro_{i,t-1}) + \delta_H(Integro_{i,t+1} - Integro_{i,t-1}) * d_i + \delta_1(time_{i,t+1} - time_{i,t-1}) + \delta_2(time_{i,t+1} - time_{i,t-1}) * d_i + (\varepsilon_{i,t+1} - \varepsilon_{i,t-1})$$
[2].

where d_i indicates, for example, the gender of the individual. The main coefficient of interest is therefore δ_H, the difference in the impact of the program for women and men and, possibly, δ_P (the impact of the program for men).

Apart from the gender dimension which is easily specified, we take advantage of the vast quantity of data gathered by the intake questionnaire for the three other dimensions. First, we analyze the level of correlation between the variables concerning the three areas of consideration: level of education, standard of living, and socio-emotional stability. Then we extract the principal components, allowing us to understand the latent variable(s) underlying the information collected. Next, we predict the score for each individual, which we include as d_i in equation [2].

6. Empirical Results

Table 5 reports shows the average effect of the program. We observe a positive impact on the likelihood of having a training certificate, of reporting job satisfaction, and of having regular work. These work-related improvements also seem to affect the economic dimension: people in the treatment group are more likely to be able to make ends meet and manage different kinds of expenses. Moreover, they are more likely to provide economic transfers to any children living

outside the household (since there is no significant change in the likelihood of having co-resident children). Although they can afford spending on household appliances, they express no greater satisfaction with their housing situation. Some of these dependent variables appear to be more indicative of first stage effects than actual outcomes: the beneficiaries have attended professional courses (and therefore obtained certifications), they are able to purchase additional items for the home (probably using the resources they were given for this). These variables - if measured in the medium-long term (after the end of the program) - might instead represent program outcomes. On the other hand, regular work, job satisfaction and taking care of non-cohabiting children can be considered true outcomes.

TABLE 5 AROUND HERE

Tables A, B, and C (in the Appendix) show the principal component analyses regarding human capital, living standards, and socio-emotional stability. We follow the usual criterion and retain those factors with Eigenvalues equal or higher than 1. Table A (Appendix) shows that the first main component extracted on human capital is positively correlated to years of schooling, the ability to use a PC, and a strong command of the Italian language, while the second component is negatively correlated to oral comprehension and production of the language. Table B (Appendix) shows that the first component extracted on living standards is highly correlated with the inability to meet expenses in different contexts, and negatively correlated with the ability to make it to the end of the month, while the second component is highly correlated with difficulties in affording expenses in a particular domain – health – and is not positively correlated with other economic difficulties. Finally, Table C (Appendix) shows that the first component extracted on socio-emotional stability[6] is positively correlated with living in a couple and with the number of cohabiting children, and negatively correlated with feelings of loneliness, stress, and anxiety; the second component is again correlated with a stable family structure but also with a state of anxiety, stress, and insomnia. We only report results related to the areas that appear most relevant for the heterogeneity of the effects: being emotionally stable (the first factor extracted in Table C in the Appendix, results reported in Table 6), gender (results reported in Table 7), and the two components related to the level of human capital (factors extracted in Table A in the Appendix, results reported in Tables 8 and 9). Living standards at

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[6] We include "in a couple" and a "number of resident children" since it is consistent with theories which suggest that relationships with family members are significant for individuals' well-being (Umberson et al., 2010). While often made difficult by competing time pressures and obligations for care, the positive and negative aspects of family relationships are likely to provide emotional resources that can help an individual cope with stress, engage in healthier behaviors and enhance self-esteem, leading to greater well-being and happiness.

the beginning of the program do not seem to matter.

TABLES 6-9 AROUND HERE

For work-related outcomes, we observe that more socio-emotional stable individuals benefit most in terms of regular work and job satisfaction (Table 6). A recipient with one more standard deviation in socio-emotional stability, compared to someone at the mean, benefits almost twice as much: the impact on regular work, for example, goes from 6.9 percentage points to $6.9 + 6.4$ percentage points (Table 6). Also of note is that participants with greater linguistic difficulties (such as recent immigrants) are those for whom we observe a higher impact on the probability of obtaining a certificate for work (Table 9).

As for the impact on income, the data in Tables 6-8 show that men with lower levels of human capital and greater socio-emotional stability are the individuals who benefit most from the program. A positive effect on managing some expenses is also evident for recipients with a mean level of human capital, but it decreases (and symmetrically increases) for recipients with higher (lower) levels of human capital (Table 8). Table 7 instead shows that the main results are driven by men and are not significant for women (for the variables indicating the ability of making ends meet and managing certain expenditures).

Another interesting outcome is related to family responsibilities. The impact is greater for men and for those who lack socio-emotional stability, as easily imaginable (Tables 6-7); and for those with greater linguistic difficulties (likely recent migrants, Table 9). For less socio-emotionally stable recipients, the effect of going to the pediatrician is also more important (Table 6), although this is not the case for recipients those with greater linguistic difficulties (Table 9).

Finally, we observe that the impact of the program on housing satisfaction is very large and negative, but only significant for men (Table 7).

Socio-emotional stability seems to matter a lot to the effects of the program. These links could be related to aspects of the psychology literature which defines emotional stability as an important characteristic that increases one's ability to cope with life's challenges and to make sense of and deal with different conditions and circumstances (Chaturvedi and Chander, 2010). When commenting on the results, we must bear in mind that the interviews were carried out and the program evaluated during the spring 2020 lock down and immediately afterwards. This may have reduced the benefits for those who participated in the program and make the results less generalizable. A second important point to consider is the possibility of spillover effects: the applicants may have known each other from participating in activities previously organized

at the associations where they registered for Integro. We can therefore expect that some control individuals may also have benefited in part from Integro. For example, they may have learned what companies were offering internships and what training activities were present in the community and open to all. This may have biased our estimates, but in a conservative direction.

7. Cost-benefit Analysis

The cost of the program per participant was approximately 18,000 euros, including direct transfers to the beneficiaries and the management of all activities (staff, locations, and internship payments). The most quantifiable benefit is that which derives from a greater likelihood of working regularly. Assuming full-time employment (40 hours per week), at the minimum wage (€8), the increase of 6.4 percentage points (Table 5) on the propensity to work entails an average benefit per person of 1,240 euros per year of work. We also try to (cautiously) attribute an economic estimate to the other benefits, for the sole purpose of comparing it roughly to the cost of the program. Let's suppose that job satisfaction derives from a better job and therefore from a higher hourly wage: each additional point on the scale leads, for example, to an increase in the hourly wage of €2. Going from a job satisfaction of 1.42 to one of 1.77 (as estimated in Table 5) means an average increase of 0.70€ per hour of work. For those who work regularly (40 hours a week, all year round, 16% of the sample), we estimate a benefit of around €1,700 per year; for all the others we foresee a precarious job of 10 hours a week for 40 weeks a year (84% of the sample), a benefit of around €280. On average, a participant therefore received a benefit of around €510. Let us now consider the benefits that come from increased responsibility towards children. On average, in case of separation, the parent pays the other parent approximately €350-400 for child support[7]; in the case of families with low incomes, we consider an amount of €250. Considering 12 months a year and an increased probability of taking care of dependent children of 8.4 percentage points, the benefit per child per year is approximately €250. Calculating the benefit that comes from a higher probability of carrying the child to the pediatrician is very complex and arbitrary. Let's consider the average healthcare cost for a person for a year to be €1,900.[8] An increase in pediatrician visits and a symmetric reduction in the use of health services of 5.8 percentage points would lead to a benefit per child

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[7]https://www.causadiseparazione.it/assegno_mantenimento/calcolo_assegno_di_mantenimento_coniuge.html#:~:text=Esempio%20di%20Calcolo%20Assegno%20Mantenimento&text=%2D%20con%20assegnazione%20della%20casa%20coniugale,%E2%82%AC%20535%2C00%20circa).

[8] https://www.aslcittaditorino.it/wp-content/uploads/2022/12/Sicurezza-Domestica-Regione-Piemonte-2022.pdf

of 110 euros. The other outcomes in Table 5 are to be considered as output or first stage results of the program, so we therefore think it unwise to assign them a value to them. Despite the rough calculations, for each adult with 2 dependent children we attribute a benefit of approximately €2,500 in the first year, half of which is due to the more objective increase in regular work. The figure diverges considerably from the cost per person, even when assuming the persistence of effects over time.

8. Concluding Remarks

In this paper, we evaluate the impact of a multifaceted, integrated program on the employment, financial circumstances, housing conditions, and family responsibilities of a sample of vulnerable individuals living in the city of Turin (Italy) in 2019-20. The training courses, activities, and services provided as part of the Integro Program were aimed at increasing the participants' skills and opportunities in each of these domains and, ultimately, to encourage them on their individual paths toward economic independence. Using a randomized control trial, we estimated the impact of the Integro program on several outcomes: work, financial circumstances, family responsibilities, and housing conditions.

Our results show that the impact is positive and significant in most outcomes. However, although there is general improvement in the employment situation, this result is mainly driven by men. Also, while the program has a positive impact on the participants' finances and family responsibilities, it does not improve their housing conditions. We also analyze heterogeneity and investigate the initial conditions that might improve that beneficiaries' likelihood to benefit from the Integro program. We find stronger effects for the subgroup of people reporting lower human capital and greater socio-emotional stability.

A limitation of the study is that we do not know which activities each beneficiary took part in, so we cannot say which project activities were most useful. Even if we knew, they would still be the activities chosen by the beneficiary together with the case manager (not randomized), and therefore the cause-effect relationship should be considered with caution. Having said this, the effects seem positive with regards to work, economic conditions and taking responsibility towards non-cohabiting children. We can argue that the activities in these areas seem to have worked. The housing issue is much more critical: the beneficiaries, especially men, were not satisfied, despite the purchase of some essential household goods. Objectively, no improvement is observed regarding housing stability.

These results have important policy implications showing the importance of a multidimensional program for addressing the issue of contrasting poverty among the most vulnerable families. They also show that some targets are more difficult to achieve relative than others, and that

some types of beneficiaries encounter difficulties in receiving benefits.

The results of our study are not easily generalizable to a different context: the intervention took place in a city in Northern Italy with its specific peculiarities. They could be extrapolated to analogous settings in urban areas of developed countries, keeping in mind the characteristics of the beneficiaries, as a consequence of the program requirements, but also of auto-selection into the program (higher prevalence of parents).

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TABLES
Table 1: Balance after the randomization (2019)

	Treated	Control	Sig. difference
Woman	0.61	0.58	
In a couple	0.50	0.49	
Age	41.2	40.9	
Italian	0.23	0.29	
Has children	0.86	0.86	
Has dependent children	0.82	0.76	
Already received support	0.74	0.83	*
Regular work	0.10	0.09	
Had medical examinations (last 12 months)	0.64	0.75	**
Unable to pay the rent	0.47	0.39	
Able to manage unexpected expenses of €500	0.06	0.02	*
Improved economic situation in 5 years (1-5)	3.8	4.0	**
Observations	217	162	

Notes: All the variables collected by the intake questionnaire (2019), but not shown, have a mean value in the treatment group that is not significantly different from the mean value in the treatment group. *** significant at 1% level, ** at 5%, * at 10%.

Table 2: Attrition (between 2019 and 2020)

		Interactions with control group
Woman	-0.39	-0.64
	(0.42)	(0.67)
Able to meet expenses: health	-0.26	-1.31**
	(0.43)	(0.65)
Has children	2.03*	-2.25
	(1.16)	(1.40)
Has dependent children	-0.75	-0.26
	(0.59)	(0.83)
Control group	3.33***	
	(1.24)	
Constant	-2.64**	
	(1.05)	
Observations	352	

Notes: Logistic regression. The dependent is equal to 1 when the person does not take part in the follow-up interview (2020), 0 otherwise. *** significant at 1% level, ** at 5%, at 10%. The number of observations does not coincide with the number of observations in Table 1 due to missing in the variable "able to meet expenses: health".

Table 3: Balance after the interview (2020)

	Observed			With weights		
	Treated	Control	Sign	Treated	Control	Sign
Woman	0.64	0.63		0.65	0.63	
In a couple	0.50	0.53		0.49	0.55	
Age	41.4	40.7		41.4	40.6	
Italian	0.22	0.27		0.22	0.26	
Has children	0.87	0.89		0.86	0.88	
Has dependent children	0.82	0.81		0.81	0.81	
Already received support	0.75	0.82		0.74	0.82	
Regular work	0.11	.09		0.10	0.09	
Had medical examinations (last 12 months)	0.62	0.74	**	0.67	0.66	
Unable to pay the rent	0.48	0.44		0.48	0.43	
Able to manage unexpected expenses of €500	0.06	0.02		0.06	0.02	
Improved economic situation in 5 years (1-5)	3.8	4.1	**	3.9	3.9	
Observations	177	133		177	133	

Notes: All the variables collected by the intake questionnaire (2019), but not shown, have a mean value in the treatment group that is not significantly different from the mean value in the treatment group. Only people who took part in the follow-up interview (in 2020) are included. *** significant at 1% level, ** at 5%, * at 10%.

Table 4: Balance of the outcomes before the treatment (2019)

	Treated	Control	Sig
Work			
Any training certificate	50.4%	49.8%	
Satisfaction (1-5)	1.40	1.43	
Regular work	10.5%	9.2%	
Economic conditions			
Makes ends meet (1-5)	1.91	1.91	
Able to meet expenses, utilities	51.5%	56.3%	
Able to meet expenses, commuting	16.6%	21.6%	
Housing conditions			
Stable housing	54.8%	50.9%	
Able to meet expenses, household appliances	19.5%	24.3%	
Satisfaction (1-5)	2.63	2.75	
Family responsibilities			
Has co-residing children	80.4%	76.4%	
Has dependent children	81.5%	81.2%	
Pediatrician	81.9%	82.9%	

Notes: Variables collected by the intake questionnaire (2019); only people who took part in the follow-up interview (in 2020) are included; with probability weights (see Table 3, last two columns) *** significant at 1% level, ** at 5%, * at 10%.

Table 5: Main effects

	Mean before treatment	$\widehat{\beta_P}$	p = c/500
Work			
Any training certificate	50.1%	+12.0***	.012
Satisfaction (1-5)	1.42	+0.35***	.002
Regular work	9.8%	+6.4*	.064
Economic conditions			
Makes ends meet (1-5)	1.91	+0.19**	.040
Able to meet expenses, utilities	54.0%	+3.3	.460
Able to meet expenses, commuting	19.1%	+12.9***	.002
Housing conditions			
Stable housing	52.9%	-0.0	.412
Able to meet expenses, household appliances	21.9%	+10.8***	.016
Satisfaction (1-5)	2.69	-0.20	.108
Family responsibilities			
Has co-residing children	78.4%	+0.0	1.000
Has dependent children	81.3%	+8.4**	.012
Pediatrician	82.4%	+5.8	.158

Notes: Difference-in-differences estimations [equation 1]. Linear regressions with robust standard errors and probability weights (see Table 3, last two columns). $\widehat{\beta_P}$ is the estimated effect of the program. Randomization inference. *** significant at 1% level, ** at 5%, * at 10%.

Table 6: Heterogeneous effects (mean socio-emotional stability vs. high socio-emotional stability)

	$\widehat{\delta_P}$	p = c/500	$\widehat{\delta_H}$	p = c/500
Work				
Satisfaction (1-5)	+0.34***	.000	+0.51***	.000
Regular work	+6.9*	.056	+6.4**	.024
Economic conditions				
Makes ends meet (1-5)	+0.16*	.096	+0.21**	.026
Housing conditions				
Able to meet expenses, household appliances	+10.3**	.034	+8.6**	.038
Family responsibilities				
Has dependent children	+9.7***	.004	-7.6***	.006
Pediatrician	+11.2***	.008	-19.8***	.000

Notes: Difference-in-differences estimations [equation 2]. Linear regressions with robust standard errors and probability weights (see Table 3, last two columns). $\widehat{\delta_P}$ is the estimated effect of the program for individuals with mean socio-emotional stability, $\widehat{\delta_H}$ is the estimated difference of the effect of the program for individuals with mean socio-emotional stability and individuals with higher socio-emotional stability (+ 1 sd). Randomization inference. *** significant at 1% level, ** at 5%, * at 10%.

Table 7: Heterogeneous effects (men vs. women)

	$\widehat{\delta_P}$	p = c/500	$\widehat{\delta_H}$	p = c/500
Economic conditions				
Makes ends meet (1-5)	+0.37***	.002	-0.26**	.018
Able to meet expenses, commuting	+22.7***	.000	-13.8**	.016
Housing conditions				
Able to meet expenses, household appliances	+20.2***	.000	-14.7**	.012
Satisfaction (1-5)	-0.43***	.000	+0.41***	.006
Family responsibilities				
Has dependent children	+19.8***	.000	-16.9***	.000

Notes: Difference-in-differences estimations [equation 2]. Linear regressions with robust standard errors and probability weights (see Table 3, last two columns). $\widehat{\delta_P}$ is the estimated effect of the program for men, $\widehat{\delta_H}$ is the estimated difference of the effect of the program for men and women. Randomization inference. *** significant at 1% level, ** at 5%, * at 10%.

Table 8: Heterogenous effects (mean level of human capital vs. high level of human capital)

	$\widehat{\delta_P}$	p = c/500	$\widehat{\delta_H}$	p = c/500
Economic conditions				
Able to meet expenses, utilities	+3.1	.504	-10.9***	.000
Able to meet expenses, commuting	+12.9***	.006	-8.5**	.040
Housing conditions				
Able to meet expenses, household appliances	+13.1***	.008	-16.4***	.000
Satisfaction (1-5)	-0.20	.136	+0.34***	.006

Notes: Difference-in-differences estimations [equation 2]. Linear regressions with robust standard errors and probability weights (see Table 3, last two columns). $\widehat{\delta_P}$ is the estimated effect of the program for individuals with mean human capital, $\widehat{\delta_H}$ is the estimated difference of the effect of the program for individuals with mean human capital and individuals with higher human capital (+ 1 sd). Randomization inference. *** significant at 1% level, ** at 5%, * at 10%.

Table 9: Heterogenous effects (mean difficulties with Italian vs. more difficulties with Italian)

	$\widehat{\delta_P}$	p = c/500	$\widehat{\delta_H}$	p = c/500
Work				
Any training certificate	+12.1**	.012	+9.6**	.010
Economic conditions				
Able to meet expenses, utilities	+2.5	.600	-10.7**	.004
Family responsibilities				
Has dependent children	+6.8*	0.072	7.7**	.012
Pediatrician	+7.8*	.062	-6.7*	.054

Notes: Difference-in-differences estimations [equation 2]. Linear regressions with robust standard errors and probability weights (see Table 3, last two columns). $\widehat{\delta_P}$ is the estimated effect of the program for individuals with mean difficulties with Italian language, $\widehat{\delta_H}$ is the estimated difference of the effect of the program for individuals with mean difficulties with Italian language and individuals with more difficulties (+ 1 sd). Randomization inference. *** significant at 1% level, ** at 5%, * at 10%.

APPENDIX

Table A: Factor loading of the principal component analysis on variables related to human capital

Variables	Factor 1	Factor 2	Uniqueness
Years of education	**.5191**	.4289	.5466
Use of PC for writing mail (1-5)	**.8111**	**.4726**	.1593
Use of PC for writing a document (1-5)	**.7675**	.4383	.2188
Use of PC for using internet (1-5)	**.8191**	.3388	.2148
Written comprehension (1-5)	**.8186**	-.2876	.2471
Oral comprehension (1-5)	**.7034**	**-.5292**	.2252
Written production (1-5)	**.8163**	-.2491	.2716
Oral production (1-5)	**.7104**	**-.5232**	.2215

Correlation between the variables expressing human capital and the extracted components (in columns). Correlations higher than 0.47 are highlighted in bold. Scales go from 1 (low self-perceived ability) to 5 (high self-perceived ability).

Table B: Factor loading of the principal component analysis on variables related to living standards

Variables	Factor 1	Factor 2	Uniqueness
Makes ends meet (1-5)	**-.5239**	.0762	.7198
Unable to meet expenses: rent (1-3)	**.6599**	**-.5477**	.2645
Unable to meet expenses: utilities (1-3)	**.7521**	-.4414	.2395
Unable to meet expenses: primary (1-3)	**.6876**	.0141	.5271
Unable to meet expenses: household appliances (1-3)	**.4898**	.1853	.7257
Unable to meet expenses: health (1-3)	**.6018**	**.6163**	.2580
Unable to meet expenses: travelling (1-3)	**.7154**	.3663	.3540

Correlation between the variables expressing human capital and the extracted components (in columns). Correlations higher than 0.47 are highlighted in bold. The scale of the variable "Make ends meet" goes from 1 (not able at all) to 5 (very able). The other scales go from 1 (able) to 3 (not able).

Table C: Factor loading of the principal component analysis on variables related to socio-emotional stability

Variables	Factor 1	Factor 2	Uniqueness
In a couple	**.6128**	**.5544**	.3172
Number of resident children	**.5330**	**.6412**	.3048
Happiness (1-5)	**.6082**	-.1472	.6084
Loneliness (1-5)	**-.7698**	.2922	.3219
Anxious, stressed, suffers from insomnia (1-5)	**-.5993**	**.6123**	.2659

Correlation between the variables expressing human capital and the extracted components (in columns). Correlations higher than 0.47 are highlighted in bold. Scales go from 1 (low levels) to 5 (high levels).