



Evaluation of Chicago's 10 Year Plan to End Homelessness

Christine George, Michael Sosin, and
Susan Grossman

Specific Goals of the Evaluation

- To determine how resources have been reallocated under the Plan;
- To detail in precise terms the program models that actually have been implemented;
- To determine if there are gaps or other issues in the implemented programs;
- To trace client outcomes under service programs provided under the Plan;
- To determine if resources and programs are appropriately targeted to improve those outcomes; and
- To detail client needs.

Components of the Evaluation

- Exploration of Access and Negotiation of the System:
 - Focus groups with consumers of service
 - Participant observation of homeless individuals at points of entry into the homeless service system (i.e., police stations and hospital emergency rooms)
 - Assessment of the City of Chicago's 311 Call Center
- Longitudinal Client Survey
- Program Providers Survey
- Qualitative Interviews with Homeless Youth

Overview of the Client Survey

- Purpose
- Methodology

Purpose of the Client Survey

- A central part of the evaluation includes a client survey.
- The survey follows individuals in the three types of housing programs supported by the Plan to End Homelessness.
 - **Emergency programs,**
 - **Interim programs.**
 - **Permanent/supportive housing programs.**
- Individuals agreeing to take part in the survey are being followed for a year and are taking part in 3 interviews at six month intervals

Methodology

- The client survey is being conducted utilizing a structured questionnaire, which includes questions about client demographic characteristics, homeless experience, including at the time of the first and most recent homeless episodes, service needs and utilization, experiences with service providers, client difficulties including health and mental health challenges and substance abuse problems, housing quality, and social support resources.
- Questions in the follow-up interviews ask about current homeless status and changes in housing, service needs and use, and status related to areas of client difficulty and support systems.
- The best way to insure representativeness was to develop a random sample by randomly selecting programs within each program category or strata and then randomly sample individuals within each selected program.

The Final Sample

- The final sample of individuals with whom we completed interviews was 554.
- Of this total, 185 were from emergency or overnight shelter programs, 192 were from Interim Housing programs and 177 were from Permanent/Supportive Housing programs. Each group included both “single” adults and adults representing families.

Wave 1 Survey Findings

- Comparison Across Program Types
 - Shelters
 - Interim Housing Programs
 - Permanent/Supportive Housing Programs

Focus For Today

- Who the Respondents were and what kind of situations they were in.
- What their housing was before entering the program.
- What program services did they get.

Demographic Traits By Type of Program

Table 1	Trait	Shelter	Interim Housing	Permanent/ Supportive Housing
	Mean Age (years)	48.0	39.8 * *	45.1
	Male (%)	79.4 * * *	44.4	49.1
	Currently Married (%)	3.1	6.2	3.3
	Never Married (%)	61.2	65.6	56.3
	Have Children (%)	72.5	80.4**	63.3
	(Living with Children Under 18 No Children People Coded as No)	7.4 *	41.8 **	19.7
	% In Family Programs * (by sampling criteria)	6.9 **	42.6 * *	22.3
	White (%)	10.4	14.8	14.3
	Black (%)	86.7	76.4	84.3
	Hispanic (%)	5.5	15.3* *	3.2

For comparison to individuals in Permanent/Supportive Housing: * $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$

Notes: + Over 90% of respondents in family programs are female.

Respondents in family programs are over ten years younger than other respondents.

Selected Personal Characteristics by Program Type

Table 2

Characteristic	Shelter	Interim Housing	Permanent/ Supportive Housing
% with Less than 12 Years of Education	35.3	35.8	30.4
% with Military Experience	13.9	10.6	13.1
% Convicted of Felony	48.1	37.8	36.3
% Reporting Chronic Medical Condition	41.3 **	49.5	58.0
% with Diagnosed Disability	28.7***	27.0***	61.2
% Use of Alcohol (to the point of feeling the effects) in last 30 days from interview	35.6***	8.9*	17.7
% with Pension for Disability	4.8*	3.8***	16
% Reporting Previous Psychiatric Hospitalization	21.1***	28.1**	48.4

For comparison to individuals in Permanent/Supportive Housing: ** $p \leq .01$; *** $p \leq .001$

Homelessness and Program Tenure by Type of Program

Table 3

Trait	Shelter	Interim Housing	Permanent/ Supportive Housing
Mean Age of First Homelessness (in years)	37.9 *	31.4	33.7
Homeless for First Time Current Spell	45.0	38.7	44.7
Median Time Homelessness	2	2	2
Average Total Months Homelessness	63.3	39.6	63.5
Median Days in Program So Far	92.0	91.9	589.2

For comparison to individuals in Permanent/Supportive Housing: ** $p \leq .01$; *** $p \leq .001$

Notes: Families in Interim Housing Programs report on average 24.2 months of homelessness.

Selected Self-Reported Reasons for Homelessness by Type of Program

Table 4

% Citing	Shelter	Interim Housing	Permanent/ Supportive Housing
Moved to a Different City	10.8*	10.6	6.3
Lost Job or Job Income	41.9*	40.5	30.9
Increased Expenses	21.8	19.0	17.5
Evicted	21.8	22.0	25.2
Discharged from Jail or Prison	10.6	9.1	7.8
Unbearable Living Conditions	9.2	13.3	13.6
Interpersonal Conflict	27.8	27.9	37.9
Lost Tangible Support of Others	28.9	21.8*	37.8
Abuse by Others	3.5*	8.5	9.2
Physical or Mental Health Issues	13.0***	12.3***	30.4
In General, % Reported Heavy Drinking, Drug Use at time of Homelessness	36.1	28.7	42.0

For comparison to individuals in Permanent/Supportive Housing: * p ≤ .05, ** p ≤ .01, *** p ≤ .001

Notes: In Interim Housing, of family heads, 23.0% report unbearable conditions; 5.5% report health issues; 13.3% report alcohol or drug problems; and 1.1% report discharge from Jail.

In Permanent/Supportive Housing, of family heads, 26.4% report unbearable conditions; 23.6% report abuse; and 8.2% report alcohol or drug problems.

Reported Sleeping Arrangement Before Entering Program by Program Type

Table 5

% Reported Sleeping In	Shelter	Interim Housing	Permanent/ Supportive Housing
Emergency Shelter	11.8 (p=.0590)	14.5	19.5
Interim Housing	2.2***	9.7	15.2
On Street	11.9	6.5*	16.0
Own House or Apartment	12.6***	13.0*	5.5
Someone Else's Dwelling	37.2***	35.3**	15.7
Institution	12.9	13.8	12.1
Other	11.4	7.2 (p=.0566)	16.1

For comparison to individuals in Permanent/Supportive Housing: * $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$

Notes: + For families in Interim Housing, 7.6% slept in shelters, and 53.4% in someone else's dwelling.

+ For families in Permanent/Supportive Housing, 35.9% slept in interim housing, 26.4% in someone else's dwelling, and 5% in institutions.

Reported Referral Source to the Program by Program Type

Table 6

% Reporting	Shelter	Interim Housing	Permanent/ Supportive Housing
Referred by Previous Housing Agency or Program to the Present Program	2.8 ***	8.0	18.3
Referred by Other Agencies/Programs	19.0***	43.7	35.6
Referred by Family/Friends	37.0	18.7	28.0
Reported by the City of Chicago 311 Call Center	8.9*	13.5**	2.7
Reported by Institution	10.0	18.6	16.7
Other	28.7***	18.3	15.4

For comparison to individuals in Permanent/Supportive Housing:* p ≤ .05; ** p ≤ .01 ; *** p ≤ .001

Reported Use of Social Services in Last 30 Days by Type of Program for Those In Program 30 Days or More Only

Table 7

% Reporting Receiving	Shelter	Interim Housing	Permanent/ Supportive Housing
Job Related Services	15.9	26.1**	11.0
% of those at Program	49.4	66.4	85.4
% referred by Program	0	18.4	0
Counseling Services	10.0	46.0	36.0
% of those at Program	55.8	75.8	71.5
% referred by Program	0 #	6.1	2.6
Outpatient Drug and Alcohol Services	2.5 #	15.9	21.0
% of those at Program	0 #	77.2	55.0
% referred by Program	0#	12.4	5.9
Outpatient Mental Health Services	14.6**	21.7	36.0
% of those at Program	7.2**	46.2	57.0
% referred by Program	0#	11.3#	0
Community Voicemail	2.0	8.3	6.7
% of those at Program	0#	72.8	90.0
% referred by Program	0#	7.4#	0

Reported Use of Social Services in Last 30 Days by Type of Program for Those In Program 30 Days or More Only

Table 8

% Reporting Receiving	Shelter	Interim Housing	Permanent/ Supportive Housing
Food Stamps	82.9	86.1	81.3
Of These: at Program	44.7	68.2	51.2
Referred by Program	1.6	2.7	6.2
Medical Care	48.3*	56.8	59.6
Of These: at Program	53.6	70.2*	47.8
Referred by Program	2.8	9.5*	2.6
Child Care	4.1	10.3	11.6
Of These: at Program	72.1	76.0	68.3
Referred by Program	0#	6.0#	0
Cash Assistance	18.2***	30.8**	55.5
Of These: at Program	26.6	84.9***	42.8
Referred by Program	0#	0#	13.9
Help Finding Housing	22.7	52.9**	18.3
Of These: at Program	66.6	83.5	100.0
Referred by Program	5.1	6.9	0

Notes: In general, families are more likely to receive employment services , child care, and medical care (in interim housing).
Individuals are more likely to receive alcohol and drug services.

For comparison to individuals in Permanent/Supportive Housing:* p ≤ .05; ** p ≤ .01; *** p ≤ .001

Ratings of Problems in Various Areas and Receipt of Services

Table 9

	Shelter	Interim Housing	Permanent/ Supportive Housing
% Rating Extent to Which They Have Been Bothered by Medical Problems In the Last 30 days as Moderate to Extreme	46.2	46.8	60.5
Of These Percent Receiving Any Medical Treatment in the Last 30 days.	54.0**	63.0	72.7
% Rating Extent to Which They Have Been Bothered by Employment Problems in the Last 30 days as Moderate to Extreme	51.0***	46.3***	21.4
Of These Percent Receiving Any Employment Services in the Last 30 days.	15.7	38.3	24.9
% Rating Extent to Which They Have Been Bothered by Psychological Problems in the Last 30 days as Moderate to Extreme	31.9	44.6	39.3
Of These Percent Receiving Any Out Patient Mental Health Services in the Last 30 days.	16.1***	33.5*	54.8

For comparison to individuals in Permanent/Supportive Housing: * $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$

Ratings of Problems in Various Areas and Receipt of Services

Table 9 Con't.	Shelter	Interim Housing	Permanent/ Supportive Housing
% Rating Extent to Which They Have Been Bothered by Alcohol Problems in the 30 Days Before the Interview as Moderate to Extreme	11.5	4.2	5.3
Of These, Percent Receiving Out Patient Drug or Alcohol Treatment in the Last 30 Days	0	22.8	44.4
% Rating Extent to Which They Have Been Bothered by Drug Problems in the 30 Days Before the Interview as Moderate to Extreme	13.0	6.7	7.7
Of These Percent Receiving Out Patient Drug or Alcohol Treatment Services in the Last 30 days.	0	20.5	51.8

For comparison to individuals in Permanent/Supportive Housing:* $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$

Selected Perceptions About Program Quality by Program Type

Table 10

	Shelter	Interim Housing	Permanent/ Supportive Housing
Median Total Rating on Work with Other Agencies Scale (Rosenheck Items)* (Max=20)	5	13	14
Median Total Rating for Service Coordination Scale * (Max=25)	17	17	16
Median Total Rating for Worker Caring and Service Quality Scale* (Max=50)	30	40	45
Median Total Rating for Service Helpfulness Scale * (Max=20)	14	17	19

Notes: *Scale ranged from 1 (Low Rating) to 5 (High Rating) so higher ratings reflect more positive evaluations.

Summary of Combined Findings Regarding Accessing and Negotiating The Homeless System

- Focus Groups
- Participant Observations and interviews
- Testing of the City of Chicago's 311 Call Center

Focus Groups

- 15 conducted
- Shelter, interim, drop in, or permanent
- Adults, families, youth
- 95 individuals in total (21 adult family members and 20 youth)

Participant Observations and Interviews

- Two police stations
- Two hospital emergency rooms (only one observation)
- Two DFSS service centers
- Two street outreach teams
 - One DFSS staffed
 - Contracted

Testing of the City of Chicago's 311 Call Center

- Researchers made 100 calls to the City of Chicago's 311 Call Center presenting a number of different situations and caller characteristics.
- Individuals pretended to be adults and youth, male and female, families and single individuals.
- Individuals indicated they were located across multiple neighborhoods to cover the whole city.
- Some calls were also made by Spanish speaking individuals to see if services varied by language.

Accessing the System

- The 311 Call Center was a very passive system
 - Most testers rated the 311 operators respectful, yet few found them helpful.
 - Both single adults and heads of families focus group participants reported that they were just redirected to “nearest police stations.”
 - Youth focus group members complained that their special needs not taken in consideration and directed to adult shelters
 - Test callers found the de-facto 311 protocol was to tell caller to go to closest police station or hospital emergency room and then call 311 back again.
 - Operators mostly did not refer to specific programs, not even DFSS service centers.
 - However, testers reported that in 16% of cases there was some more detailed information given. (Gave street address of police station or hospital, etc.) These were likely to be to youth or family callers.
 - No tester was offered a well being check, call back or pick up for families with young children or unaccompanied youth.

Accessing the System

- Police Stations and Hospitals
 - Often no staff at sites with knowledge of system to help, just a place to make a phone call.
 - Long waits for transportation pick up.
- Street Outreach
 - HOP teams don't have direct linkage to organizations that provide clinical or housing services.
 - Possible mixed messages (re sweep teams) .
 - Contract team observed to have “best practices.”
- DFSS Service Centers
 - Not primary point of access to shelter system but we observed and focus group members described some direct referrals to shelters.
 - Long waits for service and limited hours (9-5) .
 - Youth reported much better referrals and assistance at DFSS service centers compared to the City of Chicago 311 Call Center.

Negotiating the system

Key themes: Siloing/fragmentation & lack of sufficient staff/resources

DFSS

- *Observations*
 - System under-resourced in terms of staff and also referral programs (especially housing).
 - Long waiting lines for services.
 - Workers helpful but, in a couple of notable exceptions, often passive in their approach.
 - Limited tool kit
 - High demand means abbreviated case management
- *Focus Groups*
 - Most had no interaction with DFSS
 - Of those who did, most talked about lack of resources and passivity of workers
 - However, there were reports of very helpful workers/effective services, especially from family heads and youth.
 - 10 S. Kedzie was valued as warming center, place to hang out and a source of mid-day food (Salvation army).

Negotiating the System

Key themes: Siloing/fragmentation & lack of sufficient staff/resources

- Other service providers
 - Focus group participants reported positive experiences from the agencies they were currently receiving services from.
 - But report system very fragmented.
 - Agency staff don't provide over-view of system.
 - A real need for more
 - Individualized services
 - Skillful case managers
 - Help in negotiating various systems
 - Assistance with employment and affordable housing
 - Feel caught in system (blame their homelessness on larger system and economic conditions).
 - Youth had less of a problem with lack of linkages within and without homeless system. (Education system helpful).

Questions/Comments