

Perceived Needs Assessment of the Homeless Community
in West Volusia County, Florida

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Abstract

Homelessness has become an increasing concern in West Volusia County, FL, in recent years. Since 2003, the Volusia/Flagler Coalition for the Homeless has conducted an annual survey of the homeless, identifying demographic information and noting services deemed necessary by the homeless community. Despite showing trends in the demographic over time, the study provides a superficial insight to their perceived needs. The purpose of this research project is to develop a better understanding of the specific needs of the homeless population in West Volusia County. In this study, a convenience sample of people who utilize the services of shelters and meal programs (n=50) was engaged in a personal semi-structured interview orally about their most recent experiences with local shelter and meal programs. It was found that the most pressing need is for more overnight accommodations for the homeless in West Volusia and that the meal programs in that area are very effective.

A homeless individual is defined as someone who “lacks a fixed, regular, and adequate nighttime residence,” or who stays in a shelter or institution.¹ In Volusia County, Florida, homelessness has become an increasing concern. The Volusia/Flagler County Coalition for the Homeless estimates that the population includes about 2,667 people, and this total increases with every passing year (Circelli, 2007).

The media reflects a growth in public interest of the welfare of this impoverished and often disenfranchised population in West Volusia. The Orlando Sentinel featured articles prior to this study discussing possible remedies to the problems of the homeless. Both urban planner Michael Arth’s proposal to build a homeless community on the outskirts of Deland, FL, and Daytona Beach police chief Michael Chitwood’s new homeless policy to give transients bus tickets out of the city to be with family and friends were mentioned in the Orlando Sentinel in the months prior to this investigation. Regardless of the feasibility of or motives behind these projects, they reflect the current climate for action in Volusia regarding this population; the fact that they are examined in local news venues suggests that the public also desires a change in the condition of the local homeless. Within this context, research on the needs of the homeless is appropriate to understand what should be done to assist them. More information would facilitate this change by allowing current service organizations, such as InterACT and the Coalition for the Homeless, to assess their effectiveness in providing services to the homeless community and design more efficient solutions to this growing concern.

Numerous studies have been conducted about assessing needs of the homeless and the effectiveness of services. Glisson, Thyer, and Fischer (2001) accomplished this assessment in terms of shelter competency by reviewing the program case records and

¹ HUD federal definition of “homeless”

conducting a post-program follow-up with the formerly homeless users of the shelter services. This study found that a majority of those who had utilized the services provided by the shelter were able to find housing after the intervention methods (physical shelter, meals, counseling, case management, etc.), but that most used over 40 percent of their monthly income on housing. This study shows the effectiveness of providing services, but emphasizes the delicate position of those in poverty who sway on the edge of homelessness.

Another study conducted by Evans and Dowler (1999) examined the eating patterns of the homeless or impoverished. By using a food frequency questionnaire and 24-h dietary recall, they found that most of the people using day centers and soup runs were not serving food that adequately fulfilled dietary requirements and that the great majority wished to improve their diet. This finding stemmed from the by-donation nature of the food. Many of the homeless were at risk of nutrition-related disorders, which would exacerbate the already burdensome trials of homelessness. Since nutrition is an important factor that affects many other aspects of life, a study on the needs of the homeless would benefit from the inclusion of this topic.

Not all services are perceived as equal by the homeless population. Caslyn, Winter, and Morse (2000) found that individuals that are given the choice of what type of service to adhere to keep in contact with that help longer as long as the problem trying to be remedied is not really pervasive, such as cocaine addiction or mental health problems. This supports an investigation into what services the homeless actually want. By implementing services identified by the homeless themselves, they will be more likely to use these services and continue treatment over longer periods of time. Asking the

homeless what their needs are increases their ability to reintegrate into society. This study utilizes this finding in the methodology.

Studies also show the perception of the service providers in the Volusia County area regarding the needs of the homeless. Crook and Mullis (2003) investigated the scope and nature of the programs in place in Florida to assist the homeless. This study found that the homeless demographics targeted for assistance by the Volusia County Coalition for the Homeless—the main Continuum of Care agency in the area, thus the agency that controls allotment of federal funding—were persons with HIV/AIDS; single parent families or women with dependent children; persons with substance abuse problems; and survivors of domestic violence and their children. It also determined the prioritized services in the two counties: transportation; housing for HIV/AIDS victims; single parent families; money management; life skills; counseling; guidance in parenting techniques; child care services; substance abuse treatment; and placement in permanent housing. Although these results pertain to the entire bi-county area, they are still important to determining discrepancies between the perceived areas of need by the funds distributors and the needs identified by the homeless themselves.

Annual studies have been conducted to learn more about the local homeless population. Roberts (2007) provides extensive demographical information about the West Volusia homeless.² Conducted over a 24-hour period, the entire survey totaled over 700 participants; the West Volusia subsection of interest totaled 109 individuals. This study found that the homeless population of West Volusia is 66 percent male and 83 percent Caucasian, with a mean age of about 38 years. 58 percent have a high school diploma or GED, 86 percent are single, and 48 percent have been homeless for over one year. 36

² See Appendix B.

percent were currently employed, with 20 percent working as a day laborer. This study also identified groups in the population that require special services: 15 percent are veterans; 15 percent have children less than 18 years of age with them; 39 percent battle alcohol addiction; 19 percent battle drug addiction; and 18 percent suffer from mental illness. These statistics develop a clearer depiction of the average homeless individual in West Volusia. The survey also included a list of services the homeless have needed: around a third marked housing; a sixth marked job training, education, or health care; a fifth marked financial assistance or alcohol/drug/mental health treatment; and half marked food as needed right now from a list on the survey.

This study provides an illustration of the characteristics of the homeless in West Volusia; however, it fails to provide a comprehensive understanding of their perceived needs. The assessment of the needs of the homeless offers only superficial insight. This study aims to expand on this preliminary assessment to develop a more comprehensive understanding of the specific needs of the homeless population in West Volusia County.

Method

Participants

The unit of analysis for this study was the individual using the shelter or meal program services at the time of interviewing. The sample included 50 adults (29 male, 21 female) chosen using a convenience method. Of the 50 individuals interviewed, 9 were not homeless. However, even though they were not homeless, many had been homeless in the past and all were within the socioeconomic class at risk of becoming homeless. 26 percent of the participants slept in the woods, eight percent slept in their car, 24 percent

slept in a shelter, 22 percent slept on private property not owned by them, two percent slept in a mental health facility, and 18 percent slept in their own home. The participants who had no background with homelessness did not answer the questions regarding experiences with shelters. 80 percent of the participants were Caucasian, 14 percent were African American, and 6 percent were Hispanic. 48 percent appeared to be within the ages of 40 to 55, with a mean perceived age around 37.5.

The demographics of this sample correspond fairly well with the demographics of the entire West Volusia area homeless community, as assessed in the 2007 Point in Time survey. The mean age and ethnicity conform almost exactly, but the gender ratio is skewed. This can be explained by the sampling method used; most interviews were conducted in shelters, where the number of females dominated the number of males.³ This factor led to a male:female ratio of 3:2 in the sample instead of the more accurate 2:1. Regardless of this deviation, the sample represented the demographics of the homeless in West Volusia fairly well.

Materials

For this study, a semi-structured personal interview was constructed.⁴ One-on-one conversational interviews were used to help the participants feel more comfortable and open about their experiences. Although open-ended responses are hard to quantify and therefore hard to analyze scientifically, it was determined that an open-ended format would allow for a more comprehensive understanding of the problems the homeless face, as well as avoid the preconceived notions inherent in more rigid questionnaires.

³ See Figure 11.

⁴ See Appendix C.

The topics of shelter and nutrition were chosen at the request of the Volusia/Flagler Coalition for the Homeless and InterACT. The instrument consisted of sixteen open-ended questions, with five pertaining to shelters, six pertaining to nutrition, and five pertaining to general issues of homelessness. These questions were purposefully broad, allowing the participant to answer in any way they wanted; this was done to gain a more in depth perspective of the daily hardships involving homelessness.

The questions used in the interview were not pilot tested, but the conversational style of interviewing lent for an evolution towards clearer wording—with the intent of the question intact—as the data collection process progressed. The questionnaire was approved by a professional sociologist prior to data collection.

Procedure

The interviews were administered March of 2007. The interviews were conducted at four locations in West Volusia: the Agape Clubhouse (n=24), the West Volusia Neighborhood Center (n=6), St. Barnabas Interfaith Kitchen (n=17), and West Volusia Family Renew Community (n=3). These locations were identified in the Directory of Service Providers Assisting Homeless People in Florida and by Lindsay Roberts, the director of the Volusia/Flagler Coalition for the Homeless. No interviews were conducted outside of these designated areas for safety purposes. Often different facilities have different types of clientele at various times; the interviews were administered at varying times of day over multiple days to reduce sampling bias.

Each facility's director was approached initially to gain managerial support and credibility with the clients of each program. Initially, the program directors asked the subjects to participate in an interview, but as data collection progressed the researcher

gained enough familiarity with the clientele to be able to approach the participants independently. With the consent of the participant, the interviews were recorded. The interviews were conducted with an informal, conversational style; the questions were posited as appropriate to the flow of the interview.⁵ The interviewee could list as many responses as he/she desired. During the course of the interview, the researcher noted the gender, ethnicity, and approximate age of the interviewee. The interviewee was introduced to the purpose of the survey prior to beginning and thanked upon completion. The responses were then put into categories and analyzed using SPSS.

Results

The participants were generally satisfied with their experiences with the shelters in West Volusia.⁶ 37 percent (n=18) was very satisfied, 27 percent (n=13) was somewhat satisfied, and 10 percent (n=5) was not satisfied. With respect to how far the homeless would travel, 22 percent (n=11) would travel less than two miles.⁷ Conversely, the same percentage would travel as far as necessary. Six percent (n=3) would travel two to five miles, 16 percent (n=8) would travel between five and ten miles, and eight percent would travel ten to twenty miles.

Because of the open-ended nature of the questions, any changes suggested to the shelters in the area were actual desires of the homeless population and therefore were significant; however, some were mentioned more than others.⁸ Of the 35 participants that suggested changes, the most prevalent response was the addition of more overnight

⁵ The majority of the interviews were conducted with the assistance of Benjamin Plymale.

⁶ See Figure 1.

⁷ See Figure 2.

⁸ See Figure 3.

accommodations for the homeless (69%, n=24). The next prevalent was changes to shelter rules or policies (34%, n=12); these suggestions included such changes as the policy towards couples, firmer criteria for use of services, and time constrictions. Other changes that were mentioned were safety (23%, n=8); better acquiring/allocation of funding (20%, n=7); equal treatment/ no discrimination in facilities (14%, n=5); better work resources (9%, n=3); more medical services (9%, n=3); better communication (6%, n=2), more counseling opportunities (6%, n=2), and more help in finding long-term housing (3%, n=1).

When asked what services should be offered at shelters, the most prevalent response of the 44 participants that listed needed services was shelter/housing (77%, n=34). The headings used to categorize the open-ended service responses derive from the service typology in Crook and Mullis (2003), with the addition of two extra deemed pertinent by the researcher.⁹ The next popular responses included personal services, such as hygiene, laundry etc. (56%, n=25); food (44%, n=20); counseling/treatment (44%, n=19); employment (37%, n=15); clothing and other supplies (36%, n=16); security (32%, n=14); financial assistance (25%, n=10); and healthcare (23%, n=9). A third group was mentioned less frequently: information and referral (16%, n=7); transportation (15%, n=6); legal services, which included obtaining identification cards, birth certificates, and social security (8%, n=3); education (5%, n=2); and childcare (4%, n=2). This data is represented in figure four.

Six categories emerged from the responses of the 43 participants that listed good rules to implement in shelters.¹⁰ Regulation of intoxication level and substance abuse was

⁹ See Appendix D.

¹⁰ See Figure 5.

the most common request of rules (67%, n=29), followed by a limit on violence and profanity (49%, n=21). 30 percent (n=13) wanted to be required to work, whether that meant holding a job or exchanging a chore for a service. 26 percent (n=11) thought time restrictions, such as arriving before a certain time in order to be able to use a shelter, was a good rule. 12 percent (n=5) desired a minimum criteria of neediness to use a shelter's services. Five percent (n=2) desired mandatory financial regulations, such as allocating a certain percent of income towards savings during the stay at the shelter.

The great majority (90%, n=45) were very satisfied with their experiences with the meal programs in West Volusia. Most evaluate the healthiness of the food they ate as very good (70%, n=35).¹¹ All four of the interviewees that described their perceived health as bad said they obtained their meals from outside means or a combination of both outside and from a program. This satisfaction with overall experience and perceived health reflects well on the meal programs in the area because 72 percent (n=36) obtain their hot meals solely from meal programs. For 46 percent (n=23) of the participants in this study, the one meal they got at the meal program facility is the only hot meal they got in a day.

Of the 32 participants who listed what they liked most about the meal programs in West Volusia, 41 percent (n=13) listed the cost—in this case free—as something they really liked, and 63 percent (n=20) listed the excellent quality of the food.¹² Other likes about the programs included: friendly servers (25%, n=8), the quantity of food provided (16%, n=5), and the opening group prayer before the beginning of eating (13%, n=4).

¹¹ See Figure 8.

¹² See Figure 9.

Only 22 participants suggested changes to the meal programs in West Volusia, but out of that group, 50 percent (n=11) wanted to change the availability of food.¹³ This included serving food on weekends—the current facilities only provided meals five days a week—and accommodating the early schedule of day laborers who missed the breakfast serving at 8:30 AM because their occupation required them to be present at the labor hall at a much earlier time. Other changes mentioned include minor menu adjustments, such as the frequency of certain dishes or requests for preferred items (32%, n=7); more fresh fruits (18%, n=4); quantity (9%, n=2); and special dietary provisions (9%, n=2). These special provisions included adjustments for diabetics and vegetarians.

The general results show that the homeless in West Volusia are a fairly stable population. 50 percent (n=25) said that they came to West Volusia because of family or other relationships.¹⁴ This corresponds to the 44 percent identified by Roberts (2007). Other reasons listed were for jobs (10%, n=5); vacation (8%, n=4); prison (4%, n=2); and born in the area (2%, n=1). The most frequent duration in West Volusia exceeded a decade (60%, n=30), and the mean time spent by the homeless in West Volusia was 9.755 years. This result also corresponds to Roberts (2007), which found that 78 percent had lived in the area for over one year. The great majority of the homeless population are not homeless by choice and do not like being homeless (74%, n=36).¹⁵

Responses to what the homeless perceived as being the biggest problem they faced were very varied, but categories and trends were discernable.¹⁶ Of the 44 participants that listed a biggest problem, the most common response was finding

¹³ See Figure 10.

¹⁴ See Figure 12.

¹⁵ See Figure 13.

¹⁶ See Figure 14

accommodations (30%, n=30) and the second most common was financial hardship (25%, n=11). Other slightly less prevalent responses were overcoming drug/alcohol addictions (18%, n=8); other people (16%, n=7), which included repairing family relationships, theft, and abuse; the police (14%, n=6); and jobs (14%, n=6). Less than ten percent listed the following problems: health (9%, n=4); themselves (9%, n=4); bureaucratic governmental problems (7%, n=3), such as filling out paperwork for assistance and being shuffled from one agency to another; and transportation (2%, n=1).

Discussion

Shelter

This plethora of percentages offers much insight into the perceived needs of the homeless in West Volusia County, Florida. The most glaring need determined was the need for overnight accommodations. The most prevalent change to shelters mentioned by the participants was the addition of more overnight accommodations for the homeless; this was also the most requested service and the most prevalent problem listed. The need for more shelter is logical; a lack of accommodations is inherent in the homeless condition. It is surprising then that West Volusia offers only 36 beds to alleviate this concern, with only eight of those beds designated to serve the general homeless community.¹⁷ With at least 109 homeless individuals residing in West Volusia,¹⁸ this supply is insufficient.

Many of the other issues mentioned would be solved by the establishment of a local overnight shelter. For instance, safety—a growing concern in light of recent

¹⁷ Continuum of Care Housing Inventory Charts (2007)

¹⁸ This is the number of homeless who participated in the January 2007 PIT survey. The actual number of homeless in West Volusia probably greatly exceeds this estimate.

brutality against the homeless—was mentioned frequently as a change to be made to shelters, a service to be offered, and as a “biggest problem” under the category of “other people.” More overnight accommodations would decrease the perceived threat against the homeless by providing a safe place to reside at night. Police involvement, mentioned by 14 percent as the biggest problem they faced, would also decrease because there would be less homeless on the street.

The results also show that most of the interviewees had lived in West Volusia for over a decade, had family in the area, and were not homeless by choice; this means that most of the homeless are not chronic vagabonds but formerly fully functioning members of society who are experiencing temporary hardship. Temporary shelter might be all that is necessary to facilitate recovery and reintegrate into society. The biggest need is therefore a local structure to house the homeless in the area.

The most common responses concerning how far the participant was willing to travel to use a shelter was equally split between those willing to travel any distance and those limited to less than two miles. This finding implies that the homeless are willing to travel to utilize provided services, but often lack the means. It is therefore recommended that new shelters be built close to town, unless the shelter is on a subsidized bus route that leaves in time for the 5:00 AM starting time for the 20 percent of the homeless that are day laborers.

Of the remaining services mentioned, many of the most prevalent were very basic necessities, such as personal services (hygiene), food, clothing and other supplies, financial assistance, and safety. In addition to the basic amenities, rehabilitative services such as counseling, treatment and help in finding a job were also very prevalent requests.

This finding suggests that the homeless are interested in satisfying their most immediate needs as well as receiving help to cease being marginalized, corresponding to the finding that most would rather not be homeless. The services suggested correspond to the biggest problems listed as well: accommodations, handling finances, holding a job, and overcoming addictions were mentioned often. Homelessness has a multi-faceted nature; it is not solved by just providing temporary housing. Other services like counseling and treatment are needed to reintegrate the homeless into society, especially with such high percentages of addiction and mental illness. The results of this study suggest that the homeless in the area recognize this and want the help to accomplish that goal. The suggested new shelter should provide the requested counseling/treatment to help alleviate this need.

The prevalence of “no substance abuse” and “maintenance of a civil atmosphere” as appropriate rules for shelters suggests a need for a calm and safe environment to contrast the difficult conditions of living on the street. One of the participants summarized the affects of the trying conditions of homelessness unmediated by shelter relief: “People are psychotic if they live on the street. If they aren’t to begin with they will become it after a while.” Implementation of these rules would provide the homeless the calm outlet from the adversity of homelessness. The results also suggest that the homeless want responsibility and accountability. Many of the interviewees suggested mandatory work and time restrictions as appropriate guidelines for shelter use. This implies that the homeless want self-sufficiency and purpose more than a simple hand-out. It is recommended that these rules be actualized.

Another trend in the responses involved management of resources for the homeless. This desire was reflected in the shelter changes of “better acquiring/allocating funds,” “better communication,” and “change in rules,” and the suggested rule of “criteria of neediness.” Many of the homeless want a stronger say in how donations are procured and distributed, and who gets to use them. It is recommended that periodical surveys be distributed to increase the communication between facility staff and clients.

Nutrition

A strong majority of the participants were very satisfied with their experiences with meal programs in West Volusia. They were considered very healthy and of high quality. However, this finding should be qualified by a possible bias in the sample because only people who used meal programs were interviewed. Despite this sampling parameter, the meal programs in West Volusia seem very effective according to the perceptions of those who use them.

It is sometimes appraised that meal programs perpetuate homelessness by supporting social loafing; however, this study found that many people, including those that are not homeless, depend on these programs heavily and would not have any hot meals without them. It is interesting that this finding is true regardless of where the interviewee sleeps at night, although those that live in a home are more likely to have other sources of hot meals and are more likely to get either three hot meals a day or less than one. The perceived healthiness of the diet of those who obtained their hot meals elsewhere was less than those who received their sole hot meal from the program. The results show that the recipients of charity are very thankful for the financial burden that the meal program lifts. 25 percent listed financial difficulty as the biggest problem they

faced, so removing the cost of food from an impoverished budget can only aid the individual in becoming reintegrated into society. Because of the level of satisfaction, it is suggested that other meal programs be started outside of Deland that follow the model of these successful programs.

If any changes were to be made, it is recommended that meal programs extend their availability to weekends. This change was the most reoccurring suggestion in the results. Currently, the meal programs in the area only serve on weekdays. Since it was determined that most of the homeless get their only meals from these facilities, they do not have any options for food on Saturday and Sunday. Also, it is advised that the time of serving be amended to accommodate the taxing schedule of day laborers. A few interviewees noted the temptation of not working in order to utilize the meal services provided during the day. It is therefore recommended that provisions be made for meals on weekends and for the schedule of day laborers.

This study faced a number of limitations. The sample excluded those that did not utilize the services provided for the homeless in the area, who might have very different needs. Criteria for participation in the study were broad enough to include those that were not homeless, a demographic not of interest to this study. The instrument used was not pilot tested prior to administering the interviews. Also, many of the questions asked were personal and could be considered intrusive.

In future replications, it is suggested that a larger, more representative sample is used and that stricter, more formal interview protocol is enforced to obtain more quantitative results. This study also raised further questions about the population that can be examined in future research. Since most homeless in this study came to West Volusia

because of family/relationships, the dynamic between the homeless and their kin is of interest. Another compelling point would be to identify the differences in need between those who utilize homeless services and those who do not. Most of the services in West Volusia are focused in Deland, FL, (the county seat) so this study focused on the homeless in Deland; however, another study might determine the needs of the homeless in the surrounding areas of DeBary, Deltona, Lake Helen, Orange City, and Pierson where help is less available for this vulnerable demographic.

The purposes of this study were to provide an in depth understanding of the perceived needs of the homeless population in West Volusia County, Florida, and to aid local service agencies in becoming more effective and efficient with how they dealt with these needs. According to the results of this survey, the homeless population could most benefit from the opening of a multi-purpose shelter in West Volusia that offered the services and rules mentioned above. The results also show that the homeless in West Volusia have many good options available for proper nutrition and that similar models of these meal programs should be instated to more areas.

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Appendices

Appendix A: Figures

Figure Captions:

Figure 1: Satisfaction with Most Recent Shelter Experience.

Figure 2: Willing Travel Distance

The most common distances are listed in darker purple.

Figure 3: Changes to Shelters Mentioned

The mean represents the percentage of the entire sample that mentioned that category.

Figure 4: Services Mentioned

The mean represents the percentage of the entire sample that mentioned that category.

Figure 5: Rules Mentioned

The mean represents the percentage of the entire sample that mentioned that category.

The most common responses are listed in darker green.

Figure 6: Where Hot Meals Usually Acquired vs. Where Usually Sleep

The bar for individuals who sleep in mental health facilities is so unanimous because only one participant fit in that category.

Figure 7: How Many Hot Meals Consumed vs. Where Usually Sleep

The bar for individuals who sleep in mental health facilities is so unanimous because only one participant fit in that category.

Figure 8: Perceived Healthiness of Food Consumed

Figure 9: Mentioned Likes of Meal Program

The mean represents the percentage of the entire sample that mentioned that category.

The most common responses are listed in red.

Figure 10: Mentioned Changes to Meal Program

The mean represents the percentage of the entire sample that mentioned that category.

The most common responses are listed in darker blue.

Figure 11: Where Usually Sleep at Night vs. Gender

Figure 12: When Came to West Volusia vs. Why Came to West Volusia

It should be noted that this graph represents the frequency of individuals, not the percent.

Figure 13: Homeless by Choice?

Figure 14: Biggest Problems Mentioned

The mean represents the percentage of the entire sample that mentioned that category.

The most common responses are listed in darker blue.

Figure 1:

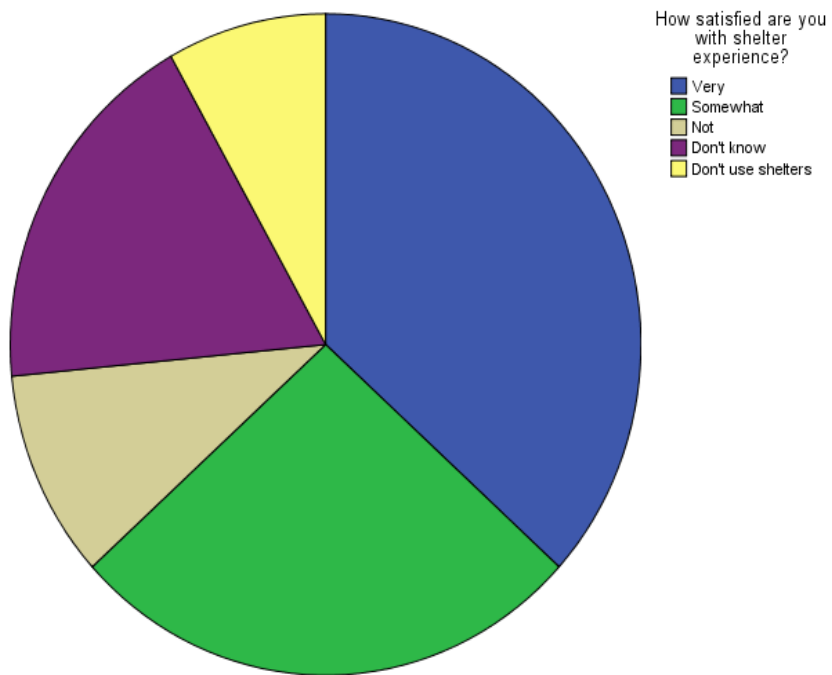


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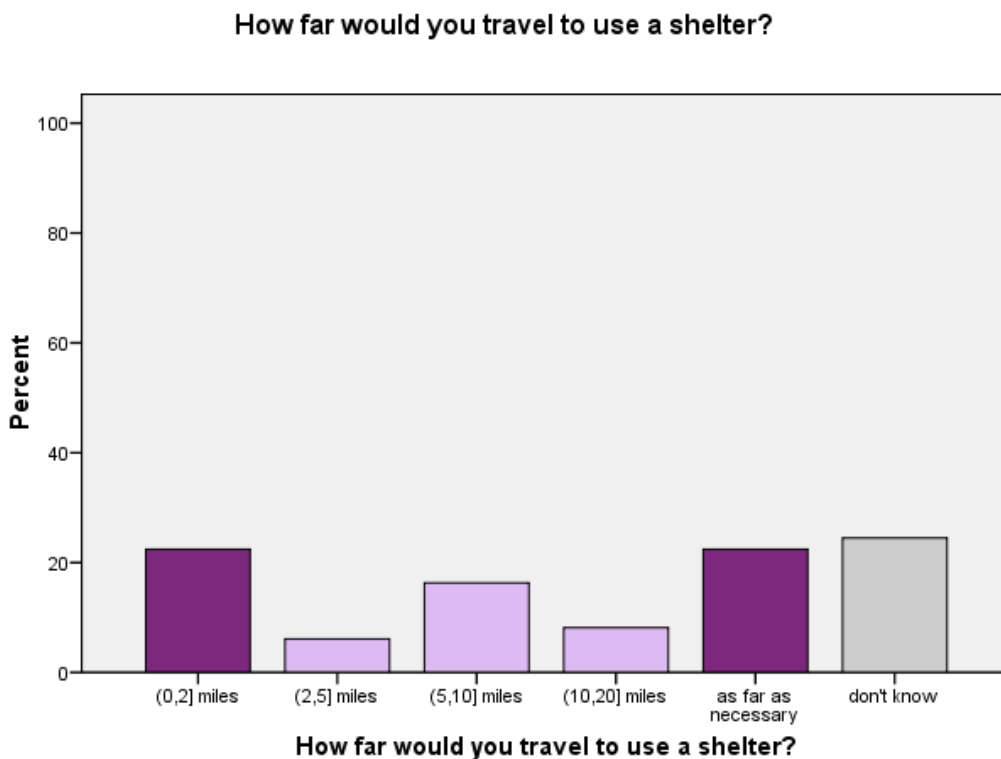


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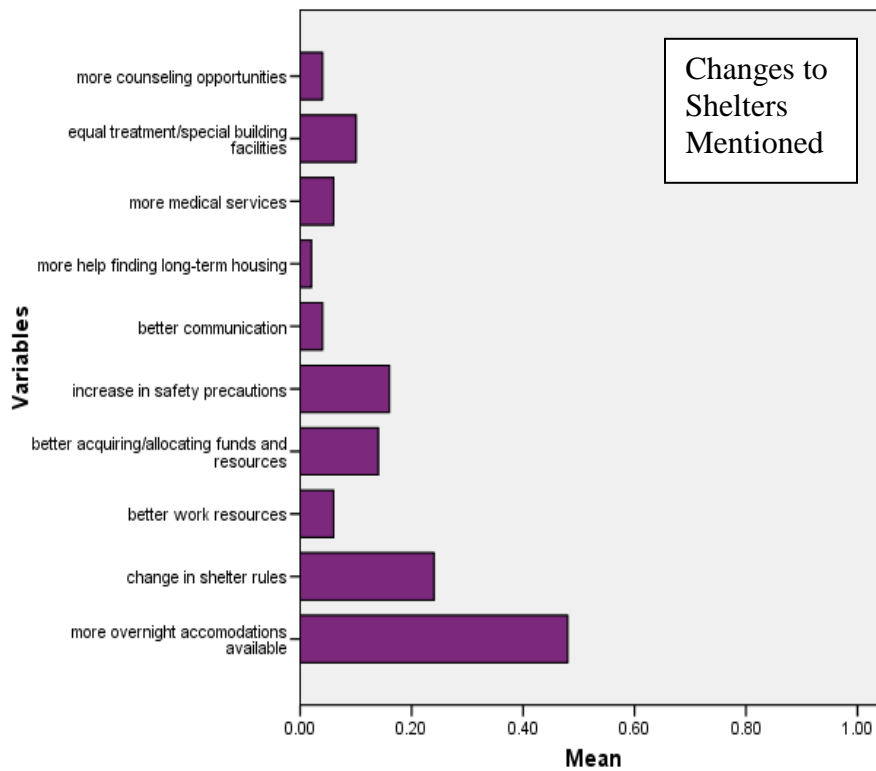


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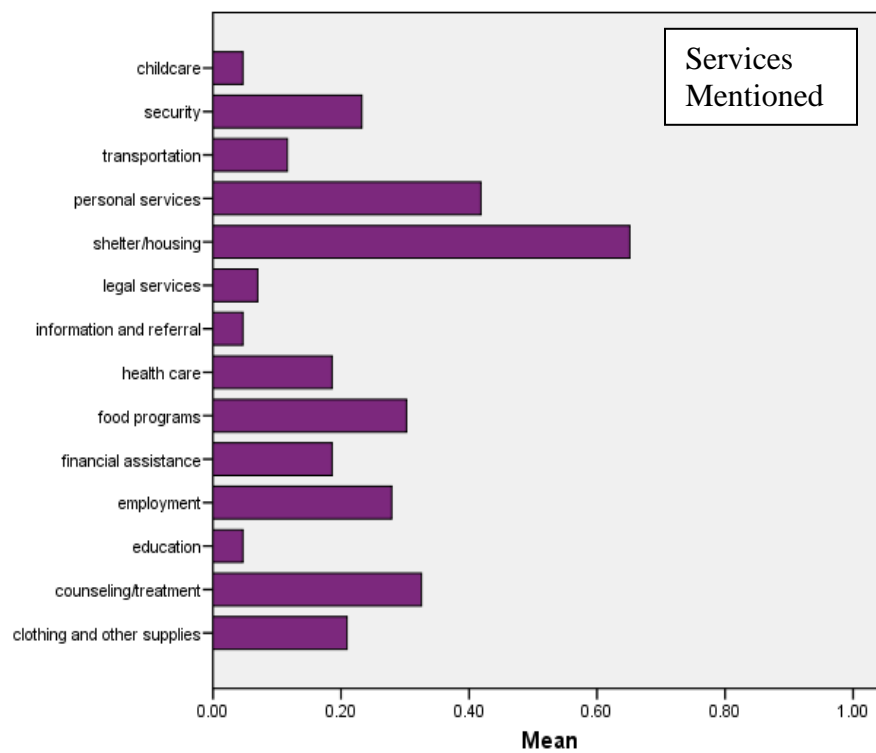


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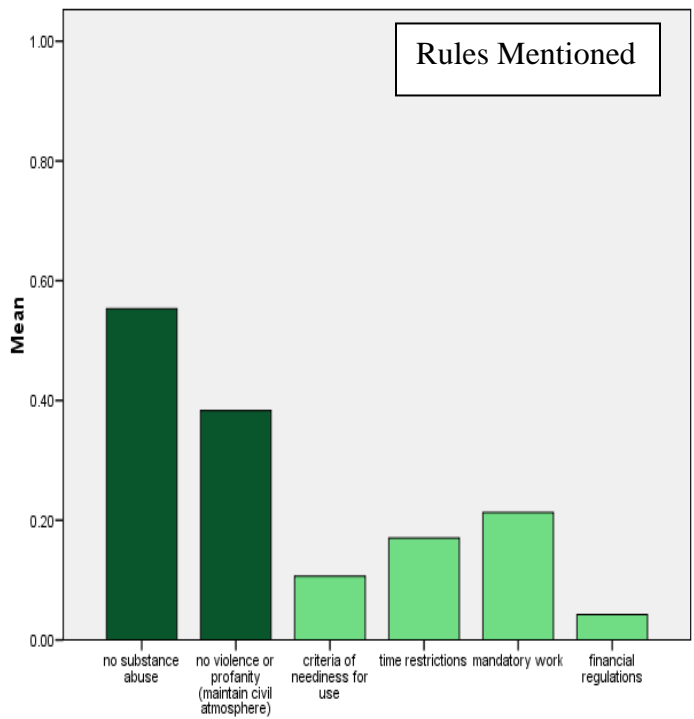


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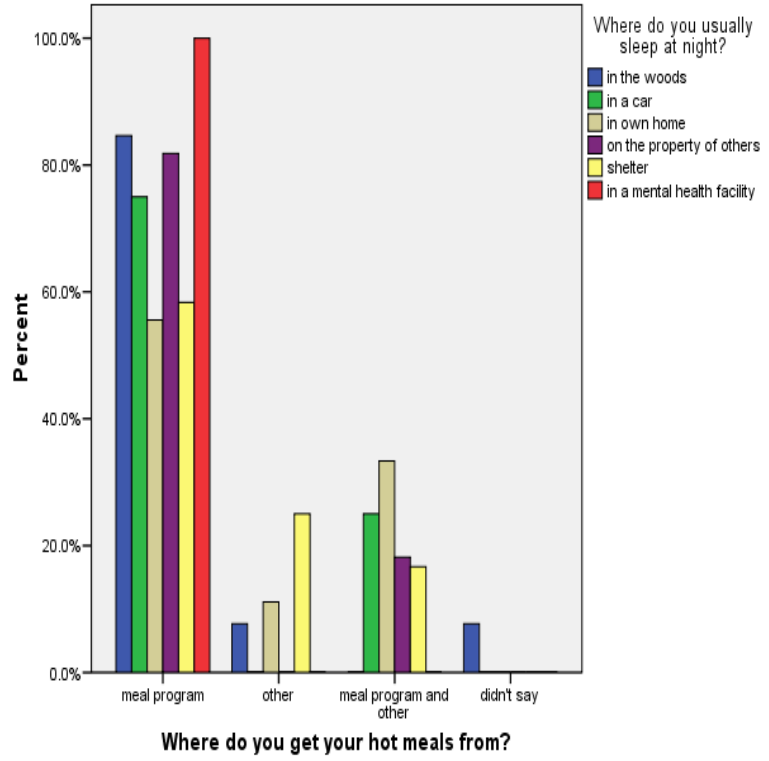


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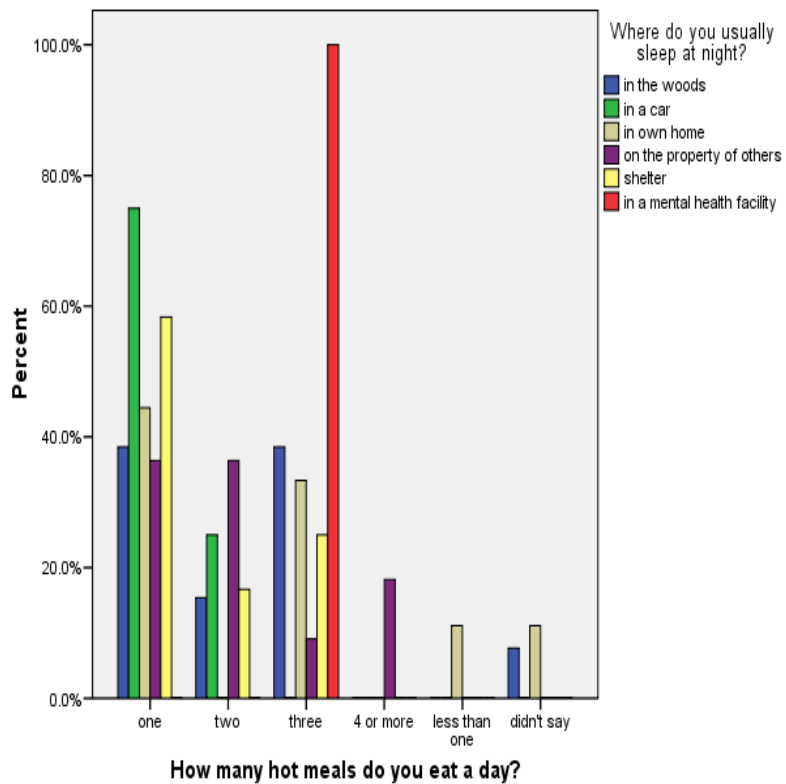


Figure 8:



Figure 9:

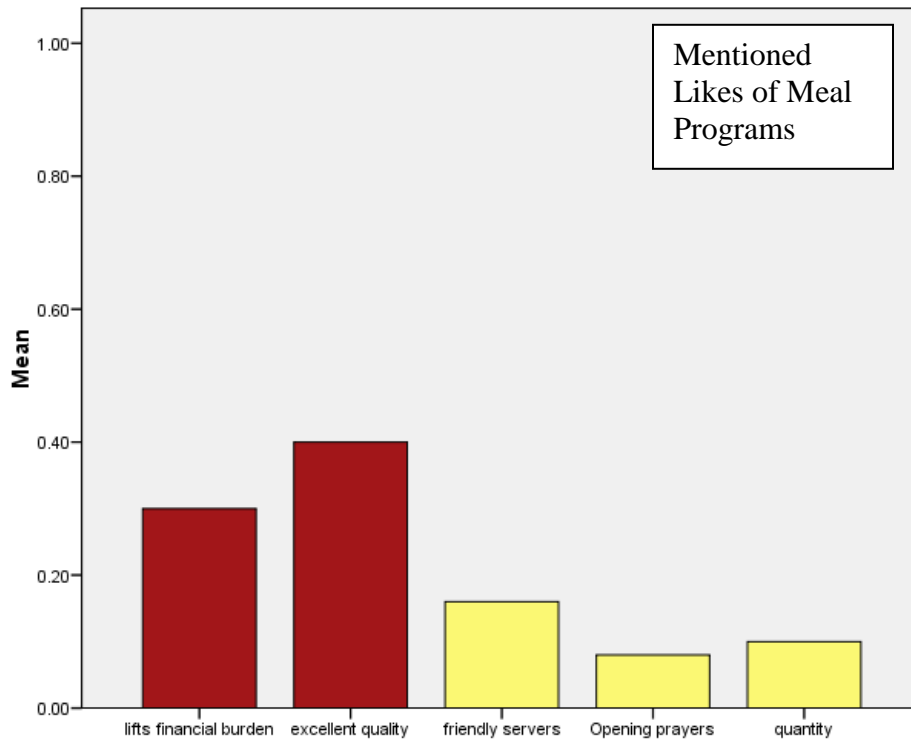


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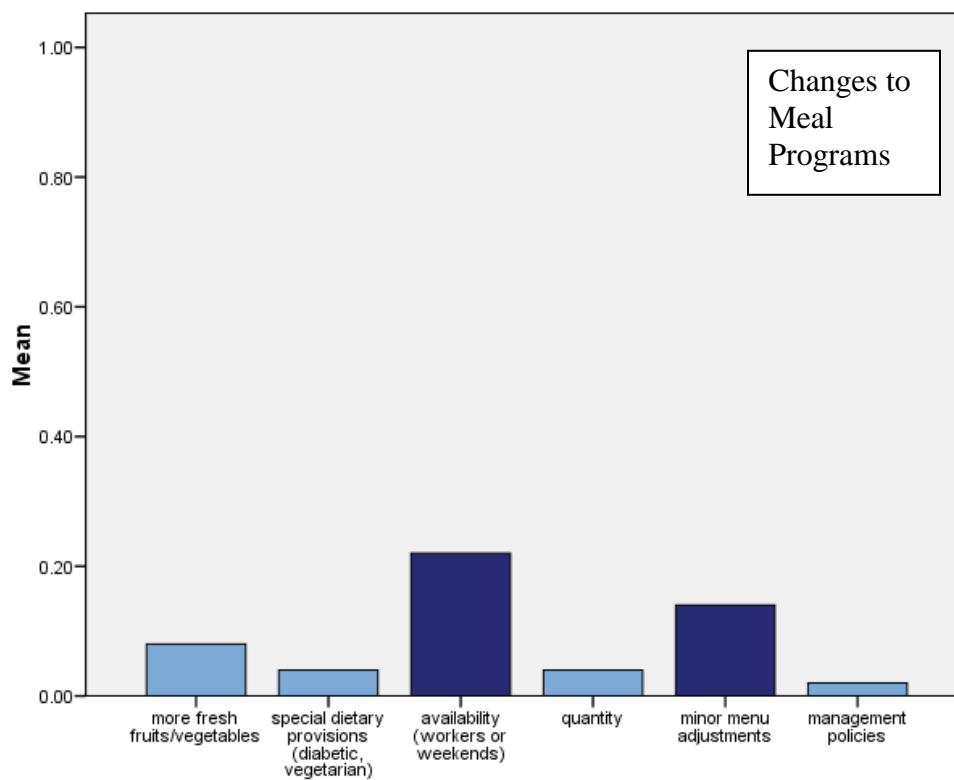


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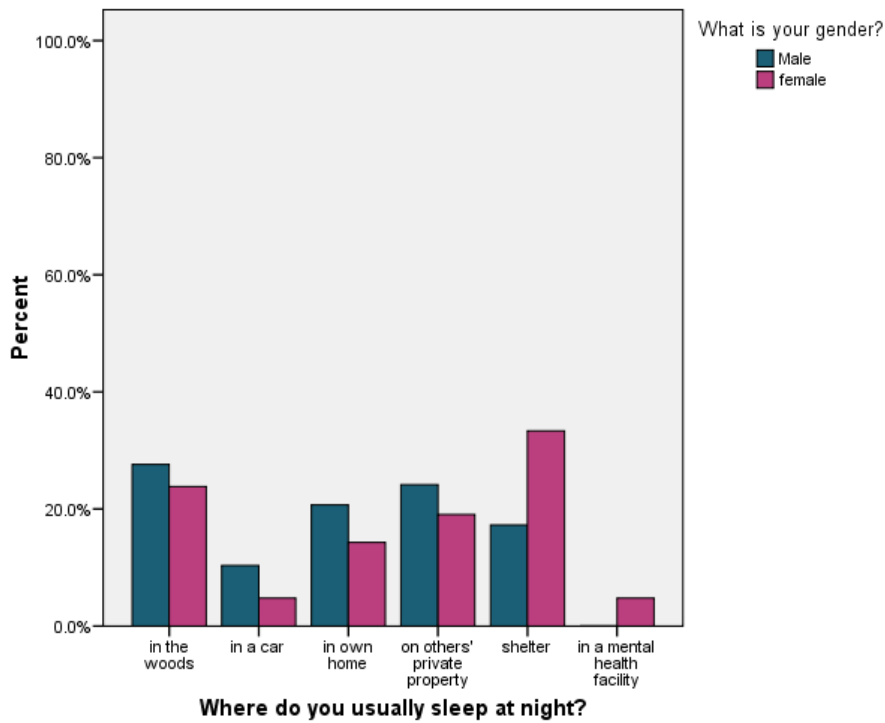


Figure 12:

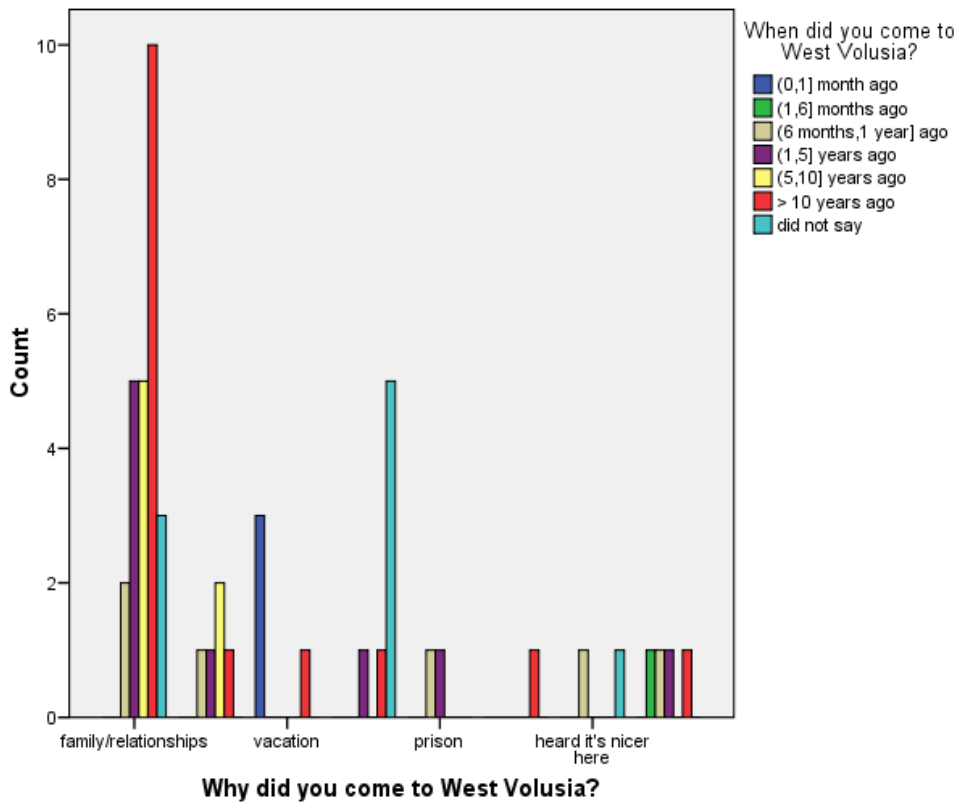


Figure 13:

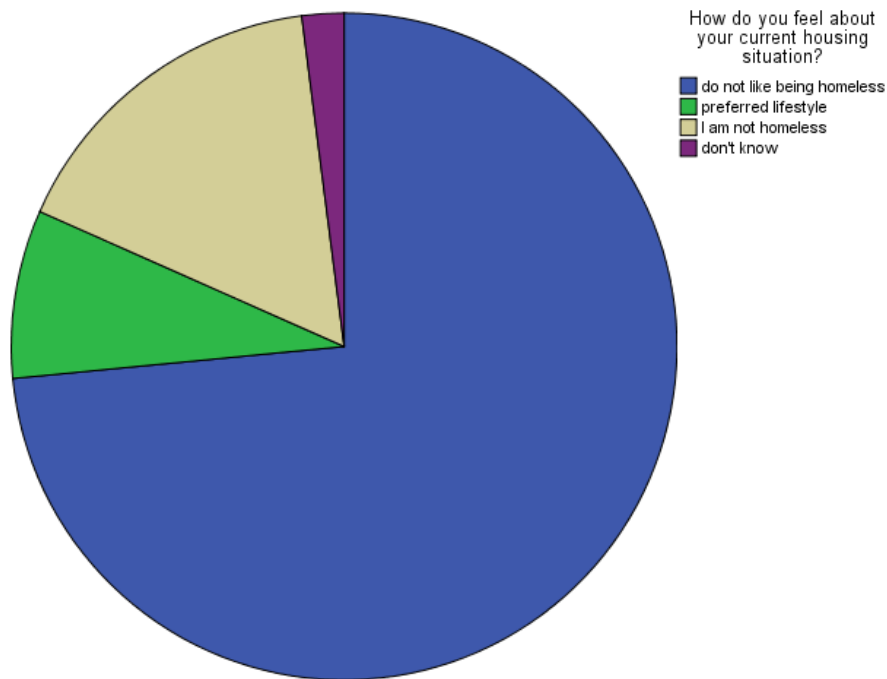
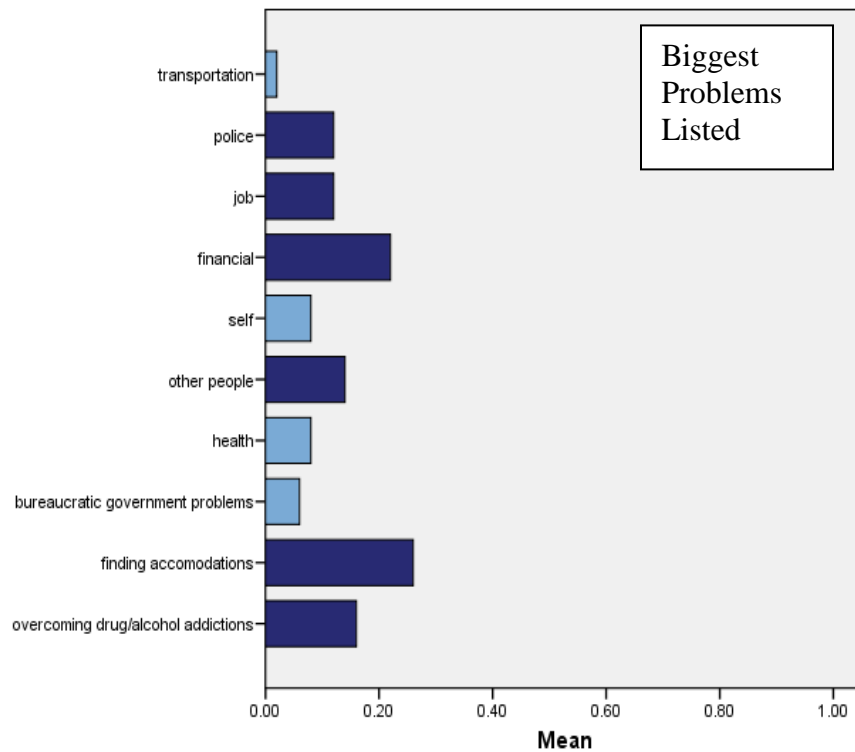


Figure 14:



B. Volusia/Flagler County Coalition for the Homeless Point in Time 2007 Instrument

A. Survey Date	B. Survey Site _____ County/Area
Name of Volunteer/Staff	a. <input type="checkbox"/> Street b. <input type="checkbox"/> Agency c. <input type="checkbox"/> Encampment d. <input type="checkbox"/> Other
C. Are you homeless right now? <input type="checkbox"/> Yes <input type="checkbox"/> No *** If the answer is no, do not proceed with interview	
D. Have you completed a survey in the last 24 hours? <input type="checkbox"/> Yes <input type="checkbox"/> No *** If yes , do not proceed with interview	

Part 1. Demographics

1a. Last Name	1b. First Name	
2. Date of Birth ____ month ____ day ____ year	3. SSN	
4. Gender a. <input type="checkbox"/> male b. <input type="checkbox"/> female		
5. Primary Race (please choose one)	6. Secondary Race (optional)	
a. <input type="checkbox"/> American Indian or Alaska Native	a. <input type="checkbox"/> American Indian or Alaska Native	
b. <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	b. <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
c. <input type="checkbox"/> Asian	c. <input type="checkbox"/> Asian	
d. <input type="checkbox"/> Black or African-American	d. <input type="checkbox"/> Black or African-American	
e. <input type="checkbox"/> White	e. <input type="checkbox"/> White	
7. Ethnicity (please choose one)		
a. <input type="checkbox"/> Non-Hispanic/Non-Latino b. <input type="checkbox"/> Hispanic/Latino		
8. Have you ever served in the U.S. Military?		
a. <input type="checkbox"/> Yes	c. <input type="checkbox"/> Don't Know	
b. <input type="checkbox"/> No	d. <input type="checkbox"/> Refused	
9. What is the highest level of education you completed?		
a. <input type="checkbox"/> Grade School (up to Grade 8)	c. <input type="checkbox"/> HS Diploma or GED	e. <input type="checkbox"/> College Degree
b. <input type="checkbox"/> Some high school	d. <input type="checkbox"/> Some College	f. <input type="checkbox"/> Vocational or trade school

—————→ **[Stop here if collecting information on children.]**

Part 2. Family/Household

10. Marital Status	a. <input type="checkbox"/> Single and never married
b. <input type="checkbox"/> Divorced, separated, or widowed	c. <input type="checkbox"/> Married or have partner (staying with you now)
11. Do you have people staying with you now?	
a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No	
12. How many adults?	_____ (enter total number)
13. How many children 18 years of age or younger do you have?	_____ (enter total number)
14. How many children are staying with you?	_____ (enter total number)

—————→ **(Complete Part 1. Demographics for each child staying with client and attach a separate sheet for each child to the parents survey)**

Part 3. Housing

15. Do you have a regular place to stay right now?	
a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No	

16. How long since you had a permanent place to stay?	
a. <input type="checkbox"/> 1 week or less	c. <input type="checkbox"/> Between 1 and 3 months
b. <input type="checkbox"/> More than 1 week, less than 1 month	d. <input type="checkbox"/> More than 3 months, less than 1 year
	e. <input type="checkbox"/> 1 year or more

17. Where was your last permanent place to stay?	
---	--

18. How often have you been homeless before?	
a. <input type="checkbox"/> Only this current time	b. <input type="checkbox"/> 1 other time
c. <input type="checkbox"/> 2-3 other times	d. <input type="checkbox"/> 4 or more times including this current time

19. Were you in jail or the hospital last night?	a. <input type="checkbox"/> No (skip to # 21 "Where did you stay last night?")
b. <input type="checkbox"/> Yes, Jail	c. <input type="checkbox"/> Yes, Hospital

20. How long were you in jail or the hospital?	a. <input type="checkbox"/> Less than 30 days
b. If 30 days or more, skip to "How long have you been staying in Volusia/Flagler Counties?"	

21. Where did you stay last night?		
a. <input type="checkbox"/> Emergency Shelter	b. <input type="checkbox"/> Place not meant for habitation	c. <input type="checkbox"/> Psychiatric Hospital or Facility
d. <input type="checkbox"/> Own House/Apartment	e. <input type="checkbox"/> Substance Abuse Treatment Center	f. <input type="checkbox"/> Trans. Housing for Homeless
g. <input type="checkbox"/> Rental House/Apartment	h. <input type="checkbox"/> Living with Friends	i. <input type="checkbox"/> Hotel/Motel
j. <input type="checkbox"/> Foster Care/Group Home	k. <input type="checkbox"/> Living with Family	l. <input type="checkbox"/> Perm. Housing for formerly homeless
m. <input type="checkbox"/> Refused to answer	n. <input type="checkbox"/> Don't Know	o. <input type="checkbox"/> Other (please specify)

22. How long have you been staying there?	
a. <input type="checkbox"/> 1 to 3 months	b. <input type="checkbox"/> 1 week or less
c. <input type="checkbox"/> More than 3 months, but less than 1 year	d. <input type="checkbox"/> More than 1 week, but less than 1 month
e. <input type="checkbox"/> 1 year or longer	

23. Will you be able to stay there for the next week? a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No
--

24. If NO: Will you have a place to stay or be able to get money to use for a place to stay?
a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No

25. How long have you been staying in Volusia/Flagler Counties	
a. <input type="checkbox"/> Between 1 and 3 months	b. <input type="checkbox"/> 1 week or less
c. <input type="checkbox"/> More than 3 months, less than 1 year	d. <input type="checkbox"/> More than 1 week, less than 1 month
e. <input type="checkbox"/> 1 year or more	

26. What is the most important reason you came to this area?	
a. <input type="checkbox"/> Born or grew up here	b. <input type="checkbox"/> Thought/Heard there were jobs here
c. <input type="checkbox"/> Because family/friends are here	d. <input type="checkbox"/> Good weather
e. <input type="checkbox"/> Thought/Heard there were good shelters and services here	f. <input type="checkbox"/> Visited and decided to stay
g. <input type="checkbox"/> Stranded	g. <input type="checkbox"/> Other

Part 4. Medical/Disability

27. Do you suffer from any of the following conditions?		
a. <input type="checkbox"/> Alcohol Abuse	b. <input type="checkbox"/> Developmental disability	c. <input type="checkbox"/> Physical/Medical disability
d. <input type="checkbox"/> Drug Abuse	e. <input type="checkbox"/> Physical/Mobility Limits	f. <input type="checkbox"/> HIV/AIDS
g. <input type="checkbox"/> Mental Illness	h. <input type="checkbox"/> Other disability	Explain _____

Part 5. Employment/Financial

28. Are you employed now? a. <input type="checkbox"/> No b. <input type="checkbox"/> Yes		
29. If you are employed, are you working a. <input type="checkbox"/> Full time, not day labor b. <input type="checkbox"/> Part-time, not day labor c. <input type="checkbox"/> Day labor		
30. What is your family's main source of income?		
a. <input type="checkbox"/> SSI/Disability Benefits	b. <input type="checkbox"/> Food Stamps/Welfare	c. <input type="checkbox"/> Veteran's Benefits
d. <input type="checkbox"/> Child Support	e. <input type="checkbox"/> Unemployment	f. <input type="checkbox"/> Income from Work
g. <input type="checkbox"/> Relatives, friends, or others	h. <input type="checkbox"/> Social Security retirement or pension	i. <input type="checkbox"/> None
31. What is the total income you and everyone in your household received last month?		
a. <input type="checkbox"/> Less than \$1	b. <input type="checkbox"/> \$1 - \$250	c. <input type="checkbox"/> \$251 - \$500
d. <input type="checkbox"/> \$501 - \$1000	e. <input type="checkbox"/> \$1001 - \$2000	f. <input type="checkbox"/> \$2001 or more

Part 6. Causes of Homelessness

32. What caused you to become homeless?	
Housing Issues	
a. <input type="checkbox"/> Evicted	b. <input type="checkbox"/> Temporary arrangement entered
c. <input type="checkbox"/> Released from jail/prison or hospital	d. <input type="checkbox"/> Unsafe housing
e. <input type="checkbox"/> Left shelter or other program	
Family/Household Issues	
f. <input type="checkbox"/> Break-up, divorce, or separation	g. <input type="checkbox"/> Moved out to escape abuse
h. <input type="checkbox"/> Ordered to leave by police or court	i. <input type="checkbox"/> Left or ran away from home
Medical/Disability Issues	
j. <input type="checkbox"/> Alcohol Abuse	k. <input type="checkbox"/> Developmental disability
l. <input type="checkbox"/> Drug Abuse	m. <input type="checkbox"/> Physical/Mobility Limits
n. <input type="checkbox"/> Mental Illness	o. <input type="checkbox"/> Physical/Medical disability
p. <input type="checkbox"/> HIV/AIDS	
Employment/Financial Issues	
q. <input type="checkbox"/> Unemployed/lost job	r. <input type="checkbox"/> Not enough income to meet basic needs
s. <input type="checkbox"/> Welfare benefits ended	t. <input type="checkbox"/> Lack of job training or education
u. <input type="checkbox"/> Money management problems	v. <input type="checkbox"/> No jobs available
w. <input type="checkbox"/> I have to watch one of my children	x. <input type="checkbox"/> I choose not to work
Other	
y. <input type="checkbox"/>	

Part 7. Needs/Services/Experiences

33. When have you needed the following services or experienced the following events?		
	In the past year	Right now
a. Emergency Shelter		
b. Transitional Housing		
c. Permanent Housing		
d. Education/Job Training		
e. Health Care (ER visit or hospital stay)		
f. Alcohol/Drug or Mental Health Treatment (detox or crisis unit)		
g. Homeless Assistance Center (showers, rest room, mailing address, storage, phone)		
h. Financial Assistance		
i. Food or Meals		
j. Stayed in public housing		
j. Had a child taken away		
k. Gone to the emergency room for basic medical care		
l. Had Medicaid or other health insurance		
m. Been arrested because you had nowhere to stay		
n. Been in jail or prison		

THANK YOU FOR HELPING WITH THIS SURVEY.

C. Expanded Needs Assessment Interview

Introduction:

My name is Amanda and I am doing research on the services provided in shelters. I would like to have a conversation with you about your most recent experiences with shelters and meal programs. Is it okay if I record our conversation?

- I. Shelter
 - a. Generally, how satisfied are you with your most recent shelter experience?
What aspects are you most/least satisfied with?
 - b. What are some changes you would make?
 - c. What kinds of services do you think should be offered at shelters?
 - d. How far would you be willing to travel to use a shelter's services?
 - e. What do you think are good rules for shelter use?

- II. Nutrition
 - a. Have you used a meal program recently? How satisfied are you with your most recent meal program experience?
 - b. What do you find very good about meal programs?
 - c. What would you change about the food services being provided?
 - d. How many hot meals do you eat a day?
 - e. Where do you get your hot meals from?
 - f. How would you evaluate the healthiness of what you eat and why?

- III. General
 - a. Where do you usually sleep at night?
 - b. How do you feel about your current housing situation?
 - c. What are the biggest problems you face?
 - d. Why did you come to West Volusia?
 - e. When did you come to West Volusia?

Thank you for your help.

Appendix D: Service Typology (Crook, et al., 2003)

Clothing

- Clothing
- Clothing assistance

Counseling/Treatment

- Counseling services
- Mental health care
- Case management
- Substance abuse treatment
- Assessment

Education for Adults and Children

- Adult basic education
- Literacy
- Life skills
- Child care

Employment

- Training
- Placement

Financial Assistance

- Rent/utility assistance
- Financial counseling
- Financial assistance

Food Programs

- Food vouchers/funds
- Meals
- Food banks

Health Care

- Medical services

Information & Referral

- Information and referral

Legal Services

- Legal assistance

Shelter/Housing

- Emergency shelter
- Transitional housing
- Permanent supportive housing
- Housing placement

Personal Services

- Personal services
- Hygiene
- Communication services

Transportation

- Transportation
- Transportation assistance

Appendix E:

Research Collaboration with Linda Brown, Director of the Agape Clubhouse:

I. Shelter

- **What is your opinion about the homeless shelters in the area? As an advocate for the homeless, what aspects are you most/least satisfied with?**

We have only one shelter in West Volusia and that is a shelter for up to 8 persons who are able to work in day labor every day. We have many persons who are not able to work because of physical or mental disabilities and they have no place to shelter in all of Volusia County.

- **What are some changes you would make?**

I would like to see shelters for the physically and mentally disabled.

- **What kinds of services do you think should be offered at shelters?**

Services to assist homeless persons to find long term solutions. For example assist them with applications to social security disability, food stamps, help them find inexpensive housing, help people to pool their resources to share housing.

- **How far do you think is an acceptable distance for a homeless individual to travel to use a shelter's services?** Any bus route would be fine. I do believe that a shelter needs to be located so that a person can get to day labor for the 5:AM sign-in.

- **What do you think are good rules for shelter use?**

Depends whether it is short term or long term. For short term shelters where people have to go to work daily, there should be rules about drinking, and a curfew. The long term shelters should have different rules. No illegal activity should be allowed. The use of alcohol should be allowed as well as having guests. Long term shelters should be treated as if they are the homeless persons home.

II. Nutrition

- **What is your opinion of the meal programs for the homeless in the area?**

They are great. I believe we have some of the best fed homeless in the state. A homeless person can get three meals a day on weekdays and usually one meal on the weekends.

- **What do you think is very good about meal programs? What do you not like about the meal programs?** As Above

- **What would you change about the food services being provided?**

I would have more defined meals on weekends.

III. General

- **What do you think are the biggest problems that the homeless face?**

Lack of treatment for their mental illnesses. Most of the homeless have either an addiction problem or a serious mental health problem that needs addressing before that person can maintain permanent housing. Some are too ill to ever be able to get work in order to obtain housing even after treatment.

- **What do you think we should do to alleviate these needs?** Provide more mental health services and addiction services. Provide long terms shelters for those who are too ill to support themselves.
- **List of services at the Agape Clubhouse:** breakfast, lunch, laundry, showers, assistance in obtaining social security, assistance in obtaining a birth certificate or marriage certificate, assistance in obtaining an identification card, assistance in finding resources, advocating for persons with the health department and other agencies. Mental health counseling, art therapy.
- **Rules at the Agape Clubhouse:** The most important rule is that this program serves Christ and we believe that this program should comply with Christian principles. This is a rule for the staff and for the clubhouse members. We try to show love, caring and understanding in all situations. We pray that this love will permeate the program. Every person who comes must do a chore. This consists of cooking, cleaning, keeping the space clean. They must attend groups we have arranged for them in order to stay for lunch that day. These groups are group therapy for one hour on Thursdays and art therapy for two hours on Wednesday. No drinking or illegal drugs anywhere on The First United Methodist Church property. No prostitution on the premises. No panhandling on the premises. No profanity is supposed to happen. We try to control gossiping, it sure isn't Christian. No inappropriate touching. Everyone has to be inside the building when the pre-school children come to and leave school.