

A Place to Call Home: An Evaluation of Family Promise of Brevard's Homeless
Self-Sufficiency Program

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ABSTRACT

Homelessness is on the rise around our nation, with the COVID-19 pandemic exacerbating the problem, and homeless families with children struggle to become self-sufficient through securing and maintaining stable housing and adequate employment. Local organizations are seeking ways to identify and meet those areas of need while making efficient and effective use of their resources. In Brevard County, Florida, Family Promise of Brevard (FPB) has implemented a transitional housing model in its stabilization program to provide support and services to families seeking to break the cycle of homelessness and achieve self-sufficiency. To determine the program's effectiveness, an analysis of secondary data gathered from families who have transitioned to stable housing will determine if the length of time a family spends in the program affects their level of self-sufficiency in terms of stable housing and financial independence. Control variables of race and ethnicity of head of household, gender, age, number of people in the family unit, and the type of household structure are used to determine if they influence program effectiveness and family outcomes. While the results indicate that demographic variables have a limited impact on self-sufficiency over time, the two significant indicators of self-sufficiency through the Stabilization program are housing and employment. Additionally, the results indicate that the families who stay longer in the program are more likely to be the individuals/families who need more services and assistance to achieve self-sufficiency. Along with the secondary data analysis, a qualitative interview data with a family in the program was analyzed and it shows that relationship-building and life skills are important aspects of the program and FPB staff make a difference through their time, compassion, and dedication spent assisting families in breaking the cycle of homelessness.

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Dedication

This work is dedicated to you, Mom, with endless love and admiration. As a single mother who encountered countless obstacles (including homelessness) but never gave up, you have shown me how to make every moment count and to have faith, courage, and determination. Thank you for being my greatest cheerleader, always!

Chapter I

INTRODUCTION

Self-sufficiency or independence can be considered a societal expectation when individuals become adults, but situations and challenges can arise that jeopardize that self-sufficiency. While organizations and industries may have slightly different definitions, for this study, self-sufficiency is when an individual or family has secure housing and an adequate job providing enough income to pay for necessities. One of the two pillars of self-sufficiency is having stable housing, and while employment can be just as problematic for some people, finding employment is not as much of a societal issue as the lack of housing and the ability to secure stable housing. While self-sufficiency is attainable, people experiencing homelessness, especially families with children, need support and resources to achieve this expected level of independence. Unfortunately, society continues to struggle with creating scalable solutions for homelessness that will have a long-term impact on self-sufficiency.

The modern era of homelessness began in the 1980s with factors including a high unemployment rate, lack of affordable housing, governmental budget cuts for departments like the Department of Housing and Urban Development (HUD), and the rise of HIV/AIDS (Jones, 2015). Today, many of these and other factors continue to contribute to homelessness within the United States. It is estimated that 580,466 people experienced homelessness nationally in 2020 as compared to the estimated 553,742

people experiencing homelessness in 2017 (Moses, 2021). On average, homelessness at the national level increased by two percent each year from 2016 to 2020 after seeing reductions from 2010 to 2016 (Meehan, 2019; Moses, 2021). The COVID-19 pandemic has worsened the rate of homelessness in many communities as unemployment rose and people did not have income to pay their rent or mortgage. It should be noted that pandemic data utilized in this research refers to information collected from January 2020 until December 2021, as the pandemic is still occurring, and its future impacts are currently unknown.

Unemployment and Self-Sufficiency

Unemployed renters were hit especially hard as evictions caused them to have to find emergency shelter or move in with a friend or family member, which increases the risk of exposure to the virus (Leifheit et al., 2021). The Centers for Disease Control issued a declaration to stop evictions in April 2020 after the CARES Act eviction protections expired, but it only applied to renters below a certain income level who were also responsible for submitting a letter of hardship to their landlords. During the same month the eviction declaration was made, evictions by corporate landlords increased, and while these two events may not be directly related, it does raise the question of whether landlords issued evictions quickly before tenants were informed about the declaration and took the steps needed for protection (Cunningham et al., 2021; Parrott & Zandi, 2021). State governments did take action to address the high risk of eviction by passing eviction moratoriums, but among the 44 states that had them at any point during the pandemic, 27 of the states allowed their moratoriums to expire, and only 17 states maintained them. Researchers have found that the number of COVID-19 cases and deaths were greater in

states that lifted their moratoriums, with diagnoses increases beginning five weeks after the moratorium was lifted, compared to states that kept their moratoriums in place (Leifheit et al., 2021; Sandoval-Olascoaga et al., 2021). With these studies showing how evictions, which often cause families to become homeless, correspond to higher chances of contracting COVID-19, the pandemic has not only made the housing crisis worse but also increased the health risks of the homeless population.

With the financial crisis of 2008, many communities saw an increase of people and families in need of pathways and support to stable housing, employment, and independence, especially as American families lost \$360 billion in wages and salaries as a result of the weak economy following the crisis (Swagel, 2010). The same upward trend in homelessness and unemployment is occurring today, especially during the time of the COVID-19 pandemic, and some scholars believe that the pandemic is disproportionately affecting minority racial and ethnic populations, as well as women. Unemployment rates reached as high as 18.5% and 16.7% for Black and Latinx persons, respectively, while the unemployment rate reached only 14.1% for White persons (Falk et al., 2021). The pandemic hit the service and retail fields the hardest and saw the greatest job loss since these fields employ minority workers at a higher rate than other fields (Tai et al., 2021). Often, losing a job means a family is at risk of eviction, and during the pandemic, Black families were two times more likely than White families to be evicted (Marron, 2021). If minority families can find housing options, they may face discriminatory processes or spend more of their income on housing costs, making self-sufficiency and long-term independence more of a challenge (Berkowitz & Basu, 2021). While the issue of homelessness had been a concern before the pandemic, the situation was only made

worse by the pandemic as health and employment have an impact on an individual's housing outcomes.

The pandemic also significantly affects self-sufficiency and housing for many women. It is estimated that 2.5 million women left the workforce due to COVID 19, with Black and Latina women being most affected (Parker & Smith, 2021). Women were forced to leave their employment due to businesses closing or may have chosen to leave due to the increased need for childcare, school closures, or caring for a sick family member, among other reasons. Since women are leading 80% of single-family households, and those households shelter a combined 15 million children, the loss of income and potential homelessness can have ripple effects on not only the current generation but future generations trying to become independent (Parker & Leviten-Reid, 2021; Parker & Smith, 2021). Families led by women also have certain housing requirements, such as more bedrooms and access to services like childcare and education. Affordable housing options were already hard to find in the tough housing market before the pandemic, but with the pandemic exacerbating the housing issue, housing choices are even more limited. The complex nature of the pandemic continues to impact housing stability and family independence, and time will tell what the long-term effects will be.

Homelessness and Communities

The rise in homelessness is predominantly reported in major cities where there are higher population counts and less housing available. Rural and suburban areas have seen the same unfortunate increases, although those areas are more likely to have people living in substandard housing or doubled up with friends or relatives, which often are not reflected in the homeless counts conducted in those areas (Meehan, 2019; Rollinson &

Pardeck, 2006). As these areas also tend to have fewer public services available, such as transportation and healthcare, homeless families living in rural or suburban areas face the challenge of service accessibility along with finding affordable housing.

While the leading cause of homelessness is a lack of affordable housing (Timmer et al., 2019), this societal issue is quickly becoming a crisis as it affects public services, local economies, and even social cohesion. Individuals and families experiencing homelessness rely on an increased number of public services, which limits the availability of available resources allocated for the community. Local economies are directly affected by the rise in homelessness because people experiencing homelessness can be deterrents to tourists, especially in downtown areas, which has caused cities to use policies to keep homeless individuals out of populated areas and public view (Borchard, 2005). The National Alliance to End Homelessness (NAEH, 2017) has conducted numerous cost analysis studies on the homeless population within the United States and found that an individual experiencing chronic homelessness costs the taxpayers, on average, \$35,578 per year, and those costs are decreased by 49.5% when they are placed in supportive housing. If communities could ensure affordable housing options with appropriate support services, these funds could be saved or utilized elsewhere to meet other community needs and have the benefit of supporting another person or family to self-sufficiency. People within society should be able to access the means and needed support to meet their basic needs, including affordable housing for well-being and safety, if society wishes to thrive. With the necessary support and resources, society can address the systemic issue of homelessness through empowerment and access to affordable housing.

Affordable housing, coupled with social cohesion, provides the opportunity to bridge the gap between income and health. Social cohesion matters because it indicates the level to which community members can relate to and rely on one another with the goal of thriving together. However, an analysis of 155 papers found that in 70% of the communities involved, the population health declined as the income gap widened (Wilkinson & Pickett, 2006). Income and housing inequality are closely tied together due to the ability of those with higher incomes being able to afford higher housing costs, while people with lower incomes may be crowded out of the rental market or forced to relocate to find more affordable housing, which is particularly challenging with the shortage of affordable housing (Bravve et al., 2011; Byrne et al., 2021). Social cohesion also incorporates the compassion people are willing to offer to one another within their community, but this compassion is often lacking when it comes to people experiencing homelessness (Rollinson & Pardeck, 2006). While neighbors may be willing to offer support and assistance when someone they know goes through a crisis, society has not stepped up to show the same compassion to those experiencing homelessness. Additionally, depending on circumstances, homeless persons may or may not be able to become self-sufficient on their own, contributing to homelessness without intervention. The adverse effects of homelessness impact more than the homeless and their families; they impact the community on a far larger scale. Due to this, it behooves the community and nation to address homelessness through identifying models that successfully create self-sufficiency.

Research on homelessness has provided data for scholars to analyze the trends and inform policy and potential solutions (Burnes & DiLeo, 2016; Padgett et al., 2016). A

large amount of this research has focused on veterans, single adults, and children. An argument could be made that research on how to combat homelessness in one subpopulation could positively impact other subpopulations. The needs of families experiencing homelessness can be quite unique compared to others within the homeless population. HUD defines a family experiencing homelessness as a unit of one or more adults with one or more children living in a shelter or public or private place not meant for human habitation (Department of Housing and Urban Development [HUD], 2020). It can be difficult to accurately measure the homeless population within the United States. However, the HUD's Continuum of Care program provides funding for grantees to count the homeless population in their geographic area using a census or sampling approach each year in late January (Schneider et al., 2016). While scholars raise concerns about the process's reliability and accuracy, it is currently the largest federal program to assess the extent of homelessness in the country (Schneider et al., 2016).

Governmental Response to Homelessness

The federal government has programs for addressing homelessness, but states can also create change in how society addresses homelessness. In 2021, California, New York, and Florida were the top three states, respectively, with the highest numbers of homeless persons, and yet even in these states, support for programs and policies to address homelessness at the state level can be a slow process (Alpert, 2021). For example, Maxine Waters, a Democratic representative for California, has introduced legislation periodically since 2016 to address homelessness but, due to financial and other restraints, has been unsuccessful in creating policy change (Ending Homelessness Act, 2021). The lack of success is partly due to housing not being considered under the

umbrella definition of infrastructure, as noted by Waters in her statement regarding the latest legislative housing package she introduced (Waters, 2021). This package includes the Housing is Infrastructure Act, Ending Homelessness Act, and Downpayment Toward Equity Act, and all three legislative pieces address investing in affordable and accessible housing options and finding ways to support low-income households to secure housing once it is available. However, critics of the policies argue that they do not create long-term, scalable solutions to homelessness and are expensive options for an already stretched HUD budget. While HUD's allocation has seen a 13.4% increase in the 2022 overall budget approved by the House Appropriations Committee (2021), governmental budget increases often do not keep up with the cost of owning or renting a housing unit. This is just one example of policy attempting to tackle homelessness, making it clear that while policy is important, action at the local level may be the most impactful way to break the cycle of homelessness in communities. About 30% of the homeless population in the United States is classified as people in families, and it is believed that this percentage is lower than the actual number due to data regarding families experiencing homelessness being inaccurately or under-reported, especially in cases where parents fear losing custody of their child or if multiple families are in a single-family dwelling (Moses, 2021).

State and local policies regarding homelessness also impact the success of homeless programs and the access an individual has to support services. In 2020, 1,094 bills on the topic of homelessness were introduced across 46 states, but only 129 were enacted. This data from the National Conference of State Legislatures' (NCSL) Housing and Homelessness Legislation Database reflects the challenge of gaining adequate

support for policies addressing homelessness while showcasing how legislators recognize the national crisis that homelessness has become. Unfortunately, some states are using legislation to criminalize homelessness rather than solve the underlying causes and issues. In a survey of 187 cities, the National Homelessness Law Center found that camping in public, sleeping in cars, and lying down in public was prohibited by cities across the nation, reflecting an increase of 60%, 119%, and 43% in such legislation since 2011 (Foscarinis & Tars, 2021). The city of Los Angeles in California outlawed camping near public facilities to curb homelessness and states like California, Florida, and Massachusetts have passed laws requiring hospitals to have discharge plans with temporary housing or shelter secured before discharging a homeless patient.

On the other hand, some states and counties choose to have very few, if any, policies for homelessness and instead leave the issue to individual cities to address. In Brevard County, the county policy for homelessness is limited to restricting where people can sleep or camp for extended periods of time, but the county addresses homelessness through Brevard Homeless Coalition (BHC), the lead agency for the Continuum of Care. Per Florida statute, each county is required to have a Continuum of Care that provides outreach to homeless individuals and families and supportive services that connect them to appropriate housing interventions. However, the interventions vary by county, and the majority are run by nonprofit organizations. BHC collects data on individuals and families from the network of organizations and provides it to the state. However, the county does not have specific ordinances for addressing homelessness at the local level, leaving organizations seeking to address this issue to determine their program models and target goals.

In response to the rising numbers of homeless people in the United States, program models were created to serve specific functions and meet specific needs within the population with the understanding that there would not be a ‘one size fits all’ solution to homelessness. At the national level, the U.S. government provides housing primarily through its Section 8 voucher program, which costs more than \$19 billion every year to serve over 2 million individuals and families (Foscarinis & Tars, 2021; Monga & Griffin, 2016).

The voucher program is an option for many people and families experiencing homelessness, but the process to apply for it can be confusing and cumbersome, with an extensive waitlist in many cities where rates of homelessness are especially high. In fact, as applications are categorized as ‘preference’ or ‘non-preference,’ homelessness is not a factor for preference consideration. Homeless families with children under 18 can apply for preference, but it has been noted that each city, locality, and state have its own rules for Section 8 housing that can make it harder to secure a spot, and waitlists can be over ten years long if the vacancy rate is low. Therefore, for many families experiencing homelessness, the Section 8 voucher and housing subsidy program is available. However, many do not consider it a viable option, especially when parents are concerned about raising children in a stable home environment sooner rather than later. Instead, families experiencing homelessness may consider other models for housing assistance, and the rapid rehousing and transitional models are two of the most common models that allow families to stay together and provide support services while working toward housing stability. Many of these models are implemented at the local level in cities and communities by nonprofit organizations with funds provided by local, state, and national

grants. By implementing models for addressing homelessness at the community level, organizations can determine the needs of their specific population and structure their programs accordingly.

Contribution

While single adults experiencing homelessness have their own struggles with self-sufficiency, families can have similar challenges in addition to those unique to adults caring for children. Parents in families experiencing homelessness must juggle finding affordable housing and employment with a livable wage with their parental responsibilities of caring for and supporting the growth and development of their child or children. For parents experiencing homelessness, it can be especially difficult to maintain typical parental relationships with their children, many of whom may experience traumas and insecurities during their time being homeless (Anthony et al., 2018; Swick, 2008). Additionally, homelessness can have varying effects on children that can affect their mental, physical, emotional, and even social health. Programs addressing the needs of homeless families are aware of the common challenges they face and understand that these challenges can be barriers to self-sufficiency. Therefore, many programs serving homeless families are structured to meet as many of those needs as possible for both adults and children. However, programs depend on staff and available resources, which can differ widely from city to city.

Targeted local programs may help address family homelessness by providing the care and resources at a local level that allows for relationship building, life skills development, employment assistance, and other factors that can influence family self-sufficiency.

Problem Statement

Homelessness has been a research topic for years, and the coronavirus pandemic has shed light on the depth and severity of the homeless crisis, which has a correspondingly negative impact on the self-sufficiency of people and families. Since the pandemic peaked in December 2020, the Census' Current Population Survey and the Department of Labor reported that 15 million people had lost employment and had to make the difficult decision of whether to pay their housing costs or put food on the table, and data reflects how the pandemic has disproportionately affected the self-sufficiency of minorities (Berkowitz & Basu, 2021; Center on Budget and Policy Policies, 2021). This increase in people losing employment, which historically results in loss of housing, is cause for concern because that means our local economies may also struggle. After all, if people lose their jobs and their housing, they will need to use more community resources to try to regain their self-sufficiency, and there will be fewer people paying taxes, which support government programs, including subsidized housing.

Despite growing research in addressing homelessness, there is limited research focusing on self-sufficiency among families experiencing homelessness and research to determine what effect the length of stay in a program aimed at stabilizing homeless families has on their self-sufficiency. This lack of research directly impacts not only the homeless population but their communities and the nation as resources are limited and allocated between states depending on need. From 2017 to 2020, the 30,000-person increase in the homeless population is cause for alarm as each of these individuals is in need of stable and affordable housing and may need assistance to become self-sufficient (Moses, 2021). On average, families experiencing homelessness that use half of the

resources available to them in shelters cost between \$35,000 and \$50,000, which is equal to about five years of a federal housing subsidy (Culhane et al., 2007). When researchers consider the costs of homelessness on adults, children, taxpayers, and communities, it is a wonder that society has not been able to find a solution to address this societal issue on a large scale. To address these issues, society also needs to protect basic human rights so that all of the citizens can meet their basic needs to live within our community.

A lack of self-sufficiency, either in terms of employment or housing, can also impact the future of families, especially as homelessness that is not addressed with long-term solutions can lead to the cycle continuing with children. Children in families experiencing homelessness are at increased risk for physical and mental health challenges, experience more difficulty in school, and have difficulty building relationships and trust with others than their peers in self-sufficient families in stable housing (Adkins et al., 2017; Buckner, 2008). Adequate employment is also required for self-sufficiency, yet adults may struggle to find employment that covers their expenses, especially when the cost of living rises faster than the average salary. How can parents be expected to attain self-sufficiency when factors like transportation and education may limit their employment options? When adequate employment, or employment that provides a stable source of income that covers expenses, is not available or the applicants do not have the necessary training, skills, or experience to be hired for the job, families have no hope of paying their housing costs and may become homeless. While children do not have control over their circumstances, they unfortunately experience side effects when a family is led by a parent or parents who are not self-sufficient. If the children experiencing homelessness today continue to grow up in a family where self-sufficiency

is a struggle or unattainable as they grow older, what kind of future does that create for them? For the same token, how will society function if an increasing number of families lack self-sufficiency and need to rely on programs and government support to function? As our society believes everyone should have the right to meet their basic needs, including well-being and safety, long-term solutions to addressing homelessness need to be supported to not only support the homeless population but improve our entire society. While employment is important for self-sufficiency, housing is a family's primary need, so homelessness must be addressed with long-term solutions. Not only do these solutions need to address homelessness, but they also need to focus on self-sufficiency if society truly wants to improve families' quality of life and long-term success. As large governmental programs have not provided such solutions, a transitional housing program like Family Promise of Brevard (FPB) may be a better option if data supports that such programs are effective in meeting diverse client needs, efficient in using resources, and scalable.

As a family receives support and gathers the tools needed to transition to stable housing, self-sufficiency is the primary goal of many programs. FPB determines that a family has become self-sufficient when they have secured and are able to maintain stable housing and adequate employment over time. The loss of one of those pillars results in the family continuing in the cycle of homelessness.

The length of time families experiencing homelessness participate in programs focused on stability and independence varies among programs and depends on their structure. Unlike many other programs aimed at addressing homelessness, FPB believes that families should have the autonomy to decide how long they continue in the program.

Therefore, each family participates in their program as long or as short of a time as they would like, with the average length of time being about a year. By determining if there is an optimal length of program participation and the characteristics of families utilizing the program, the director and staff can adapt their program timelines and resources to be used effectively and efficiently. There are expectations that program participants make progress towards self-sufficiency, and that is measured through conversations with case managers, as well as efforts made to secure adequate employment and identify potential housing options. This program evaluation project would help determine the effectiveness of the Stabilization program at FPB on a local level, and the information learned will also be beneficial to administrators, policymakers, and program directors on a larger scale who desire to address the homeless crisis happening within the nation.

Purpose and Research Questions

The study focuses on determining the effectiveness of the transitional program for homeless families created and run by FPB, a local nonprofit in Brevard County, Florida. During the economic recession of 2009, the rate of children experiencing homelessness increased while the availability of affordable housing decreased, leaving many more families in need of services (Sard, 2009). Today, with the COVID-19 pandemic and rising unemployment and cost of living, there is a similar increase in both children and families experiencing homelessness, while affordable housing continues to be a challenge as housing costs are rising quicker than salaries. Before the pandemic, more than 500,000 families had experienced homelessness in the previous decade, and during the pandemic, it has been estimated that an additional 400,000 shelter beds are needed for homeless families (Abrams et al., 2022). Suppose society continues to see this upward trend in

homelessness among families. In that case, resources will become increasingly more limited, making solutions harder to implement for any lasting change, potentially impacting the rights of each citizen's ability to meet basic needs and have secure and safe living. As organizations seek to execute their mission and meet this growing need, they must first determine if current models and programs effectively create self-sufficient families. To make this determination, it is essential for program directors to understand the success rates of their current program and determine if other variables have an impact on family outcomes. This research will determine how the length of stay in the program correlates to self-sufficiency in homeless families since this measures the program's potential effectiveness and ability to utilize resources for self-sufficiency. Due to other factors that influence a family's self-sufficiency and success in the program, it will be important to consider the control variables of adult race, ethnicity, gender, age, number of people in the family unit, type of household, the adults' employment status as families went through the program and upon their exit.

The program evaluation purpose is beneficial to FPB staff so they can understand the impact of their program design's impact on self-sufficiency. This research is also useful to public administrators and policy makers interested in understanding what factors may impact self-sufficiency in homeless families and other organizations seeking to create or change their homeless programs to break the cycle of homelessness for families by developing financial independence and housing stability.

Overview of Chapters

In Chapter I, the challenges facing those lacking self-sufficiency and the complex nature of securing stable housing and employment is presented. The challenge of

ensuring programs and resources are in place to address the specific needs of families seeking self-sufficiency, namely homeless families, is also discussed since homeless families are often underrepresented in research, which makes it difficult to create programs to meet their needs. For this research, the problem is that current transitional programs do not always have the staff and resources available to conduct program evaluations to identify if the length of time spent in their programs impacts family self-sufficiency once a family has completed a program and transitioned to their own housing. As a result, programs may inefficiently or ineffectively utilize resources that may or may not address the specific needs of homeless families. Additionally, while not every program is the right fit for every family in need, family success in a transitional program may be influenced by variables like family size, family structure, employment status, and the type of housing selected upon exiting the program. By determining if the length of time impacts family self-sufficiency and identifying if additional variables influence those outcomes, program directors, policy makers, and others will be able to make changes and understand the true measured impact of their work. At the conclusion of Chapter I, research questions are shared for each research variable.

In Chapter II, a thematic approach to the literature is presented where systems theory provides a framework for understanding the interconnected nature of homeless program components and how they all work together to create outcomes. To assist the reader in understanding the current popular options available to families, temporary programs models are outlined that explain why models may be attractive to families seeking self-sufficiency. To create a more personal perspective on family homelessness for the reader, the effects of homelessness on families and children are elaborated on,

including specific effects on children, including their mental and physical development, and single mothers, the most common structure of homeless families. This review of literature also provides common barriers to self-sufficiency and why program evaluation in social programs is meaningful and important to addressing many social problems, including homelessness. Engagement theory is also included as families engaged in the program (as reflected by length of time and regular data collection) can have positive outcomes, although improvements of the program's data collection administration and tools will be recommended as part of the program evaluation. At the conclusion of Chapter II, a study hypothesis is presented that states that the longer a family participates in a transitional housing program, the more likely self-sufficiency increases, although control variables may impact self-sufficiency and program success.

Chapter III provides an in-depth and comprehensive review of the Family Promise of Brevard organization, including its operations, financials, and other key aspects of the stabilization program that affect family outcomes. By understanding the past and present situation of the organization, the data representing homeless families will not only take on a more personal perspective but also assist with having both an internal and external understanding of how this organization drives its mission forward. Since the research is looking at the data collected during the Stabilization program, additional information about that piece is included. Information about the application and intake process, as well as program participation, expectations, and challenges are discussed.

Chapter IV rationalizes the research methodology, challenges and assumptions, and contribution to knowledge that are expected within the methodology. The research

methodology includes the identified research variables, data collection and analysis, which will have a quantitative structure with statistical analysis. Data will be collected from FPB, a local nonprofit serving homeless families, utilizing the data collected over the past few years by families participating in their program. Ethical research considerations are also discussed, including participant privacy. Study limitations include data collected by the organization based on previous organizational structure, program participation, and the unique experiences of each family experiencing homelessness that can differ from family to family. For the purpose of this study, it is assumed that participant data reflects honest and true responses and that participants worked towards self-sufficiency while in the program. The conclusion of Chapter IV explains how the research will contribute to knowledge for policymakers, public administrators, and directors of homeless program models, including FPB.

Chapters V and VI focus on the data analysis and conclusion of the research. Chapter V includes an introduction to the data analysis by reviewing the overarching themes discovered in the analysis that will frame the rest of the chapter. The bulk of the chapter focuses on the analysis of the data, which highlights results from each of the statistical tests and what they mean in the context of the FPB program. Tests are separated first by test collection forms, and then rates-of-change for both forms are averaged to determine if any of the research's variables influence self-sufficiency over time. In the qualitative data section, a case study from David, a parent and program participant, is presented to provide a holistic perspective of the Stabilization program. David's story includes information on how his family came to the program, their experience during it, and where they are now after exiting it. The qualitative information

highlights the value of stable housing and employment in a family's journey towards self-sufficiency while also providing context to how soft skills like relationship-building and budgeting can impact progress.

The final chapter focuses on the conclusion and recommendations of the research. This information is useful to both FPB and other organizations addressing homelessness as they continue implementing and improving the program experience and outcomes for families seeking self-sufficiency. Conclusion statements are made regarding what was learned through the research regarding the various quantitative and qualitative hypotheses and information will inform the recommendations by the researcher for changes to the organization and future research.

Chapter II

LITERATURE REVIEW

For the purpose of this research, it is important to understand the connection between self-sufficiency and homelessness. Homelessness is one of the main pillars needed for self-sufficiency, and yet, for families experiencing homelessness, finding and securing stable housing is usually more of a priority than adequate employment. While prior research does not explain why, it may be because parents want to ensure a safe environment for their children and meet the basic need of shelter as opposed to finding employment first. It is with this understanding and perspective that this research will focus on addressing the challenge of homelessness, which in turn affects a family's self-sufficiency. For FPB, addressing the housing needs of families experiencing homelessness is critical since, based on their experience with families, housing status and self-sufficiency can often be considered the same regarding the family's needs and goals within the program.

Theoretical Framework

Interrelated systems theory provides the framework for this research, focusing on various components and how they can individually and collectively adapt to the environment and circumstances. While one program component may have a greater impact on measurable outputs and outcomes, all components are understood to create change together in varying amounts depending on the individuals within the program and execution of each program component. For this research, the component hypothesized to

have the greatest potential impact on family self-sufficiency is the length of time a family participates in the program. While studies have not focused exclusively on the length of time in a homeless program, researchers have found that participants who spend an average of 7.6 fewer months in a homeless program that provides housing and support services are more likely to experience homelessness again as compared to their peers who stay longer and are more likely to remain in stable housing (Wilder Research, 2015). Additionally, another study showed that as the length of a person's participation in a housing-based program increased, their monthly average income also increased (Lutze et al., 2009). This is particularly important for this study since FPB's goal relies on stable housing and adequate income to achieve family self-sufficiency.

Within a community, individuals and families utilizing programs aimed at societal challenges seek to supplement what they have within their current institutional environment through resources provided by the agency to continue their functioning system. Their system, which can also be considered their daily life and plans, depends on having all the necessary resources and connections to function, and when one or more components are missing, the system cannot function. For families experiencing homelessness, the missing component is stable housing, although many families may have additional missing components, such as income, that compound and create more barriers to a functioning system.

For organizations to continue functioning and providing services, an organization takes resources and transforms them into activities essential for their survival as an organization and for the benefit of the people being served. At the community level, the individual or family unit is engaging with the service provider to gain access to housing

and other services for the duration of the program to reestablish equilibrium within their system. Since logic dictates that a house is a variable missing for homeless families, but the other variables are often also not available in the family's life once stable housing is lost, the agency must address all or as many needs as possible to promote system functionality, which has a strong likelihood of happening once as many necessary program components are in place to support program success (Kilmer et al., 2012). Therefore, the agency establishes what those factors may be for each unit being served and the length of time they need to address those factors combined with the family adults' intrinsic ability to utilize those resources and establish equilibrium within the system and family. The agency's intervention is to provide services that allow them to access the resources they need, and along with intrinsic factors within the person, this mechanism helps them move into stable housing. It is important to note that both the intrinsic factors of the family and agency processes are affected by the amount of time they have access to agency services. Time is a mediating variable in terms of the connection between services provided and the intrinsic ability of the family to acquire resources needed to achieve system equilibrium.

Additionally, task-centered motivation theory provides a framework for the program's data administration and collection since families are measured in various categories outlining external problems or barriers, solutions to work towards, and program goals where the reward is autonomy (Fortune et al., 2010). By entering into the Stabilization program, families are already showing a level of motivation for autonomy and self-sufficiency, and working towards goals in each category is reflected in the data collection, which is limited to the categories and wording included in both data collection

tools. Time spent in the program is a significant factor relating to the motivation theory regarding family homelessness, as families who may be less motivated toward self-sufficiency may drop out after a session or two, while families who are committed may have more data collected over time; therefore capturing the impact of the program. By capturing the program's data effectively, the organization can better understand the program's impact and overall family outcomes. This information can also inform innovative ideas related to program implementation based on family feedback and outcomes.

Program Logic Model

A logic model would allow the research to validate the theory, as this is the typical model framework similar agencies use to describe their work. This logic model helps us to understand how community-based organizations addressing social problems use inputs and activities to create outputs that can be used to measure success, ultimately becoming the organizational goal of creating self-sufficient families that are employed, independent, and financially stable (Conrad et al., 1999). When programs are purposefully structured and can articulate the models used to achieve their goals, a program evaluation can be conducted to measure the effectiveness of program components to determine if they are individually and collectively impactful or if changes need to be made. Additionally, if logic models are created at the start of a program, it creates a guide map for the director and other key staff members to articulate the necessary steps for program implementation (Yin, 1998). Table 1 reflects the logic model used by transitional housing programs like FPB. While each program changes the model to include aspects specific to meet the needs of their local population, these features are

needed for programs to function and address those needs. Program directors identify client needs (input) and which activities will be needed at an organizational level to ensure the mission execution. As the program completes activities, the outputs are measured to determine effectiveness that will lead to the client outcomes. In the case of transitional housing programs, the ideal outcome is self-sufficiency. Following the information in Table 1, a logic model that is more physically representative of the Stabilization Program was created for FPB (see Appendix A).

Table 1

Logic Model of Transitional Housing Programs

Input	Objectives	Activities	Output	Outcomes
Temporary housing, funds, organizational leadership	Safe shelter, meet basic needs, support families	Hiring of case managers/staff, facilitation to other community resources and services	Days of shelter/housing provided, education earned, adequately-paying employment secured	Financial stability, stable housing, employment, independence, self-sufficiency

Prior Research on the Topic

Prior research into homelessness and self-sufficiency has provided information on how society defines and understands self-sufficiency, homelessness and how factors continue to impact the challenges faced by people and families experiencing homelessness. This research helped create the research project's foundation and informed past and current policy.

Definition and Barriers of Self-Sufficiency

Self-sufficiency can be defined differently depending on the organization's purpose, but it is commonly defined as the ability to maintain oneself without outside aid or successfully supporting oneself (Merriam-Webster, n.d.). Family Promise of Brevard

believes that in order for a family to be self-sufficient, they require two goals to be met: 1) stable housing and employment that provides adequate income to meet necessary expenses has been secured 2) housing and employment can be maintained over time. However, families may encounter barriers to self-sufficiency and be unable to overcome these barriers without support. Program models like those at FPB can meet families' specific needs through the services they offer, including finding and securing stable housing and connecting to external networks for employment and additional services. Life skills, employment, and affordable housing are some of the most influential factors that can improve or hinder a family's progress toward self-sufficiency. Local programs addressing homelessness that can provide services are aware of the most common barriers for their community and either provide these services in-house or connect clients with service providers nearby.

When a person lacks knowledge of finances, job skills, social skills, cooking, and other life skills, it can be difficult to thrive and becomes even more difficult when children are involved and rely on a parent. Life skills not only directly impact the adults in the family unit but can also be learned through experience by the children. Children can learn by watching those around them, and when they have parents who have life skills they can teach, they can build a stronger parental bond, remain the disciplinarian and authority in the family unit, and improve their self-confidence (Keeshin et al., 2015; Perlman et al., 2012; Swick, 2008). These factors are particularly important because self-confidence is key to a person's self-worth and how he or she approaches relationships with others. Confidence can be built by learning and applying skills, so program models

may plan their life skills classes to be demonstrative in nature at first before gradually working towards independent skill application.

Employment Challenges

The job market can be temperamental for adults with stable housing, organized resumes, previous work experience, character references, and their own transportation, let alone those adults experiencing homelessness. The National Coalition for the Homeless (2009) identified the most common aspects of a homeless person's life that impacts employment are "low educational attainment levels, having young children with no access to childcare, limited or no past work experience or marketable job skills, mental health or substance abuse problems, chronic health problems or disability, lack of access to transportation, and criminal histories." Employment can be particularly challenging for single-parent families because there is only one adult to provide childcare, and therefore, relocation services can be more harmful than helpful if they remove a family from their support network. Many public programs are available to address most of these barriers to employment, but accessing them and attending regularly can be impossible for those who do not have public transportation nearby, childcare, or a support network to provide encouragement and attendance accountability.

Employment often refers to finding a stable, full-time job, but for adults in homeless families, there are additional concerns to consider. For example, many homeless adults lack many of the following soft skills: how to prepare for an interview, answer interview questions, or connect with potential employers on a personal level by sharing past employment experience (Acosta & Toro, 2000). Depending on the potential job, they may also need technological, organizational, and financial skills that many

homeless individuals lack, and while communities may have classes available, transportation can also be a barrier to accessing them (Long et al., 2007; Wong & Mason, 2001). Gender can also be a potential barrier to self-sufficiency among people experiencing homelessness. Compared to homeless men, women experiencing homelessness are more likely to be younger, less likely to have graduated high school, and earn a lower income, which makes securing employment even more challenging (Phipps et al., 2019; Winetrobe et al., 2017). Adults who are going to school part-time or only have part-time childcare may only be able to work a part-time job, but those jobs can leave a person underemployed where they are working but remain unable to pay their rent, mortgage, bills, and/or other necessities. About 45% of homeless individuals are employed but do not make enough money to secure a stable living because wages are growing slower than the average cost of living, especially in urban areas of the United States, where the majority of the nation's homeless population can be found (NCH, 2009). While studies show that securing employment can be difficult due to a lack of skills or experience, this study shows that a person needs adequate employment with sufficient income to become self-sufficient.

Housing Availability and Affordability

While the other factors impact a person or family's ability to remain self-sufficient, the simple solution to homelessness is finding a stable housing option. Even if adequate employment can be secured and a person has the skills to provide for themselves and their family, stable housing depends on availability. An analysis of data collected from HUD, the Department of Labor, and the Bureau of Labor Statistics found that only 32 adequate and affordable housing units were available per 100 families in

need of housing (Bravve et al., 2011). Housing may be available for purchase, but with many homeless families unable to save enough money for a down payment, renting is more favorable since the adults, even if they are able to make rent payments, are more likely to have lower-paying jobs. When the housing market is especially high, this can increase the prices in both homes and rental units where families may be priced out of the community where they used to live and potentially have a support network.

Government programs support rental assistance and the Section 8 voucher and subsidy programs, but they are not easy to secure when there are waitlists. There are units available to very low-income renters, but with a vacancy rate of 4.3%, families do not have a high likelihood of those units becoming available in a reasonable amount of time, so they are challenged with either finding a more expensive apartment, continuing in a program for homeless families, or living in a location not suitable for human habitation (Bravve et al., 2011). Rental units can also be located in places parents may consider unsafe for their children and must decide between an affordable unit that may be unsafe or a unit only affordable for a short time until funds are depleted but a safer neighborhood for their children. These are the tough decisions that many homeless families must make if they decide to exit a program or if the program has exhausted their available resources and cannot continue supporting them.

Of course, programs that have transitional models can assist families in navigating the Section 8 voucher programs for housing. Unfortunately, the availability of Section 8 housing fluctuates with the housing market, and as policy changes are made, families may no longer qualify (Teater, 2009). Subsidized housing, in which private owners rent to low- or moderate-income individuals in exchange for subsidies, is another housing

alterative and works for many families. In fact, Fisher et al. (2014) found that among 80 homeless families across four states that participated in a study, the majority preferred subsidized housing over any other homeless option and that transitional housing was least preferred due to uncomfortableness with policies. Communities can have a difficult time securing additional subsidized housing because it requires finding private owners willing to rent to lower- and middle-income individuals who have previously experienced homelessness, which sometimes carries a stigma or lack of public trust in their ability to make rental payments. These factors, combined with a waitlist that can be years long for affordable housing options in some areas, can deter many families who would benefit from these programs.

Temporary Housing Models and Self-Sufficiency

Research has been conducted on the effectiveness of different program models for facilitating self-sufficiency by assisting with stable housing, with the program models classified as temporary or permanent housing. Some communities have a combination of these models to serve individuals and families experiencing homelessness, and all models within the community are part of the Continuum of Care (CoC). The federal government began requiring CoCs in every state in 1987 with the passage of the McKinney-Vento Homeless Assistance Act, which described CoCs as the local multitiered homeless assistance system available at the local level (Wong et al., 2006). Since homelessness is a ‘wicked problem’ in society without one solution, each model is structured differently to meet the needs of as many kinds of clients as possible. While the Homeless Management Information System (HMIS) that federal law requires organizations that receive federal funds to use to gather information about homeless individuals and

families does usually include how many people are in a family unit, that information has not been identified as a major factor impacting self-sufficiency due to lack of studies. The average size of families experiencing homelessness varies by geographic location, with states like Utah and New York reporting an average family size of 3.5 and 3 persons, respectively (Kim & Garcia, 2019; Routhier, 2020). Therefore, program models implemented at a local level benefit from knowing their local average to best serve their population, which increases the likelihood of people becoming self-sufficient and not experiencing the cycle of homelessness again a few years later.

Regardless of how many people in a unit need to be served, temporary program models share the outcome goal of facilitating the transition of a homeless individual or family unit to stable housing and becoming self-sufficient by using resources and services as opposed to the permanent housing models that are primarily used by people with disabilities or those needing rental assistance or relocation services. Understanding the differences in temporary program models – emergency shelters and transitional housing - can help scholars and program directors identify the aspects that differentiate their program from others and identify the clientele they may be best suited to serve. It is understood that while those experiencing homelessness and lacking self-sufficiency may also be in need of adequate employment, but for families, stable housing is often a primary concern since children are involved, so programs are focused on housing assistance before employment support services.

Emergency shelters are generally available in any community, whether operated by a government department, nonprofit organization, or even a local church. Depending on their situation, people experiencing homelessness may visit an emergency shelter for a

24-hour period or stay 30 days, on average, before a case review is conducted to determine if the stay should be ended or extended, and these shelters serve different subpopulations of the homeless population. Single men account for the largest percentage of the homeless population across the country and utilize emergency shelters more than other subgroups experiencing homelessness. While emergency shelters are known for providing basic needs, social workers and shelter staff have reported a demand for mental illness and substance abuse services that are often missing from their service networks, as well as social support for those who have been homeless for extended periods of time (Newman & Donly, 2017). These services, or the lack thereof, impact the individual's likelihood of securing stable housing and other variables for independence. For runaway or homeless youths using the emergency shelters on their own, broad short-term gains were made towards goals such as stable housing/returning to family and attending school, but did not maintain goals over long periods of time once discharged from the shelter (Pollio et al., 2006). While it has been argued whether emergency shelters are successful at long-term positive outcomes, emergency shelters serve a vital purpose in the cycle of care for people experiencing homelessness since they do not require additional planning or applications like other models. This expedited process assists clients who need shelter in a timely manner and even serves as a stopgap if clients need additional services or a different program model to assist them in their journey to stability and independence.

While emergency shelters are equipped to handle individual children and adults, accommodating a family with multiple adults and children together can be more challenging, which is unfortunate when families may need an emergency shelter for a short time while applying to transitional programs. Policy changes can restrict access to

emergency shelters, which can decrease the likelihood of a family being able to focus on completing program applications and working towards self-sufficiency. Some states' policies are impacting both families and their access to health services. In 2012, Massachusetts changed its emergency shelter eligibility policy for homeless families and required families to show they have been living in a location unsuitable for human habilitation (Stewart et al., 2018). Since this limited families' eligibility for the emergency shelters, if they were evicted or temporarily living with friends, families utilized local emergency departments to then qualify as "homeless" for the emergency shelters. This can put an unnecessary strain on hospital resources and be costly to families, with bills averaging \$557 for non-medical emergency visits (Stewart et al., 2018). Hospitals are also seeing an increase in usage by people and families experiencing homelessness, especially in urban areas where emergency shelters may not have available beds. An urban area emergency department analysis found that homeless individuals and families accounted for 74% of the 5440 emergency department visits made by those classified as frequent visitors or people who visited the emergency department more than four times within one year (Ku et al., 2014). If states create more barriers to accessing emergency shelters, individuals and families may decide to go elsewhere, which could be unsafe or unhealthy and cause higher costs later when seeking healthcare or other services.

Recognizing that homeless people often require additional services beyond temporary housing or emergency necessities to become self-sufficient brought attention to the need for the transitional housing program model. Transitional housing programs usually feature longer stays and expanded availability of services for both individuals and

families, with their popularity within communities increasing by more than 60% since 1996 (Burt, 2006; Hoch, 2000; Wong et al., 2006). These programs are seeing more people staying for longer periods of time, which often requires greater resources and funding. However, community-based programs with a transitional model have been successful in long-term outcomes of independence and self-sufficiency as opposed to emergency shelters that are structured to address the immediate needs of people experiencing homelessness and assist them in connecting with programs for additional support.

Transitional housing programs can have time limits or be flexible to meet the needs of the people and families who use their housing and services, although one year is average, with the maximum being around two years for an in-depth program. An analysis of the Family Development Center in Athens, Georgia found that while the transitional program welcomed homeless mothers with children for a maximum time of one year, the average time spent was seven months, with 54% of participants staying six months or longer in the program (Fischer, 2000). This length of time may be sufficient for families to find employment, learn skills, and be able to locate and afford a housing unit of their own. The researchers then compared families' housing, employment, and reliance on public assistance to determine their level of self-sufficiency before, upon exiting, and at a 12-month follow-up of the program and found that slightly less than half of participants paid subsidized rent for their housing and 61% of women had stable employment (Fischer, 2000). It was noted that employment can still be challenging for mothers with young children even after exiting a transitional program because of their need for childcare.

Additionally, while there was an increase in reliance on public assistance when families exited the program, there was less reliance on Medicaid, WIC, and food stamps at their 12-month check-in than before they entered the program. A different transitional housing program in Athens, Georgia found that 58% of their participants, again single mothers with children, had stable housing 12 months after exiting the program, and this sample's length of time in the program was averaged at four months, with some participants reporting a range of staying one to six months (Glisson et al., 2001). Two UK studies found that the optimal time a homeless individual participated in a transitional program was more than six months because those who stayed shorter than six months were more likely to need additional support shortly after transitioning, or the chances they become homeless would increase (Crane et al., 2012; Crane et al., 2016). These studies provide perspective into the factors that can influence self-sufficiency for those experiencing homelessness who choose to participate in a transitional program. Additional studies and information would enrich this content area, but program staff cannot always contact homeless individuals or families for a follow-up to determine program effectiveness if they leave the area or do not update their contact information.

Interestingly, transitional housing program models have remained popular over the recent decades when homelessness has grown in the United States, and it may be because of the additional services provided and their ability to accommodate both individuals and families. This popularity was highlighted in a January 2020 report where it was noted that in the total counted homeless population, 100% of the homeless families with children had transitional housing using one of the three models with a surplus of almost 18,000 beds (Moses, 2021). While it is initially exciting to think that all homeless

families had a bed to sleep in on that January night, it is important to remember that families experiencing homelessness are often inaccurately or underrepresented compared to the total number. The study also recognized how this data reflected the total sample collected, and individual communities most likely did not have a surplus of beds, depending on the population of homeless families in the geographic area. The information gathered on program models for addressing homelessness has conflicting results that can be impacted by geographic location, cost of resources, and even available housing options, so it can be difficult to determine the best model for every person or family experiencing homelessness. However, the families utilizing these and other models can lessen the effects of homelessness on their family units, especially their children, and ultimately achieve the goal of self-sufficiency.

Effects of Homelessness on Families and Children

Even as social workers, policymakers, and shelter staff all hope that families and children spend as little time as possible experiencing homelessness, the physical, mental, and even social effects from even a short period of homelessness can be serious and have a lasting impact. Research regarding the effects of homelessness on children has shown varied results in the past few decades. In the 1980s and 1990s, children experiencing homelessness were thought to have significant challenges because of their housing situation which included poor academic performance, health conditions, and social relationships. More recently, however, scholars have recognized that these findings did not account for the variables that can affect these same areas of children's lives, whether they have stable housing. Many of these same challenges have been seen in low-income, poor, and even households with domestic violence (Buckner, 2008). Therefore, more

recent studies have attempted to isolate the variables unique to children experiencing homelessness and determine the effects when compared to children in low-income and average households to get a more accurate representation of the effects of homelessness on children.

There is debate among scholars as to whether children's age affects the type and severity of potential effects of experiencing homelessness. Studies suggest that when younger than six years old, homeless children have a greater resiliency against the effects of homelessness than children older than six years who experience homelessness (Maholmes, 2014). While this can be encouraging for parents worried about newborn and infant children, it does not negate the negative effects of homelessness for these very young children, especially in terms of their physical health. If born to a homeless mother, children may not receive important immunizations that many children receive shortly after birth or a few months later. A lack of immunizations can also prohibit families from registering their children for school since many schools require proof of certain immunizations prior to enrollment. These immunizations can help protect children from contracting contagious diseases, which is important since homelessness increases a person's exposure to disease, and homeless children are more likely than their immunized peers to contract infectious diseases (Doroshenko & Hatchette, 2012; Ryan, 2008). If a child does get sick, homeless families may or may not choose to seek medical care due to concerns about cost or even maintaining custody of their child. If untreated, however, medical conditions or illnesses could have lasting effects on children's health as they age.

Older Children Experiencing Homelessness. Older youth (ages 12-17) experiencing homelessness can have similar and different health effects than younger

children, some of which depend on the length of time they have gone without stable housing. Substance abuse among homeless youths is especially high compared to their peers with stable housing, and it can be harder for these children to secure treatment or counseling regarding drugs or alcohol unless they are enrolled in a housing model or public program providing services. In San Diego, California, the state that consistently has the highest rates of homelessness, about 75% of homeless youths have reported using drugs or alcohol to keep warm and/or suppress their appetite (Bousman et al., 2005). However, it is almost impossible to determine how many homeless youths are using drugs and/or alcohol because they choose not to self-report or have short, sporadic stays in shelters that can hinder data collection methods. Studies estimate that the percentage of homeless youths using drugs and/or alcohol is between 28% and 81%, depending on geographic location and whether they are on their own or in a family unit experiencing homelessness (Jean, 2016). Whether or not an older child experiencing homelessness has parents and to what extent those parents are involved in the child's life can make a difference in their decision-making, but social workers have found that many of these children lack knowledge about their physical health beyond basic care.

Older children experiencing homelessness can also have more mental health challenges because of more developed memories of their time being homeless and the trauma involved. If these youths were homeless as younger children, they might not remember their earlier traumas as well, but for those who became homeless later in childhood, any trauma that occurred prior to and throughout their time experiencing homelessness is more memorable. Programs and models addressing homelessness may offer counseling and other mental health services, but if children are unaccompanied by

an adult, their trust issues and poor past relationships with others have been reported as two of the main reasons they do not seek mental health services (Adkins et al., 2017). These concerns about mental health led Cleverley and Kidd (2011) to evaluate homeless youths' perceptions of their own resiliency, self-esteem, psychological distress, and suicidality, and all factors were impacted the longer the youth spent without stable housing, even if living in a temporary shelter. Social workers and policymakers have recognized that these older youth experiencing homelessness have specific needs that can be addressed through programs and interventions, although access can be a barrier for some youths depending on geographic location and availability of counselors.

Academics and Children Experiencing Homelessness. School-aged children experiencing homelessness face academic challenges, although this is a problematic factor to isolate because of other factors beyond their lack of stable housing that can influence their academic progress. For example, Buckner et al. (2001) conducted a study with 60 sheltered homeless children and 114 children from low-income families receiving aid, and they found no significant differences in their academic performance beyond race, gender, and age. However, scholars and social workers alike can agree that housing instability influences a child's ability to focus and learn in school since children may also be worrying about their housing situation, family life, and managing trauma and stress, and these additional stressors from housing instability could be partly responsible for homeless children having lower academic achievement than their peers in a single grade level or at a single point in time during an academic year (Adam & Chase-Lansdale, 2002; Buckner, 2008; Fantuzzo & Perlman, 2007). When analyzing broader secondary data collected from state education departments, scholars found homeless

children to have twice the rate of learning disabilities and are twice as likely to repeat a grade as compared to their peers with stable housing (Bassuk & Friedman, 2005). While these challenges will not prohibit a child's success later in life, they are factors that can make academic progress and overall recovery difficult. Public schools have policies in place for children with identified learning disabilities to receive services, but parents may or may not choose to permit the school to provide services or, even if a teacher has concerns, allow their child to be tested for learning disabilities to be eligible for additional services.

Children experiencing homelessness also exhibited positive academic trends, which can benefit social workers, educators, and administrators when identifying ways to support these students best. Rafferty et al. (2004) showcase that while children experiencing homelessness underperformed academically compared to their peers while lacking stable housing, those same students performed similarly to their peers once stable housing had been secured for a few years. Stability in housing can have a ripple effect to positively impact the many areas that influence children's lives, including parental relationships with children and their mental health. When students have less to worry about and are secure in their knowledge that they will be returning to a stable household at the end of the school day, it becomes easier for them to focus, retain, and apply the knowledge learned in school. Scholars attribute homeless student success partly to their resiliency, or ability to apply themselves amid challenging or complex processes. Resiliency can be developed in anyone through aspects of life including family functioning, culture, and experience; however, in children experiencing homelessness,

their ability to self-regulate was a distinguishing factor (Buckner et al., 2003; Obradović, 2010).

Family Structure

Homeless families have a variety of potential structures, with most units consisting of either a single adult with one or more children or multiple adults with one or more children. During uncertain times, homeless families may reach out to friends or family members to double-up within their home or utilize available couch space within a home temporarily for shelter. For some families, this is preferred when considering the alternative, which may be being split up at a shelter, depending on bed availability and shelter policies, or being rehoused a significant distance from their support networks. Toohey et al. (2004) studied bidirectional relationships between homeless and deficient social networks and, among 251 homeless mothers, found that homeless households led by single women were frequently rehoused far away from family, friends, and other members of their network. City policies requiring families to be rehoused may have such requirements due to lack of affordable housing for the families to transition to, but it does potentially strain the family. Social networks are critical support systems for homeless families, especially for those led by single women. For households led by single mothers with little or no social network support, there is a 33% higher chance they will be late submitting a rent payment than their two-parent household peers, while single mother households with no support from community resources were 68% more likely to have a late rent payment (Martin-West, 2019). Families need both social networks and community resources, often provided through homeless program models, to assist them in achieving and then maintaining self-sufficiency.

Single Parent Families. Single-parent families, led by either a mother or father, are more common among the homeless population than two or more adults within a family unit. An analysis of sheltered homeless families found that 81% were led by a single mother with one or two children, and about 75% of all homeless families were either African American or Hispanic (Portwood et al., 2015). Single mothers find themselves homeless for a variety of reasons, with domestic violence being one of the most common, and may not bring many personal items or supplies with them when leaving those types of situations with their children (Vostanis et al., 1998). Single mothers can have more psychological problems potentially stemming from their own experience and trauma in the past, current stress over their housing situation and childcare, and plans concerning what are the best next steps for the family. In an average family unit, parents share these worries and responsibilities, but units relying on a single mother caring for children can compound the emotional and mental health factors that are common in programs addressing homelessness. In these cases, families led by single mothers need more necessities and resources than the average family, and while domestic violence or abuse shelters are an option, some women choose homeless shelters or other models instead.

Families led by a single mother can benefit from models that expand beyond the emergency shelter, particularly with permanent housing via government vouchers or transitional programs that can provide additional services and care often required by these families. While the voucher system solves the housing needs, it does not address other concerns often expressed by single mothers when considering their self-sufficiency. Transitional programs offer a variety of services for both the mother and her children,

and while the services depend on available resources, many community-based transitional programs offer counseling, educational support, life skills classes, and budgeting (Burt & Cohen, 1989; Fischer, 2000; Flohr, 2013). As children are also a priority, transitional models may have childcare available and assist with enrolling them in local schools, buying school supplies, and providing household necessities. These components are critical in providing daily stability for the mother and her children and providing them the skills to become self-sufficient beyond simply securing stable housing.

Single fathers with children are a much smaller section of the homeless family population, only beginning to be studied more in the past few years. Since most homeless families are female-led and many programs addressing family homelessness do not allow men for the safety of these families, two-parent families may split up so the mother and children can enter the program, leaving the single man to find a shelter or men-only program. Studies are showing that single fathers experiencing homelessness are discriminated against due to cultural and societal expectations, as well as the belief that men are unable to sufficiently raise children (Bui & Graham, 2006; Hamer & Marchioro, 2002; Schindler & Coley, 2007). However, Gretchen Livingston (2013) with the Pew Research Center reported that single fathers lead 15% of homeless families, and they share many of the same struggles as single mothers, especially in terms of parenting and childcare. While there are a growing number of programs and resources available for veterans and single mothers, single fathers have different needs that can be met if programs expand or adapt their services to be inclusive of issues and challenges facing single fathers. African American single fathers, in particular, are a growing subset of the

homeless population, and as they face potential discrimination and other challenges shared by homeless families, the resources available to them are even more scarce (Rollins & Boose, 2020). Society is slowly recognizing this is an area of need, but with few studies, including Schindler and Coley (2007) and Coles (2015), currently focusing on the unique needs and characteristics of single-father families experiencing homelessness, changing program models to meet those needs will take time.

Head of Household Challenges with Age and Health. Families experiencing homelessness may rely on the adult(s) to secure employment and housing as they work towards self-sufficiency. Housing and employment applications have minimum age requirements, keeping the children reliant on older family members to manage these areas. It can be difficult to determine the average ages of adults experiencing homelessness due to their transient circumstances, but healthcare and social work professionals estimate the average woman experiencing homelessness to be ages 28-34 while men experiencing homelessness to be 38-45 years old (Kuehn, 2019; Milburn & D'ercole, 1991; Parker et al., 2016). In a family experiencing homelessness, the age of the parent(s) can impact the child(ren) through their earning potential, education, and other factors.

Younger parents experiencing homelessness are capable of employment, housing opportunities, and managing children; however, they face different barriers than older parents. Some housing options rely on a waitlist, with those on the list for longer periods of time receiving priority over those who have been waiting for shorter periods of time, which can limit the options available to young parents with children. These families may wait months or years for a housing option to become available, during which time the

family can incur negative physical and mental consequences (Kuehn, 2019; Lambert et al., 2018). There are also perceptions of younger adults being less responsible and reliable. Therefore, landlords, managers, and others in executive-style roles are less likely to take chances on a younger family experiencing homelessness than an older family, especially since younger adults report more life stressors than older adults (Tompsett et al., 2009).

Younger parents may have less work experience or have jobs that provide less income and fewer benefits than older parents, making it more challenging to secure better opportunities (Zerger et al., 2008). Additionally, social networks are difficult to create among the homeless population when there is instability between emergency shelters, hospital visits, and other options, and younger parents, in particular, can struggle with less-developed support networks of friends and family to assist with childcare and other daily needs than older adults with children (De Vet et al., 2019). While usually informal networks of support, these supports allow adults to find more reliable employment and housing without worrying about changing childcare schedules or transportation to and from school. Zerger et al. (2008) also determined that younger adults experiencing homelessness were concerned about the increased likelihood of prolonged homelessness, increased potential to engage in risky or dangerous behaviors and negative physical and mental health. These effects, especially over long periods, could also impact the children's lives.

Older families have their own set of challenges, particularly in terms of health and employment. Experiencing homelessness can have profound negative effects on not only an individual's health and sense of well-being but also their expected lifespan (Parker et

al., 2016). An analysis by Funk et al. (2022) of multiple studies of homelessness found that adults experiencing homelessness have an average life expectancy range of 47-59 years old as opposed to the life expectancy of the average adult not experiencing homelessness, which is about 75 years old. That is a significant decrease in life expectancy, but it is not entirely surprising when one considers the multiple hazards and likelihood of physical health deterioration that can be experienced when homeless. According to the 2022 study by Brown et al. involving 450 individuals experiencing homelessness, the leading causes of death include cardiovascular issues, cancer, and drug overdoses, with adults older than 50 having 60% increased mortality than those who become homeless earlier in life. Interestingly, the same study found that more deaths among the homeless population during the pandemic were due to drug toxicity than COVID-19.

Unfortunately, older adults have to not only manage any healthcare issues that may arise due to the normal aging process but also the increased risk for health-related issues caused by their lack of housing stability. Regardless of their age, homeless men had increased risk behaviors and substance use issues than homeless women, who struggled more with general health and illnesses (Dickins et al., 2021; Munoz et al., 2005). Mental health and drug use were common among both genders, and age does not appear to be a factor in those categories. Understanding how age and health can affect more than a family's housing situation, especially how these areas affect the adults leading the family, helps to capture their importance in the experiences of homeless families.

Family Size. The number of people within a family experiencing homelessness does put an increased strain on resources, both within the family and externally needed by the shelter or program, and the needed income level to be self-sufficient. A case study by Kim and Garcia (2019) determined that one additional person or adult added to a family would make that family 9.6% and 21% less likely to achieve stable housing due to increased family needs. An additional child translates to additional grocery and childcare costs for families, while the addition of an able-bodied adult could increase a family's earning potential. However, any additional adults could also be younger adults attending school and being unable to work, older adults unable to work, or adults with a disability that limits their employment opportunities and earning potential. In studies where family size was included, families reported an average range of 3.5-4.33 individuals (Donley et al., 2017; Kim & Garcia, 2019). Reports have indicated that family size and structure did not impact the likelihood of families exiting their homeless situation when families from urban cities were evaluated. However, family size may make a difference for local organizations dependent on smaller-scale resources.

Program Evaluation in Social Programs

Program evaluation research has been found to be enlightening for social programs, especially in the social work and public administration fields, due to their unique nature of serving people with unique experiences and needs. When creating their social programs, directors want to ensure the greatest number of clients can be served with the fewest number of resources while still achieving organizational outcomes. Even though this may seem harsh, it is a reality in the nonprofit and social work sectors that resources are very often limited and, if used inappropriately or excessively, can lower the

number of clients able to be served. Therefore, program evaluations allow for an in-depth analysis of each program component and how they collectively work together to achieve the organization's mission with the understanding that improvements can be made accordingly if resources or components are not having the desired impact or are inefficiently using resources, which is especially important as the organization looks towards the future (Alter & Murty, 1997; Mulroy & Lauber, 2004). For programs addressing homelessness, the demographics of homelessness have changed over time, and programs that want to continue making a difference in their communities need to consider if their current models are creating the change they want to see or if those programs need to be adapted.

Program evaluation also allows social programs to identify if the tools currently used for data collection are effectively measuring their impact and progress towards the mission. Using quantitative, qualitative, or a mixed methods approach, organizations can ensure they have the skills and knowledge needed to demonstrate accountability to program directors and sponsors, as well as use the data to apply for grants and other funding (Unrau et al., 2007). The ability to articulate the components, purpose, and effectiveness of a social program is essential to the continuation of such programs, which takes purposeful data collection and analysis.

Self-sufficiency among the homeless families is only studied sporadically, with most research being limited to the early 2000s and have a focus on urban areas. Interestingly, this type of research has been applied to transitional programs before but focuses on cities and urban areas and the needs of program participants. Transitional programs have found to work for many families, but scholars note the numerous

challenges and complex nature of self-sufficiency that can make it difficult for families to become self-sufficient for long periods of time and may benefit from a variety of options when transitioning to independence (Driskel & Simon, 2006; Fischer, 2000; Gubits et al., 2018; Washington, 2002; Winship, 2001). By conducting a transitional program model evaluation with a nonprofit that serves homeless families across an entire county, this could address concerns that research done specifically in cities and urban areas is too narrow while nationwide research cannot be applied to more localized areas.

In programs addressing homelessness, scholars note difficulties that occur when conducting a program evaluation on a program serving this population. For example, there can be methodological issues with tracking families for post-program data, there are few program evaluations published on the specific topic, programs often do not have funding or resources to dedicate to the evaluation, and the external societal factors that can influence the results of the evaluation (Winship, 2001). However, these challenges and the gap in research are part of the reason such a project would be beneficial to not only those in public administration and policymaking, but also social work and those who manage nonprofit organizations doing this vital work in communities around the nation.

Purpose, Research Questions, and Hypotheses

The purpose of the study is to understand if the length of stay at the stabilization program along with the family demographic characteristics can explain success as predicted by interrelated systems and task-centered motivation theories. Program data can test theory and theory can guide evaluation where relationships are as predicted.

Therefore, the research will be guided by the following research questions:

- 1) Does the lengths of stay at the stabilization program impact the lives of families experiencing homelessness in regards to self-sufficiency?
- 2) Do the family demographic characteristics assessed in the current stabilization model predict the program's impact on families experiencing homelessness?
- 3) How does the Stabilization program affect families before, during, and after participating in the program?

To answer the above research questions, the following hypotheses would be tested using a statistical research method using JASP to analyze quantitative data gathered from families participating in the stabilization program since its inception, as well as qualitative case study analysis of a family who participated in an exit interview. As mentioned in a previous chapter, prior research has indicated that factors including parental employment and affordable housing availability can affect a family's self-sufficiency; parents employed in a full-time position and living in an area where affordable housing is available are likely to be self-sufficient and stable while those unable to make a livable wage and access to affordable housing will be less likely to be self-sufficient (Bravve et al., 2011; Byrne et al., 2021). Transitional programs that address the needs of both the parent and children within a family unit have been shown to be successful in addressing the recurring cycle of homelessness (Fischer, 2000). Additionally, statistical analysis may explain the most common demographics of families who have used or are currently using the program and the ratings in different self-sufficiency focus areas over time. The determinations of this study will show FPB staff and others who run programs in the area or similar areas how to evaluate the key demographic profile of participants for more effective engagement, as well as identify

which aspects of the program are the most impactful on family self-sufficiency and which may benefit from modifications.

With previous research providing a basis, the primary explanatory or independent variable, time, is suspected of having the greatest impact on the dependent variable, family self-sufficiency. As homelessness is a complex issue, additional variables will be controlled, including adult race, ethnicity, gender, age, number of people in the family unit, type of household, the adults' employment status, education level, and access to personal transportation so that they soak up the variance potentially created when analyzing the main variable. The organization contacted the adults in the family unit for data-collecting purposes; however, only their data was included in the study. Any children included in the family unit were only indicated in the factor relating to the total number of individuals in the unit.

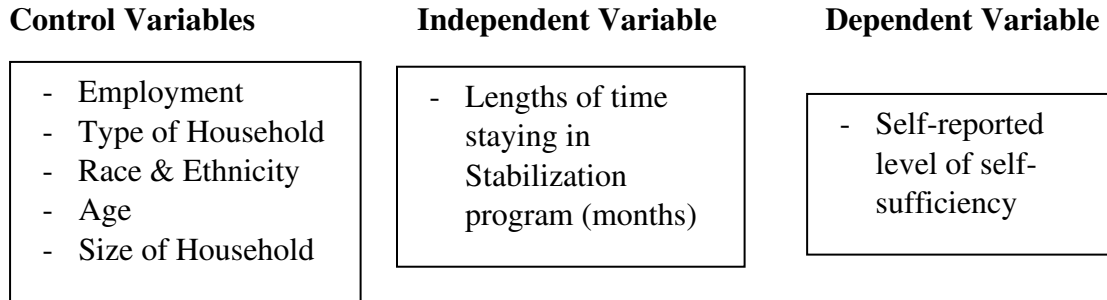
As discussed previously in chapter two, single parents with one or two children are the most common makeup of families experiencing homelessness, and over half of all homeless families are either African American or Hispanic (Portwood et al., 2015). The average age of individuals experiencing homelessness has recently been about 47 years old, and while that can still be considered a prime working age range, many families experiencing homelessness are led by single mothers; therefore, balancing work and childcare can be especially challenging (Culhane et al., 2013; Hahn et al., 2006; Parker & Leviten-Reid, 2021). Not completing at least a high school level of education and not having steady employment can both contribute to homelessness, especially in families with children that have more than just an adult or two to shelter, feed, and care for (Phipps et al., 2019; Winetrobe et al., 2017). People who do not have a personal method

of transportation are more likely to have additional barriers to self-sufficiency, as related factors like employment, childcare, and education can also be impacted (Long et al., 2007; Wong & Mason, 2001). With interrelated systems theory, it is understood that no variable is singlehandedly responsible for a family's experience, and statistical analysis will determine which of the aforementioned variables has the greatest statistical significance on family self-sufficiency outcomes when considering the length of time spent in the program.

Limited research exists to determine if the length of time spent in a residential program like FPB has an impact on a family's self-sufficiency since accurately measuring families experiencing homelessness has proven to be difficult with families leaving a program or area unexpectedly or for other reasons (Schneider et al., 2016). However, when analyzing the various aspects measured in the SPDAT and SRSS evaluation tools in coordination with the length of time families participated in the program, as shown in Figure 1 outlining the predictors of self-sufficiency, the data should provide valuable information to determine what, if any, level of effectiveness the program has had on family self-sufficiency. With the other factors being assessed through FPB's data collection tools, this program evaluation will also be beneficial for the organization to understand if and how the data being collected represents the complex nature of families experiencing homelessness, which will be reflected in the statistical analysis of complete and incomplete scores from families and determination of whether the SPDAT and SRSS scores are independent measures or are overlapping in their measurements and purpose.

Figure 1

Predictors of Self-Sufficiency for Families Enrolled in Family Promise of Brevard’s Stabilization Program in Brevard County



Quantitative Research Hypotheses

Based on the previous research and theory framing this research, the following are hypotheses for the evaluation:

Hypothesis one, based on task-centered motivation theory, suggests that adults within the family unit who stay longer in the Stabilization program will be involved in a more meaningful way, which leads to better outcomes.

Hypothesis 1: If a family has longer lengths of engagement with the program, they are more likely to report higher levels of self-sufficiency in most categories than families who stayed for shorter lengths of engagement.

While time is believed to be the most impactful on self-sufficiency, hypotheses two through six suggest that various control variables may impact self-sufficiency. Therefore, it is hypothesized that family demographics, along with their lengths of stay in the program, can have an effect on self-sufficiency.

Hypothesis 2: Two-parent households are more likely to improve their self-sufficiency scores after staying longer in the program compared with single-parent households.

Hypothesis 3: Families with a male head of household will be more likely to report improved self-sufficiency levels than families with a female head of household after they stay longer in the program.

Hypothesis 4: Families with a non-Hispanic head of household will be more likely to report improved self-sufficiency levels than families with a Hispanic head of household after staying longer in the program.

Hypothesis 5: Families with a head of household ages 25-34 will be more likely to report improved self-sufficiency levels than families with a head of household in younger or older age groups after they stay longer in the program.

Hypothesis 6, based on interrelated systems theory, suggests that all components can create change, and these components, while impactful individually, have a greater impact when working together in a system. Therefore, according to previous research, a family's employment can affect self-sufficiency.

Hypothesis 6: Adults with full-time employment were more likely than those with part-time employment to report improved self-sufficiency scores after staying longer in the program.

Qualitative Research Hypotheses

As the project includes qualitative data in the form of a case study highlighting one family's experience in the Stabilization program, qualitative hypotheses were also created for research purposes:

Hypothesis 1: A family's need for housing brings them to FPB, and families gain greater self-sufficiency, stability, and life skills by participating in the program before exiting.

Hypothesis 2: Positive relationships and trust are the most significant non-tangible benefits families receive while participating in the Stabilization program.

Chapter III

ORGANIZATION AND PROGRAM OVERVIEW

Family Promise of Brevard's structure, funding, and other key pieces of the organization are all vital to ensuring their work continues in Brevard County, Florida. The county had a total of 136 families experiencing homelessness in 2015; the count fell to 70 families as of 2019 (HUD, 2020). While this is a positive trend, the percentage of people returning to homelessness within six months of finding housing rose from 5.2% in 2015 to 9.2% in 2019 (HUD, 2020). This trend has FPB focused on addressing long-term family stability in the county and breaking that cycle of homelessness, which has been their focus since the beginning. In 2007, FPB was created by branching off a national Family Promise Network comprised of people addressing homelessness. In 2013, the first FPB staff member was hired, and they were able to host their first family by utilizing various local church congregations and volunteers. Originally, the organization focused on meeting the needs of homeless families with children by providing a rotational shelter program and connecting them to resources in the community, however, over time, it was recognized that families could benefit from support once they found housing. The stabilization services started being offered in 2015 as FPB grew and had the resources to continue alongside families progressing into housing. The organization was able to provide support through FPB staff check-ins and utilized survey tools to identify areas of strength and areas where resources or support may be beneficial to secure the family's

long-term stability.

Mission

While Family Promise began its journey as a shelter provider, it has since evolved into an advocate for systemic change where families are able to end generational homelessness through education and evidence-based support. The organization's core values are empathy, community, dynamic, and empowerment, and they believe these core values speak to the purpose and vision for everyone at Family Promise of Brevard and keep their mission in the forefront of their minds. FPB defines success as still being housed at the end of a year after exiting the program (M. Hoenick, personal communication, March 2, 2022). For most families, this would mean having a new or renewed lease, although a few families may start the Stabilization program still homeless or at-risk for homelessness but are making significant progress towards stable housing. This reflects the complex nature of homelessness and family stability since each family's situation is different, so while the program has milestones toward gaining independence and stability, families have individual needs that may require flexibility.

The organization realizes that in order to break the cycle of homelessness, families often have needs beyond housing and employment to ensure they do not become homeless again. Families are considered to successfully complete Case Management, a main requirement for all services/programs, if they remain engaged in the program and meetings for one year, pay their bills on time and in full, complete a budget, ideally save money, and complete the *Keys to Good Tenancy* curriculum. The *Keys to Good Tenancy* curriculum has been an addition to the program as of 2021 after staff realized that families may benefit from understanding the common issues that come with being a

tenant and how to navigate those challenges in order to reduce the risk of eviction (M. Hoenick, personal communication, March 2, 2022). It should be noted that families will occasionally disengage from the Stabilization case management as they may not be ready to make the changes necessary for long-term success or do not want someone involved in their lives and business. Stabilization is a voluntary program for all families, and while clients may initially agree to services and program rules, that does not mean that all clients follow through with expectations.

Program Components

Family Promise of Brevard operates four components within their program, each focusing on the ultimate goal of family self-sufficiency. In Shelter, the organization assists families experiencing homelessness by engaging existing community resources, primarily with local congregations, to shelter and provide meals. During this time, case management services also assist families with transitioning into housing. In Prevention, families receive financial assistance to prevent evictions and utility shut-offs while providing short-term case management to assist families in living a self-sustainable lifestyle. FPB realized that education can be a barrier for adults when working towards a stable career and housing, so the Education program assists clients in obtaining, at maximum, a 2-year degree or certification to increase income and quality of life through higher education.

Housing Stabilization, the final piece in the organization's mission, is designed to help families who have recently rehoused maintain their housing and encourage a self-sustainable lifestyle with the support of year-long case management services. Case managers work collaboratively with the family to ensure their ongoing success for their

first year of tenancy. Services provided are related to housing stability, self-sufficiency, financial literacy, education for good tenancy, health and wellness, and appropriate referrals to area resources. Each service focuses on an aspect of daily living that could positively impact the long-term success of a family if given education and support. It is also important to note that case managers provide clients with a personal connection to the organization. The FPB Stabilization coordinator meets with each family, conducts the pre and post-surveys, and builds a relationship of trust with the clients. This relationship-building is key for many families since people experiencing homelessness can sometimes have traumatic experiences or previous situations that have caused them to have difficulty trusting others. Since 2013, FPB has served 470 families in Prevention, 170 families with Shelter, and 82 families with Stabilization, with about 150 families enrolled in those three programs a year. While perhaps utilizing the same resources, each component operates separately since some families may need only one piece of the program, depending on their situation.

Operations

FPB relies on its staff and funding sources to execute the four programs excellently and efficiently. The staff follows a traditional organizational structure by having client-focused staff handle responsibilities that are different from administrative staff, however, all staff report to the Executive Director. In the client services arm of the organization, which manages the four programs, there are four full-time and one part-time employee. Each of the client services employees is responsible for a specific program, and the part-time employee can assist with whichever program is in need of additional staff at the time. There are 12 salaried employees, including the administration,

with an additional two volunteers in the roles of HR Director and Volunteer Coordinator. By keeping a slim organization, FPB strives to fulfill its mission by channeling the majority of its funding to the programs and resources used by their families. This is possible through various forms of funding, including state and federal grants, independent contributions, and fundraising. The organization's 2021 budget was \$685,000, and each funding category represents a third of their impact on the overall budget. Even though there is no state or county oversight for the organization, there is annual monitoring related to case documents, policies, and procedures that need to be reviewed in order for the organization to be eligible for grant opportunities. By supporting the grant process, the organization has another layer of transparency.

Stabilization Program

While not the only program utilized by those seeking services and support from Family Promise of Brevard, the Stabilization program is the focus of this research. This aspect of FPB services families transitioning from homelessness to self-sufficiency.

Criteria

Family Promise of Brevard seeks to impact as many local families in need as their resources allow, but not every family is a good fit for the Stabilization program. Three eligibility criteria must be met before a family can enter. The applicants must be a family, which FPB defines as an adult with custody of a minor child, and they must have either gone through the FPB Shelter program or have received financial assistance to move into a new residence. Additionally, families agree to ongoing case management services up front so they understand the expectations and level of engagement prior to receiving any support. This program is not designed for high-acuity, chronically homeless families.

Families that enter the Stabilization program understand the level of commitment required to be successful and that long-term self-sufficiency takes time. The organization aims to engage families in goal-oriented work for 9-12 months, where they receive case management services and progress towards goals. The monthly average length of stay in Stabilization is 8.2 months or 250 days for most families. Some families choose to leave the program either because they wish not to be accountable to their case manager, cannot commit to the program requirements, or for other personal reasons. The non-completion rate for Stabilization families is 15.7% as of February 2022. In the last 24 months, even though 15% of families did not complete the program, all families reported being housed upon exiting the program. Even if families choose not to complete the Stabilization program, their housed status reflects upon the impact the other programs with FPB have been able to have in addressing the needs of the families they serve. As FPB staff continues to search for innovative ideas to implement in the program, they continue to reach out to families after graduation to check-in, although families can be difficult to reach if they have moved or changed contact details.

Data Collection

FPB has been tracking the data from the Stabilization program using pre and post-surveys completed by the families during meetings with the Stabilization coordinator. The Self-Sufficiency Rating Scale (SSRS) was created in 2015 and was in paper format. The original SSRS assessed families' self-sufficiency, or strengths, and used a scoring system from zero to four to rate each category. Categories included program participation, child care, housing, employment, school attendance, mental health, level of public assistance, family income, parent education/literacy, criminal justice, and

transportation. For each category, the family data point would be the sum of all scores in a given month, and that data would be tracked month by month to determine if the family was progressing towards long-term self-sufficiency. This old SSRS form was used until 2020, when Family Promise National created the SSRS used in a database called FPForce, which is a client management tool specifically designed for Family Promise affiliates. The FPForce SSRS uses a scoring system from one to five, and the data point in the workbook for these updates is the average of all scores in a given month, which makes it easier for staff to measure family progress in each category. FPB transitioned from the original SSRS to the FPForce SSRS because it was easier to store and track data since it could be done online. As the forms were similar and the new format was more time-efficient, this was a logical decision that has led to a better usage of staff time and organizational resources.

In an effort to gather additional data, FPB implemented the Service Prioritization Decision Assistance Tool (SPDAT) in 2015 and has been using this tool to assess for an objective acuity, or the level of severity of needs or problems, score of families. While it collects numerical scores of one to five in categories, with zero representing a ‘not applicable’ score, just like the SSRS, this tool provides the Stabilization coordinator with qualitative questions to ask in order to understand the family’s whole-picture situation. For example, questions like “How does your family spend their free time?” or “Do you have any concerns about cooking, cleaning, laundry, or anything like that?” can give the Stabilization coordinator a better idea of the family’s needs that could result in support services or a connection to outside resources even though the actual numerical data cannot capture the whole picture of the family’s situation.

At the conclusion of a family's time in the Stabilization program, the Stabilization coordinator conducts an exit interview to understand the family's experience in the program, encourage them to reflect on their progress, and collect program feedback. One of these audio recordings was shared to provide case study evidence to capture the human perspective missing from quantitative data to provide a more holistic and meaningful program evaluation for Family Promise of Brevard. While the program may benefit from the inclusion of the case study, the research hypotheses focus on the quantitative data to determine the effectiveness and self-sufficiency measures included in the evaluation process. For the purposes of this study, data was used to get an objective understanding of the organization's impact on breaking the cycle of homelessness for families achieving long-term self-sufficiency and help identify what, if any, impact demographics have on self-sufficiency outcomes so the organization can better understand their impact and target their communication strategies.

Chapter IV

METHODOLOGY

Secondary data was gathered from homeless families who had previously been enrolled in Family Promise of Brevard's transitional housing program for the mixed methods research. Previous program evaluation studies of programs serving homeless families have used both quantitative and qualitative methods, including surveys and interviews, with greater responses coming from surveys (Gubits et al., 2018; Washington, 2002; Winship, 2001). With this in mind, the researcher determined quantitative methods initially fit best since the families complete a pre- and post-test survey about their experience and also provide information about their employment, housing, and other areas of self-sufficiency during the six and 12-month follow-up conversations with FPB staff. Program evaluation research has shown that surveys conducted by program staff are an effective method of data collection and analysis to increase the potential amount of data while minimizing the amount of time needed to collect data from families (Gubits et al., 2018). Additionally, it can be challenging to communicate with and collect data from transitioned families while analyzing already-collected data will be more efficient and reliable (Burt, 2006).

The researcher believed there to be value in bringing a holistic perspective to quantitative data when studying a complex topic like homelessness and family stability

and desired to include additional qualitative data to enhance the research. While the researcher was unable to interview families, audio files of family exit interviews conducted by FPB's Stabilization Coordinator were used to provide information in the form of a case study and allowed for a greater understanding of the Stabilization program from participating families' perspective on their experience and the program overall, this research was based on the quantitative data collected from families during their participation in the program and qualitative data collected from families after program participation. This study will conduct quantitative research on secondary data, followed by qualitative research using case study analysis to explore qualitative research questions.

Data Sources

Data for the research project was gathered from the FPB Stabilization Coordinator upon IRB approval. The quantitative data sources were two data collection forms used for intake and progress monitoring of families. The qualitative data came from a recorded exit interview with a family that had graduated from the program, with the interview being conducted by the Stabilization Coordinator.

Quantitative Research: Secondary Data

Secondary data for this project came from the Service Prioritization Decision Assistance Tool (SPDAT) and Self-Sufficiency Rating Scale (SSRS) assessments conducted by Family Promise of Brevard. These assessments were done by the Stabilization Coordinator upon intake and then conducted monthly as families participated in the program in order to measure their progress and assess current needs. The SPDAT scores focused on determining objective acuity, or the level of severity of needs or problems, a family may be experiencing, while the SSRS asked questions across

a wider array of categories to get a better understanding of family strengths and areas of potential growth in order to obtain self-sufficiency. The change to an updated, online version of the SSRS prompted FPB Stabilization staff to question whether the two data collection tools were necessary and gathering enough information from families to understand their situation or if there was duplication between the forms and if broad categories and scales were missing critical information. When cleaning and organizing the collected data, the researcher noted that categories were too broad to identify key strengths or specific focus areas for families. This also led to a challenge in using the data to make conclusions and program recommendations since FPB data did not provide a specific 'self-sufficiency' score that could measure overall family progress. Instead, breaking apart some of the categories to be more specific and including an overall self-sufficiency category would be helpful for future studies and the organization. Therefore, form recommendations are included in the appropriate chapter within this research project.

The organization has been collecting data for years but did not have time or resources to analyze it to determine the impact and effectiveness of its program for homeless families. By determining the effectiveness of its program and the typical families it serves, the organization can make changes to make the best use of its resources, including staff. It should be noted that the researcher and organization recognize that the COVID-19 pandemic has impacted homeless families. However, as the pandemic is ongoing and its future impacts are currently unknown, the pandemic references in this project refer to information collected from January 2020 until December 2021.

While there was enough usable data for analysis with 64 participating families, future research is recommended once more families have participated in the Stabilization program in order to receive results from a larger population.

Qualitative Research: Case Study Data

An addition to the research project's initial methodology plan was the case study of three families participating in the Stabilization program. However, it was decided that including qualitative data from one family would allow for inclusion of greater detail and allow the family's story to enhance information gleaned from the quantitative data without overshadowing the objective value of the numbers. The case study information was gathered from an audio file recorded by the FPB Stabilization Coordinator upon the family's exit from the program.

As part of his role at FPB, the Stabilization Coordinator conducts post-program interviews with families upon their exit from the program with three goals: to reflect on their experience, to encourage families to see their progress, and to receive feedback about the program. Since the Coordinator has often spent time with many families regularly during their time in the program, he has built a relationship with them that allows families to be open and honest about their experience during the interview process without fear of reprisal. The purpose of including these case studies is to provide qualitative support to the quantitative data and a more holistic picture of the program evaluation.

During his time at FPB, the Stabilization Coordinator recorded exit interviews with eight families of varying lengths ranging from 20 to 70 minutes long. These families each had their own experience before and within the Stabilization program. To provide

quality, in-depth details from the interviews to enhance the quantitative data, the researcher selected three families that represented as diverse of a population as possible from the small sample available. Additional information from each family's interview follows in the next chapter.

While quantitative data can reveal relevant information for the Stabilization program, it can be difficult to capture the impact on families outside of what is numerically captured on the SPDAT and SSRS survey forms. These interviews provided an opportunity for families to share how their lives were affected by the program and see what areas of growth and change have already been recommended by participants who have experienced the Stabilization program firsthand.

As the FPB staff keeps in regular contact with the majority of their participants, the quantitative data sample and audio-recorded interviews include families of different characteristics who have stayed in the program for varying lengths of time. The data was analyzed by household rather than individual adult program participants since FPB data collection gathers one data point per variable representing each family.

Sample

The research depended on a quality sample size provided by Family Promise of Brevard, capturing data from families who have participated in the Stabilization program.

Sample of Quantitative Research

Data points were only included for families with more than one "check in" date with the staff since families who only completed a pre-program evaluation could not show any program impact. Families without demographic data and two outliers were removed to better capture the organizational impact, leaving the research to use data from

64 families. A population of 64 families would call for a research sample size of 55 families, but as the program evaluation would be enhanced by including as many participant families as possible, all 64 families with complete profiles and either complete or mostly complete (only missing one or two check-ins) survey results were included in the study.

Raw scores for the SSRS and SPDAT assessments, measuring self-sufficiency and intensity of family need, respectively, were organized by family and date. The researcher then measured the rate of change in every category for both assessments and created a separate file for these new scores that better reflected family impact during their time in the program. Family demographic data was also transposed to the new file so all data points for each family were in one location for analysis. It should be noted that while all families have SSRS scores, not all families have SPDAT scores since families were either unavailable, the amount of staff time required to complete the assessment time it took to conduct the assessment and the potential of overlapping data with the SSRS assessment.

Initially, the SPDAT data was scored on a range of 0-low-intensity need to 4-high-intensity need, and the SSRS was scored on a range of 0-in crisis to 4-thriving, the numerical scores were adjusted for analysis. These adjustments included adding one point to each score to remove any zeroes for analysis and flipping the SPDAT scoring system to better reflect the scale used for SSRS where lower scores reflected higher needs or families in crisis and higher scores reflected lower needs and thriving families. The researcher created a rubric for both assessments, listed in Appendix C and D, that combined the score rankings into one sheet rather than the assessments' current format,

which lists each category and rubric score on a separate page. Each row corresponding to a survey score value was color-coded, so a quick assessment of where each category score was in the matrix became easy to reference. This rubric not only assisted the researcher when referencing family scores but could also be used as a helpful visual for FPB Stabilization program staff when simultaneously assessing family self-sufficiency across multiple categories.

The rates of change were calculated after adjusting the SPDAT and SSRS scores, and initial tests showed that while the first regression model worked, the second model was over-specified if all of the variables were included. AVIF test was conducted to see which variables were collinear, and using the literature review as a basis, variables with a VIF score higher than ten and, based on the literature, had less of an impact on self-sufficiency were removed. Variables were also removed if they were only captured in the SPDAT but not in the SSRS since many families had incomplete or missing SPDAT scores rather than the consistent and complete scores of the SSRS assessment. Category variables removed were: (1) Food and Nutrition; (2) Adult Education; (3) Healthcare Coverage; (4) Life Skills; (5) Family/Social Relations; (6) Safety; and (7) Spiritual Life. The remaining categories across both assessments were then arranged so that corresponding categories were scored in the same columns for data analysis.

Family demographic data included the age of the head of household, gender, race, and ethnicity of the parent(s), length of time spent in the program, and how many total individuals were in the family. A key, indicated in Table 2, was created to assign numerical values to the various demographic information indicators. When the researcher was testing for demographic variable significance, it would be easier to determine if

demographic variables were significant when analyzing the family self-sufficiency. As the cleaned data set offered two options for race, gender, and ethnicity, those indicators were assigned either a “0” or “1” while the HOH age and Length of Time in the Program were broken into bands.

Table 2

Family Demographics

	Race	Ethnicity	Head of Household (HOH) Age	Adult Gender	Length of Time in Program
0	White	Non-Hispanic		Male	
1	Black/African American	Hispanic	18-24	Female	1-2 months
2			25-34		3-5 months
3			35-44		6-8 months
4			45-54		9-11 months
5			55-64		12-14 months
6			65+		15 months or more

Sample of Qualitative Research: Case Study

The sample of qualitative data drawn from the audio interview files consists of three families who successfully transitioned from homelessness to stable housing after participating in the Stabilization program. It is important to note that while the Stabilization program has served over 60 families and the Stabilization Coordinator conducted exit interviews with many of these families, the interviews only started being recorded in 2019, and only eight were available for study consideration. Physical notes

were taken from exit interviews but lacked the amount of detail included in the audio files that provided a more holistic picture of program participation and family experience. While the qualitative case study focuses on three families chosen from the sample to highlight the diverse experiences within the program, demographic data for the sample, including general demographics, length of time in the program, and housing plans upon exiting the program, was included to provide perspective on family diversity within the larger exit interview data set.

As with the quantitative data, the Stabilization Coordinator gathered the qualitative data from each family's head of household (HOH). There was a wide range in age, with heads of households spanning from the youngest at 28 years old to the oldest at 55 years old. Gender-wise, the sample included both male and female heads of households, and while all families included at least one child, only one participating family unit included two parents, while the rest were single-parent households. The Stabilization Coordinator also gathered information on the HOH's disability and veteran status. While no HOH reported being a veteran, one HOH indicated having a disability.

The duration of time these families spent in the Stabilization program varied, with the sample comprising individuals who had participated in the program for no shorter than nine months and no longer than 15 months. All families interviewed indicated their housing plan upon exiting the program was to transition to a rental unit, although their payment options varied. Some families indicated utilizing other housing subsidies, such as Housing Choice Vouchers, to aid with their housing costs, while others were exiting to a rental unit without any ongoing housing subsidy.

Research Variables in Quantitative Study

The independent variable was the length of time families participated in the program. The length of time a family spends in the program was important because families need resources and support to become self-sufficient, and making effective use of those takes time. While circumstances and needs may differ, with some families requiring more time to get to self-sufficiency, the program participants in the past have stayed anywhere from a few months to a year or two. The FPB staff attempts to follow up and keep in contact with families who enter their program, whether they participate for three weeks or ten months. Some families simply need a place to stay while getting on their feet, and since FPB's model keeps families together, it can be a great resource for a short amount of time.

However, many of the families, no matter the length of time they spend in the program, utilize the resource network FPB can provide. This network allows families to contact these resources even once they have left the program to keep their autonomy and conduct the decision-making for their family. Families can be asked to leave the program if they are not making efforts to become self-sufficient or break the rules agreed upon prior to program entry. Since FPB staff works to ensure families understand the expectations prior to participation, this does not happen often and should not skew the data in terms of the length of time in the program. For families who stay and commit to utilizing the program, those families may or may not have long-term self-sufficiency, and it was a goal of this research to determine if the length of time shows any relationship with their self-sufficiency after exiting the program.

The dependent variable was the participants' level of sustainability. The FPB program defines 'sustainability' or 'self-sufficiency' as having stable housing and

adequate financial resources where income covers their daily living expenses, although total family self-sufficiency is evaluated through the rates of change reported over time. As each family who provides contact information is contacted regularly by an FPB staff member to check on their progress and inquire if they need anything, the organization has been able to keep unofficial data collection with these phone calls along with the official surveys given at the 6-month and 12-month mark once a family has exited the program.

When the quantitative data file was initially sent to the researcher from FPB, the scores were arranged by family ID number and separated into different Excel sheets by their participation year. The researcher combined all families' data into one master Excel sheet and color-coded the scores of the SPDAT and SRSS to be green and orange, respectively, in order to identify complete and incomplete scores. It is also important to note that the two survey tools did not measure using the same numerical scores since the SPDAT determined objective acuity, or the level of severity of needs or problems a family may be experiencing, while the SSRS asked questions across a wider array of categories to get a better understanding of family strengths and areas of potential growth in order to obtain self-sufficiency. Therefore, the researcher coded the scores using the self-created rubrics based on FPB's assessments that made the numerical values represent similar family experiences, with a lower score representing less self-sufficiency and the need for greater support and a higher score representing greater self-sufficiency and the need for less support. These rubrics, listed in Appendix C and D, also combined the information from both SPDAT and SRSS assessments so they can be used by staff and as a reference for clients.

The control variables were the aspects of a family's life that can impact their level of participation in the program and the family demographics, specifically the head of household's race, ethnicity, gender, age, and the number of people in the family unit. With these variables, a linear regression allowed for statistical analysis to determine if the length of time families participated in the Stabilization program impacted the rate of change reported by families from their intake assessment to their exit assessment or their self-sufficiency level. By analyzing the regression, it would be useful to determine the size and demographics of families who are becoming self-sufficient after a certain time in the program, as the organization will use this information to continue their services and structure that works for these families while recognizing the family types and sizes that were not self-sufficient and see if changes can be made to accommodate for future families of similar characteristics.

Employment and type of housing information helped determine if educational resources and classes need to be integrated more so adults are more likely to get full-time jobs and what type of housing they were able to secure. Information on families' race can help identify if minorities were experiencing any barriers to self-sufficiency that their non-minority families were not, and being aware of any racial differences can help the organization make changes to meet specific needs. Education levels are important because they can be an indicator of whether or not relationships with local colleges or GED programs would be beneficial for the population. Whether a family has access to personal transportation could affect whether organizations expand their services to include transportation or identify housing closer to businesses to support potential employment. Different housing types have different requirements, so preparing families

for those sets realistic expectations and encourages them to develop finance management and other life skills.

Variable Measurements in Quantitative Study

The independent variable, the length of time in the Stabilization program, was measured by calculating the number of months each family spent in the program and creating a nominal value for measurement. Months were selected as the time measurement since FPB staff has a check-in with families once a month to review progress and goals, so their participation dates reflect the number of months spent in the program rather than days or weeks. The number of months was initially assigned a corresponding number as shown in Table 2. However, the same tests were run using the specific number of months families participated in the program to determine if there was any significant difference in how the independent variable was reported, which was not the case. For the purposes of the regression tests, the number of months was used for the length of time to determine if there was a specific impact with the demographic control variables, while the length of time corresponding key values were used for the correlation table as the researcher used that test to determine simply if the variables shared an association.

The dependent variable was the self-sufficiency reported by families, which is calculated as the positive or negative rates of change reported by families. Since FPB used two separate tools to determine self-sufficiency, the rates of change from each tool was combined to reflect each family's rates of change while participating in the program or their specific self-sufficiency level. Each family's self-sufficiency level was either a positive or negative nominal value, indicating whether that family saw growth and

positive change in their circumstances across the various categories measured while in the program or whether families experienced a lack of growth or negative effects while in the program. Self-sufficiency, while calculated for numerical values, was subjectively rated by the families and Stabilization Coordinator during intake and regular meetings. The survey tools gave rubric-style information for each category ranking, although the level of specificity varied from category to category, and families rated themselves as best they could to reflect their situation.

The control variables of the head of household's race, ethnicity, gender, age, and number of people in the family unit were measured using the key shown in Table 2. While age and the number of people in a family unit were already quantitative variables, the HOH's race, ethnicity, and gender are qualitative variables that had to be coded as categorical variables in order for quantitative analysis to be possible. As there were only two cases of race outside of White and African American, once the data set was cleaned for incomplete responses, the two cases were removed since making analytical and recommendation statements for a program based on such a sample size would not be efficient. Therefore, White was assigned the numerical value of "0," and African American were assigned the value of "1" for analytical purposes. Ethnicity was evaluated similarly, with non-Hispanic and Hispanic values assigned "0" and "1", respectively. These were determined since the literature indicated that minorities are disproportionately affected by homelessness and have a more difficult time than non-minorities in achieving self-sufficiency.

The unreported cases of homelessness make it particularly challenging to determine if males or females experience homelessness more often, but the literature

indicates that more females with children will experience homelessness rather than males. The gender variable noted male as “0” and female as “1” for analysis. Measuring the head of household age group was more challenging since the literature and previous research did not have a consensus on how adult ages should be grouped for data entry and analysis. Since Family Promise of Brevard requires heads of households to be at least 18 years old, the researcher analyzed the traditional age structures discussed in the literature and created age bands that best represented the ages within the data set. Since neither the age nor length of time variables had one range to be evaluated, those measurements started at “1” and went up for each age and time band.

Data Analysis Methods

Data analysis methods differed for the quantitative and qualitative data, allowing for an in-depth analysis of the Stabilization program and its impact on participating families. The analysis of both data types allowed for a holistic understanding of the program evaluation and informed research conclusions.

Data Analysis Methods in Quantitative Research

The quantitative data analysis methods were identified based on the type of data and the purpose of the statistical tests in determining the validity of research hypotheses. Descriptive statistics and inferential statistical techniques were used after inputting data into the JASP program. Both statistics were used due to the program evaluation being able to describe the contents of and make predictions about the research population. Due to the smaller population size, a smaller sample was not pulled from the data, and all 64 families were included.

Correlation Analysis. Inferential statistical techniques were used to test demographics and the independent variables in the hypotheses to determine if they were significantly related to self-sufficiency. For this analysis and based on the type of data, a Pearson correlation coefficient was initially used to determine the strength of the relationship that may exist between them, if any. The correlation analysis tested both the independent and dependent variables, as well as Housing and Employment individually (as these scores are believed to impact family self-sufficiency), Race, Gender, Ethnicity, and Age of the HOH, and People in the Family.

Table 3*Variable Correlations/Pearson's Correlations*

Variable		Self-Sufficiency (Housing/Employment)	Housing	Parent Employment	Length of Time in Program	Race Adult 1	Ethnicity Adult 1	Gender Adult 1	People in Family	HOH Age Group
1. Self-Sufficiency (Housing/Employment)	Pearson's r	—								
	p-value	—								
2. Housing	Pearson's r	0.817 ***	—							
	p-value	< .001	—							
3. Parent Employment	Pearson's r	0.818 ***	0.338 **	—						
	p-value	< .001	0.008	—						
4. Length of Time in Program	Pearson's r	-0.134	0.008	-0.227	—					
	p-value	0.302	0.953	0.081	—					
5. Race Adult 1	Pearson's r	-0.024	0.108	0.067	-0.231	—				
	p-value	0.852	0.407	0.609	0.073	—				
6. Ethnicity Adult 1	Pearson's r	0.082	0.029	0.104	-0.116	-0.159	—			
	p-value	0.532	0.826	0.428	0.375	0.220	—			
7. Gender Adult 1	Pearson's r	-0.022	0.090	0.055	-0.132	0.174	-0.073	—		
	p-value	0.864	0.488	0.677	0.310	0.181	0.578	—		
8. People in Family	Pearson's r	-0.126	0.007	-0.199	0.006	0.084	0.041	0.024	—	
	p-value	0.332	0.955	0.127	0.965	0.520	0.753	0.854	—	
9. HOH Age Group	Pearson's r	-0.142	0.060	-0.291 *	0.257 *	-0.088	-0.061	0.024	-0.015	—
	p-value	0.277	0.645	0.024	0.046	0.498	0.639	0.853	0.909	—

* p < .05, ** p < .01, *** p < .001

Regression Analysis Part I. Prior to consolidating data points from both assessments, a linear regression was used to test each tool's data points. The regression analysis was conducted using the JASP statistical program, where the data set was inputted into the program, and the researcher selected a linear regression test. With JASP's user-friendly interface, the researcher placed the dependent variable, the rate of change averages reported in the SSRS tool, into the appropriate box for testing, followed by the independent variable, the number of months in the program, in the covariate box. Before running the regression, the researcher also had to input the factors, including race, gender, and ethnicity of the head of household, HOH age group, and the number of people in the family, into the model for testing. With all information inputted from the data file into the appropriate fields, the JASP program ran the regression test. The second regression test focused on the average scores for the SPDAT tool using the same steps, covariate, and factors to weigh against the rate of change reported by families.

Regression Analysis Part II. Upon conclusion of the first set of regressions, the average rates of change on both tests were combined to find an average rate of change for each family, indicating their level of self-sufficiency. This calculation gave a clearer picture of each family's journey toward self-sufficiency while in the program. However, it could not recalculate averages for families who did not complete the SPDAT assessment, so those family averages only came from SSRS data. The second regression analysis was conducted using the same process for inputting data into the appropriate fields in JASP, except the dependent variable was the combined rates of change from both assessments as the self-sufficiency score to be tested.

By comparing the regressions from the individual tools and their rates of change

when combined from both tools, the researcher was able to determine if similar data reporting was collected by both tools in terms of progress in the program.

The decision was made to run a Chi-squared test to see if information could be gleaned about variable significance. However, with the small sample size and high number of variables across survey tools resulting in an inability to get a small N score, the test was unsuccessful and could not be used. Interestingly, the number of 0 responses was a majority response for many categories, which will be elaborated on in the following chapter.

Data Analysis Methods in Qualitative Research: Case Study

A narrative analysis was conducted with the qualitative data gathered from secondary data in the form of exit interview audio files featuring adults who had completed the Stabilization program. While eight families participated in the audio-recorded exit interviews, three were randomly selected to provide qualitative context to the research. Since the qualitative data was included as an addition to the original quantitative project, the researcher took a deductive approach to the narrative analysis as the quantitative hypotheses and literature review had adopted a theoretical framework, and the researcher had already seen initial quantitative data. Therefore, the case study qualitative data would provide for better understanding of program impact. Additionally, the researcher wanted to examine whether any trends in the quantitative data were supported or not supported by the narrative case studies.

This method was crucial for uncovering context-specific insights that could inform both the program evaluation and Family Promise of Brevard. By actively listening to the audio files and recording questions and responses, the researcher could extract

multifaceted and nuanced qualitative case study data that would otherwise be limited to only quantitative data.

The notes taken by the researcher included general interview information, but particular emphasis was placed on capturing participant experience, leading them to FPB and feedback from participating in the program. The information allowed the researcher to confirm or den previously established hypotheses regarding the program's effectiveness through the lens of time spent in the program and family demographics that could influence participant experiences. This process of hypothesis testing added a level of rigor to the study, ensuring that the findings were not based solely on quantitative data.

Including case study information via the exit interviews also provided a wealth of qualitative information that painted a comprehensive picture of the program's strengths, areas that required growth, and the general experiences of those enrolled in the program that were still connected to the main variables of length of time in the program and self-sufficiency scores. This data was instrumental in shedding light on the nuances of participant experiences, enabling the program evaluation to generate well-informed results and recommendations further in the study. The qualitative insights, rooted in the real-life experiences of participants, added depth and authenticity to the data evaluation process, ultimately enhancing its credibility and value in the research. This idiographic approach validated the program's impact from a participant's perspective and lends itself to the program's ongoing development and optimization.

Ethical Considerations

Before beginning research and data analysis, project approval was sought from the Institutional Review Board. The project received expedited IRB review due to the

research being survey-based using data collected and provided by FPB staff; there was minimal risk to the participants the data was collected from, and the data was being used for the purpose of program evaluation. Data was collected from the organization's primary contact, who builds and maintains relationships with every family participating in the program. This individual is also responsible for the after-program check-ins and data collection. For HIPAA compliance and to ensure program participant anonymity for their protection, all identifying information was removed by the organization prior to the start of research. Family Promise of Brevard gave each data point a number for organizational purposes and to ensure the variable comparison is accurately applied to the correct family. Data was loaded on a password-protected USB drive for additional security.

As the data used was from people experiencing homelessness, the above ethical considerations were included in the research for their protection. The data will be kept for the minimum amount of time required and then safely destroyed. Permission was granted to use the audio recordings of the families' exit interviews by the FPB Stabilization Coordinator, with IRB accepting an amended request for use in the study. Recordings were stored on a password-protected laptop. In order to uphold federal guidelines for exempt research, upon finalizing the narrative analysis, all audio-recorded files will be permanently deleted from devices used to receive and store the audio files. Families were assigned pseudonyms for additional protection; no further identifying information was included from the recordings.

Chapter V

RESULTS

By using quantitative data from Family Promise of Brevard's Stabilization program for the study, the researcher was able to review each quantitative hypothesis and determine if the data supported or did not support the statements. Additionally, the use of a family case study to provide qualitative information and perspective to the research allowed the researcher to answer the qualitative research questions based on a family's experience in the Stabilization program. By utilizing both methods, the research provided a holistic understanding of the program, how families evaluate its impact, and allowed the researcher to provide recommendations for improvement.

Quantitative Findings

The quantitative findings of the research utilized information from the SSRS and SPDAT data collection forms. All quantitative data was collected by the Stabilization Coordinator and provided to the researcher for research usage.

Data Collection

Data was collected from Family Promise of Brevard in a two-week period, after the staff removed identifying information for the families to meet confidentiality

standards. There was also additional communication between the Stabilization Coordinator and the researcher to determine if any missing scores could be accounted for and verify values that could be entered incorrectly or were outliers (for example, a family with fourteen members). Since all verified families with complete data were included in the study, no smaller sample needed to be considered for research purposes. Running descriptive statistics assisted in the identification of duplications and two errors in the transposing of the data set. Once duplications were removed and the errors corrected, the survey categories were then cleaned and organized as detailed in the previous chapter to match corresponding categories between the tools, and outlier categories captured on only one tool were removed prior to analysis.

Descriptive Statistics

As displayed in Table 4, the head of household (HOH) demographic characteristics show that the most common age group represented is 25-34 years old, representing almost 46% of the population, with the 35-44 age group representing the other portion at 34% of the population. A significantly higher number of HOHs are female (N = 39, 63.9%), while the reported race was almost evenly divided between Caucasian (N = 29, 47.5%) and African American (N = 32, 52.4%) and ethnicity showing a higher number of Non-Hispanic adults (N = 52, 85%) than Hispanic adults (N = 9, 14.7%).

Table 4*HOH Demographic Characteristics*

Variable	N	Percent
Age Group	61	
18-24	4	6.6
25-34	28	45.9
35-44	21	34.4
45-54	6	9.8
55-64	2	3.3
Gender	61	
Male	22	36.1
Female	39	63.9
Race	61	
Caucasian	29	47.5
African-American	32	52.5
Ethnicity	61	
Non-Hispanic	52	85.2
Hispanic	9	14.8

The data showed that Family Promise of Brevard’s Stabilization program served families with a variety of characteristics and experiences within the program. As shown in Table 5, there was a higher number of double-parent households (N = 35, 57%) compared to single-parent households (N = 26, 42.6%). It should be noted that families could have included more than two adults, but with the HOH being the primary contact for the Stabilization Coordinator, additional information about family makeup was not included. Almost three-quarters of the population had 3-5 family members per household, with four family members being the most common unit (N = 23, 37.7%). As Family Promise of Brevard welcomes families for however long they need to become self-sufficient if they are making progress toward their goals, families most often spent 12-14 months in the Stabilization program (N = 28, 45.9%). The range of time spent in the

program indicates that families are spending quite a while in the Stabilization program before leaving due to not making progress or, hopefully, becoming self-sufficient.

Table 5

Family Characteristics

Variable	N	Percent
Parent Type		
Single	26	42.6
Double	35	57.4
Family Size		
2	7	11.5
3	13	21.3
4	23	37.7
5	10	16.4
6	4	6.6
7	2	3.3
12	1	1.6
14	1	1.6
Months in Program		
1-2	6	9.8
3-5	4	6.6
6-8	8	13.1
9-11	10	16.4
12-14	28	45.9
15+	5	8.2

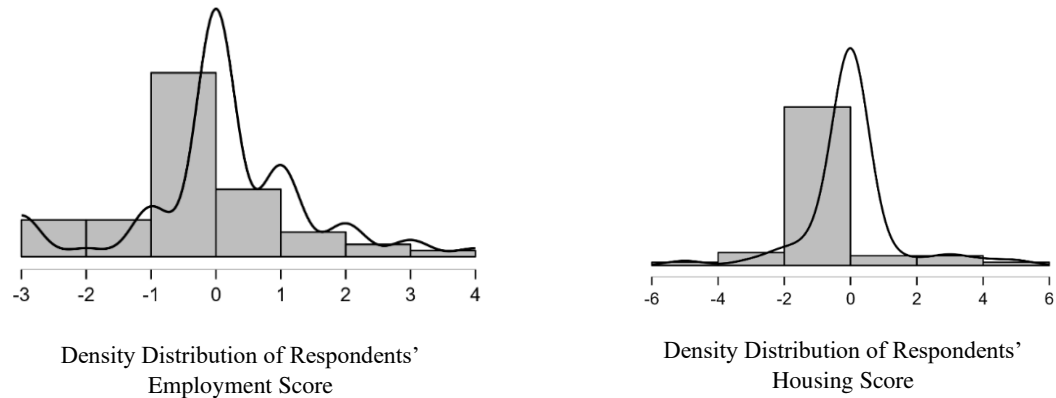
Descriptive statistics were run on the demographic variables, but as the numerical values were assigned a range for classification, the results reflected similar information gleaned from the previous two tables.

As noted in Chapter 3, the study focuses on dependent variables crucial to understanding family self-sufficiency, specifically employment and housing. The distribution densities presented in Figure 2 reveal that these dependent variables exhibit characteristics indicative of a normal distribution. This insight contributes to the

researcher's understanding of the typical patterns and variations in employment and housing within the context of family self-sufficiency.

Figure 2

Distribution Density of Dependent Variables



Correlation Results

The correlation analysis included the independent and dependent variables, as well as demographic variables that were of interest to the researcher and FPB staff. While the dependent variable was included first in the correlation test, the researcher chose to specifically include the Housing and Parent Employment aspects of the Self-Sufficiency score since the literature reviewed in Chapter II (Fischer, 2000; Van Ryzin et al., 2001) and FPB have indicated that these two aspects are the pillars to self-sufficiency, and the researcher wanted to test if there was any significance between those sub-variables and the demographic control variables.

Unsurprisingly, the variables of self-sufficiency and housing had a strong positive correlation ($r = 0.704$), along with a p-value less than 0.001, indicating that the correlation is statistically significant. It was expected that parent employment and self-sufficiency had a strong positive correlation, which was confirmed with a r score of 0.5,

and housing had a slightly weaker positive correlation ($r = 0.338$), with both correlations being statistically significant. The correlation between self-sufficiency and the number of months spent in the program is -0.201 , and this negative correlation suggests that as the number of months in the program increases, self-sufficiency tends to decrease. Contrary to the expectation of a positive correlation, a negative r score indicated a moderately strong correlation between self-sufficiency and length of time in the program ($r = -.201$).

Additional information was gleaned about the relationships between variables when adding the demographic variables to the correlation. However, the researcher had expected that there could be stronger relationships than the data indicated was present, as none of the demographic variables had strong correlations and were not statistically significant. With a very weak positive correlation between self-sufficiency and HOH race and not having a statistically significant correlation, these variables were not as closely related as the researcher initially thought they could be ($r = 0.018$, $p = 0.888$). The correlation between self-sufficiency and HOH ethnicity is a very weak negative correlation ($r = -0.039$, $p = 0.764$), while the same correlation showed a very weak positive correlation with the HOH gender ($r = 0.053$, $p = 0.683$). Self-sufficiency showed a weak negative correlation with both the HOH age group ($r = -0.066$, $p = 0.613$) and the number of people in the family unit ($r = -0.162$, $p = 0.212$).

The correlation tests showed that self-sufficiency is strongly positively correlated with housing and parent employment. The number of months in the program showed a negative correlation with self-sufficiency, but it is not statistically significant. Demographic variables have weak or negligible correlations with self-sufficiency, and none of these demographic variables are statistically significant predictors of self-

sufficiency in this analysis. The lack of strong relationships is surprising, but results could differ with a larger population once additional families have been served through the program.

Regression Results

The researcher ran initial regressions on each data set from the survey tools, with the SSRS surveys being run separately. Table 7 reports data from the SSRS was taken from eleven categories measuring self-sufficiency that ultimately reported families' average rate of change from the beginning to the end of their participation in the program to determine if families had a positive or negative impact on their overall score through their participation. Table 8 reports regression results from SPDAT need intensity information collected across twenty categories to get an average rate of change from families, and the final regression table combined the family scores from both tests for one rate of change score per family and analyzed those results against the other independent variables.

The Table 7 regression indicated that the number of months and the size of the family do not significantly predict the dependent variable of self-sufficiency, with coefficients of -0.035 and -0.079, respectively, and p-values of 0.193 and 0.128, both above the conventional 0.05 significance level. Similarly, demographic factors such as being Black/African American, Hispanic, or female do not show statistically significant associations ($p = 0.446, 0.824, \text{ and } 0.910$, respectively). The specified head of household age categories (25-34, 35-44, 45-54, 55-64) also do not demonstrate significance. The model's overall fit appears limited ($r = 0.193$), suggesting that only 19.3% of the variance

Table 6*Correlations for Study Variables*

Variable	Self-Sufficiency	Housing	Parent Employment	Number of Months	HOH Race	HOH Ethnicity	HOH Gender	HOH Age Group	People in Family
1. Self-Sufficiency	—								
2. Housing	0.704*** < .001	—							
3. Parent Employment	0.500*** < .001	0.338** 0.008	—						
4. Number of Months	-0.201 0.121	-0.023 0.861	-0.262* 0.043	—					
5. HOH Race	0.018 0.888	-0.108 0.407	0.067 0.609	-0.166 0.200	—				
6. HOH Ethnicity	-0.039 0.764	0.029 0.826	0.104 0.428	-0.107 0.410	-0.159 0.220	—			
7. HOH Gender	0.053 0.683	-0.090 0.488	0.055 0.677	-0.155 0.233	0.174 0.181	-0.073 0.578	—		
8. HOH Age Group	-0.066 0.613	0.060 0.645	-0.291* 0.024	0.268* 0.037	-0.088 0.498	-0.061 0.639	0.024 0.853	—	
9. People in Family	-0.162 0.212	-0.007 0.955	-0.199 0.127	0.021 0.873	0.084 0.520	0.041 0.753	0.024 0.854	-0.015 0.909	—

* p < .05, ** p < .01, *** p < .001

in the dependent variable is explained by the included variables. Given the lack of statistical significance and the modest explanatory power of the model, the results suggest a need for further testing with a larger data set, when available.

Table 7

Regression of Number of Months in Stabilization Program on SSRS Self-Sufficiency

Variable	B	SE (B)	95% CI		t	p
			LL	UL		
Number of Months	-0.035	0.026	-0.088	0.018	-1.318	0.193
People in Family	-0.079	0.051	-0.181	0.023	-1.549	0.128
Black/African American ^a	0.367	0.478	-0.418	0.397	0.768	0.446
Hispanic ^b	0.066	0.297	-0.530	0.663	0.223	0.824
Female ^c	0.024	0.207	-0.393	0.440	0.113	0.910
25-34	0.627	0.428	-0.232	1.486	1.465	0.149
35-44	0.354	0.451	-0.551	1.260	0.786	0.436
45-54	0.364	0.500	-0.641	1.368	0.727	0.471
55-64	0.333	0.681	-1.034	1.701	0.489	0.627
Constant	0.377	0.508			0.743	0.461
R	0.439					
R ²	0.193					
F	1.218					
df	9					

Note. N = 61. We examined the impact of the number of months spent in the Stabilization program on reported self-sufficiency scores on the SSRS form used for family check-ins, factoring in demographic variables.

^a White = 0, Black/African American = 1. ^b Non-Hispanic = 0, Hispanic = 1. ^c Male = 0, Female = 1

The SPDAT table (see Table 8) included interesting statistical data, including how the number of months variable, with a negative coefficient of -0.063 and a significant p-value of 0.036, supports that as the number of months increases, there is a statistically

Table 8*Regression of Number of Months in Stabilization Program on SPDAT Self-Sufficiency*

Variable	<i>B</i>	<i>SE (B)</i>	95% CI		<i>t</i>	<i>p</i>
			<i>LL</i>	<i>UL</i>		
Number of Months	-0.063	0.029	-0.121	-0.004	-2.183	0.036*
People in Family	0.007	0.037	-0.069	0.083	0.177	0.860
Black/African American ^a	-0.075	0.158	-0.397	0.246	-0.476	0.637
Hispanic ^b	-0.297	0.266	-0.837	0.242	-1.118	0.271
Female ^c	0.016	0.165	-0.318	0.350	0.097	0.923
25-34	-0.285	0.405	-1.105	-0.536	-0.704	0.486
35-44	-0.256	0.399	-1.065	0.553	-0.641	0.526
45-54	-0.034	0.437	-0.921	0.852	-0.078	0.938
55-64	-0.180	0.666	-1.531	1.172	-0.270	0.789
Constant	1.327	0.530			2.503	0.017*
<i>R</i>	0.416					
<i>R</i> ²	0.173					
<i>F</i>	0.838					
<i>df</i>	9					

Note. *N* = 46. We examined the impact of the number of months spent in the Stabilization program on reported self-sufficiency scores on the SPDAT form used for family check-ins, factoring in demographic variables.

^a White = 0, Black/African American = 1. ^b Non-Hispanic = 0, Hispanic = 1. ^c Male = 0, Female = 1

* *p* < .05, ** *p* < .01, *** *p* < .001

significant decrease in self-sufficiency scores. However, this represents a small population of 46 families as opposed to the 61 families represented with the SSRS form, so additional research with more participants is recommended. With a coefficient of 0.007 and p-value of 0.860, the number of people in the family did not reflect any significance in terms of self-sufficiency over time. Similarly, the coefficients for other demographic variables such as race, ethnicity, gender, and age groups (25-34, 35-44, 45-

54, 55-64) did not have a statistically significant impact on the family self-sufficiency scores, as their p-values are greater than the conventional significance level of 0.05 ($p = 0.637, 0.271, 0.923, 0.486, 0.526, 0.938, \text{ and } 0.789$, respectively). It is unclear whether these demographic variables are not statistically significant due to their impact actually being insignificant, limited population size, or other factors that were not included in the research. The constant reported a significant p-value of 0.017, which signifies that the intercept significantly differs from zero for this regression. It should also be noted that with the total number of data points reflecting fewer families ($N = 46$) than those who completed the SPDAT assessment ($N = 61$), it is more challenging to create conclusions of self-sufficiency when not all families completed both assessments. However, as the SPDAT measures the intensity of the need and the SSRS captures a more holistic perspective of the family's individual needs to create and work towards goals, both have provided additional information on program impact.

The researcher expected Table 9 to be more indicative of family progress in the Stabilization program due to utilizing rate of change scores from both the SPDAT and SSRS tools and, therefore, capturing as much information regarding family experience as possible. However, with both previous regressions indicating that neither the SPDAT nor SSRS data reflected variables outside of the number of months in the program with any significance, it is not a surprise that the Table 9 regression also did not indicate that any variables were statistically significant.

Table 9

Regression of Number of Months in Stabilization Program on Combined SPDAT and SSRS Self-Sufficiency Rate-of-Change

Variable	<i>B</i>	<i>SE(B)</i>	95% CI		<i>t</i>	<i>p</i>
			<i>LL</i>	<i>UL</i>		
Number of Months	-0.033	0.026	-0.085	0.020	-1.243	0.220
People in Family	-0.055	0.051	-0.157	0.046	-1.090	0.281
Black/African American ^a	0.006	0.201	-0.399	0.410	0.028	0.978
Hispanic ^b	-0.058	0.295	-0.650	0.534	-0.195	0.846
Female ^c	-0.003	0.206	-0.417	0.410	-0.016	0.988
25-34	0.451	0.425	-0.402	1.304	1.061	0.294
35-44	0.237	0.448	-0.663	1.136	0.528	0.600
45-54	0.411	0.497	-0.586	1.409	0.828	0.411
55-64	0.178	0.676	-1.180	1.536	0.264	0.793
Constant	0.484	0.504			0.960	0.342
<i>R</i>	0.322					
<i>R</i> ²	0.103					
<i>F</i>	0.645					
<i>Df</i>	9					

Note. *N* = 61. We examined the impact of the number of months spent in the Stabilization program on combined SPDAT and SSRS self-sufficiency score rates-of-change, factoring in demographic variables.

^a White = 0, Black/African American = 1. ^b Non-Hispanic = 0, Hispanic = 1. ^c Male = 0, Female = 1

The p-value exceeding 0.05 in relation to the Number of Months indicates that the number of months is not statistically significant in predicting family self-sufficiency, which is slightly contradictory to results earlier in this chapter. Additionally, demographic variables, including number of people, race, and ethnicity, reported no

significant coefficient findings over time. The number of people in the family variable did not report any significant findings in terms of self-sufficiency impact over time ($p = -0.055, 0.006, -0.058$). In terms of adults who lead the households, the head of household gender did not indicate any statistically significant results with a p-value of 0.988, which was also true for head of household age groups as well. The HOH age groups all reported p-values greater than 0.05, indicating that the age group was not a considerable factor impacting self-sufficiency over time. Lastly, the constant term possesses a coefficient of 0.484 with a p-value of 0.342, signifying that the intercept is not statistically different from zero. It is unfortunate for the purposes of this study that none of the examined variables are statistically significant predictors of family self-sufficiency. With the SSRS and SPDAT combined scores being analyzed with no significance regarding self-sufficiency, this may indicate that evaluating the forms separately may help the organization determine if they are useful when used together or provide redundant or unnecessary information when evaluating a family's needs and goals.

Summary of Quantitative Findings

The data revealed that the majority of head of household (HOH) participants were 25-34 years old, comprising 46% of the population, with the 35-44 age group representing the other portion at 34%. Additionally, female HOHs were more prevalent in the dataset, making up 63.9% of the sample. There was an even split regarding reported participant race, with 47.5% being Caucasian and 52.4% being African American, although there was a greater difference in represented ethnicity, with a majority being non-Hispanic (85%) compared to Hispanic (14.7%). The quantitative data also provided additional information about family composition, including a higher number of double-

parent households (57%) than single-parent households (42.6%). Most of the participating families had between three and five members, with four-member families being the most common (37.7%). The most common length of time spent in the Stabilization program was 12-14 months, indicating that families needed an extended period to work towards achieving self-sufficiency.

From a statistical standpoint, distribution densities were used to assess the relationship between self-sufficiency and two key pillars - employment and housing – which showed that even families with employment still faced challenges in securing and maintaining reliable housing, emphasizing the importance of both regarding self-sufficiency. Correlation analysis revealed strong positive correlations between self-sufficiency and housing ($r = 0.704$) and self-sufficiency and parent employment ($r = 0.5$). The correlation between self-sufficiency and the number of months spent in the program was negative ($r = -0.201$), which suggested that as families spent greater lengths of time in the Stabilization program, self-sufficiency tended to decrease. While demographic variables were considered, they had weak correlations with self-sufficiency and did not provide additional insight into the relationship between the independent and dependent variables. However, it is important to note that the smaller population size limits the conclusions that can be drawn about the Stabilization population at the present time. Three regression tables were analyzed, but only the Number of Months in the Program variable indicated statistical significance.

In summary, the data highlights that housing and employment are critical factors in the self-sufficiency of families transitioning from homelessness. It also shows that while the program is beneficial to families, there can also be negative effects on self-

sufficiency if families spend too long in the program. Demographic variables did not indicate significance to the tested variables, which could be reflective of their low impact on self-sufficiency over time, the small population size, or untested variables not included in this study. While these findings are limited, they provide valuable insights for improvements related to family data collection related to the program and suggest that housing and employment support for homeless families seeking self-sufficiency will continue to be beneficial.

Qualitative Findings

For the qualitative portion of the research, a case study analyzing one family's experience was included by reviewing an exit interview conducted years prior by FPB staff. One interview was selected from eight available audio recordings based on detail and length of the interview. All audio interviews, including the one featured in the study, were conducted and recorded by FPB staff.

To protect participant information, the selected interviewee is assigned the pseudonym "David", based on the biblical character who overcame adversity. The information from David's exit interview case study is included in the research study to provide valuable insights into families' experiences participating in a Stabilization program designed to address housing needs, teach essential life skills, and support families in achieving self-sufficiency. David's story serves as a poignant example of the challenges faced by families who have experienced homelessness and the transformational journey they embark on with the assistance of such programs.

David's Family Story

David is an outgoing individual with a sense of humor and love for his 12-year-old son, and like other families, they enjoy spending time together and visiting local attractions like FunSpot theme park. However, the COVID-19 pandemic and personal circumstances compounded upon one another, which caused David and his son to go through a series of difficulties that led them to become homeless after living in an apartment. While David did not share all the circumstances that led to losing the apartment, he did explain that he tried to utilize local assistance resources and communicate with his landlord. However, it was not enough and David's family was asked to vacate the apartment. Unfortunately, in Merritt Island, Florida, where he lived, he was unable to find another affordable apartment, so his family ended up spending three months couch-surfing and living out of their car around the Melbourne and Cocoa areas of Brevard County. David was able to call 211 Brevard, which is a 24/7 community hotline that provides immediate assistance and connects people to community resources during a time of need. One of those community resources was a local organization that paid for David's family to stay in a local hotel for a brief time during the pandemic times of 2021 to give them a more stable shelter than staying in their vehicle. David shared how grateful he was for the hotel room and the hot meals cooked and delivered to the hotel by church volunteers so that David could focus on taking his son to school, working, and creating a self-sufficiency plan.

Prior to the pandemic, FPB offered a Rotational Shelter, also known as the Interfaith Hospitality Network, where they would partner with congregations to host families at their places of worship. However, the pandemic made it impossible to utilize those resources so FPB offered families shelter in local hotels, which was similar to the

Rotational Shelter model with volunteer meals and case management. It was common during the pandemic for organizations like FPB to have COVID-related shelter funds, which were largely used for sheltering families in local hotels. It is unclear in David's retelling of his experience if the assistance with the short-term hotel shelter was only through FPB or if David had assistance from other organizations utilizing the same model during the pandemic.

Once financial support ran out for the hotel room, David's family found a shelter that allowed them to stay, but it was not a long-term solution that would help them become self-sufficient. Unfortunately, Brevard County in Florida lacks emergency shelters for families and instead offers them shelters that require an application, which can often take additional time while a family has nowhere else to go, or transition programs run by nonprofits. Interestingly, the geography of Brevard County shows that these shelters and programs are available more so on the northern and southern ends of the County, and this can be a concern for families that lack transportation or the resources to utilize the public transportation system to receive services.

While at a shelter, David had his first conversations about the importance of budgeting and recognized that their current lifestyle of eating out was quickly eating through their daily funds and would not allow the family to create any sort of savings. However, for families experiencing homelessness, it is common for them to patronize local fast-food restaurants or other eateries since their living situations may not provide access to a kitchen for meal preparation. Resources like community halls and libraries were also closed due to the COVID-19 pandemic. Since these buildings were

inaccessible, David's family had to run their car all night for air conditioning during the summer months, which would require additional gas and funds for visits to gas stations.

After seven months of living in a hotel room and then a shelter, David connected with a local volunteer and advocate for families who were experiencing homelessness, and she was able to connect him with Family Promise of Brevard. An FPB staff member made contact with David on January 12, 2021, and his family entered the FPB shelter the next day. This is a typical turnaround time for FPB as their process includes having a potential client call or submit a request for assistance online, and the intake department may take up to 48 hours to respond. However, shelter entry times can vary since families have to wait for space to become available if the shelter is full. Each family enters FPB at various levels of stability and self-sufficiency and can require resources along their journey, which is determined by the staff. The first part of the family's journey was in the Emergency Shelter program of FPB, where the primary focus is identifying housing for the client. Once FPB staff secured housing for David's family and got them settled in, they were able to focus on other goals and plan steps to get there.

In his interview, David shared how he and his son built a relationship with FPB's Stabilization Coordinator, who served as their case manager and primary FPB contact during the time when they transitioned from Emergency Shelter to Stabilization. This relationship was built over time as David and the Coordinator met regularly, sometimes once a week or more, to discuss his progress, celebrate achievements, and set goals for the next step in David's journey. He credits the Stabilization Coordinator with being a turning point in his journey to self-sufficiency and has had nothing but glowing remarks about his conduct and professionalism. Without people like the coordinator investing his

time and agency resources into David and his family, David believed his path could have been quite different with an increased likelihood of living in his car and having limited options regarding his future.

Thankfully for David's family, he was provided opportunities at Family Promise of Brevard and people, including staff members, who believed in his ability to become self-sufficient. Those people also modeled for David how trust was essential for his growth and success in the program. Staff members, particularly the Stabilization Coordinator, took time to understand the circumstances that brought David and his family to FPB, as well as assist him in articulating the goals he wanted for himself and his family. Unfortunately, David had experienced relationships with low levels of trust with people in his life before, and he was not initially excited about the idea of trusting unfamiliar faces around him. Before coming to FPB, he had experienced being the victim of theft, where his cash and belongings were taken by an individual he trusted, as well as others he did not know while being homeless.

Steps for Success. Upon entering the Stabilization program at 45 years old, David worked with the coordinator to create a list of prioritized goals that would be his guide map to self-sufficiency, including personal and program goals. One of David's personal goals was to save enough money to put new tires on the family vehicle. He also wanted to leave FPB housing sooner rather than later. While rental opportunities became available when the family was in the program, they were either too expensive, not in a safe area, or had requirements like a certain credit score that ultimately were not a great fit for David and his son. He also needed to learn how to strengthen his communication skills so he

could advocate for himself and his son, especially with his employer and potential landlords.

The Stabilization program includes components built around goals for self-sufficiency and time is spent with each family ensuring they understand the program expectations and how these components will benefit their present and future. David was required to complete the Keys to Good Tenancy, a curriculum created by the National Family Promise organization and the National Association of Realtors, to gain the knowledge and skills needed to be good tenants as they transition to stability. He also worked through landlord mediation, family wellness, and resource brokerage sessions to focus on long-term solutions to issues that can occur during or even after families have exited the Stabilization program. For David, these sessions led him to understand potential pitfalls in renting and connect to community resources like counseling for his son and rental assistance. FPB actually includes some funding for rental assistance, but the level of funding varies. When a situation arises where additional support is needed, FPB partners with other agencies like Eckerd Connects, North Brevard Charities, Catholic charities, local sharing centers, and others to provide rental assistance to families.

Financial literacy was also a goal of the Stabilization program, and for David's family, this goal included going beyond the basics of saving money and having an emergency plan. His experience included learning how to create family savings plans for each family member so David and his son would both be invested in and working towards financial goals. Additionally, the coordinator discussed the value of life insurance, especially since David was his son's sole provider and parent. Once David had

built up a small savings, another milestone in self-sufficiency was opening a secured credit card to build credit. For families transitioning from homelessness, having the opportunity to build their credit score can be life-changing since many rental units, mortgage lenders, and auto companies will use credit scores and history to make lending decisions. By the time his family exited the Stabilization program after 14 months, they could transition into an affordable rental unit without requiring an ongoing housing subsidy, which speaks to the employment and valuable life skills David developed prior to exiting the program.

Day-to-Day Progress. Achieving these goals and meeting program expectations did not happen without considerable effort from David and his son, as well as structure and accountability from the Stabilization Coordinator. Families interact with staff and volunteers on a daily basis when in the Shelter program and meet weekly with a case manager. While they have access to the staff and volunteers when in the Stabilization program, families that have made progress towards independence primarily work with the coordinator on case management and working towards their goals. During the week, families have schedule expectations to ensure time is well-spent. Adults are expected to spend every day working on their case plan, typically utilizing resources like libraries or local career and employment agencies to meet goals. This can also be time spent working or interviewing for employment to work towards self-sufficiency goals.

FPB's resource center serves as both a resource for families to connect to community resources and the official pick up and drop off location for the school bus. Children are expected to be in school or daycare to ensure the adults can focus on meeting their goals in a timely manner without distractions. David's son attended a local

public school while in the Stabilization program but was transferred to an alternative school after being involved in an incident and being subsequently expelled. After being referred for counseling, David began to see positive behavioral changes in his son. David's son even became involved in extracurricular activities, which gave him fulfillment and additional opportunities beyond the school day to engage in peer interactions. After school, families pick up their children and catch the shuttle provided to a local church where families enjoy dinner together, and the process repeats each weekday. Saturdays are considered family days, and FPB welcomes families to spend their entire day at the local church, visit a nearby beach, or utilize complimentary passes to the Brevard Zoo. Families can choose any activity, within reason, as long as it does not conflict with their case plan. This time is meant to strengthen the familial bond, and for David's family, this time was instrumental in developing the relationship David had with his son while they enjoyed time together.

Sundays are case-focused days for families. On Sundays, families visit the resource center and meet with the coordinator, where the main focus is on three goals: resolve a family's housing situation, create a budget by reviewing the previous week's receipts, and save as much money as possible for the savings plan. For some families, resolving a housing situation may be finding them a different rental option if their current unit is unavailable, while for others, it may include navigating a challenging situation with a landlord. Reviewing receipts weekly allowed David to reflect on his week's spending and create a plan for the next week that proactively considered his expected income and expenses.

Personal Growth in the Stabilization Program. As David progressed in the Stabilization program, he saw changes in himself and his son, all of which he believed were for the better. Those changes included creating and managing a household budget that would meet both the family's day-to-day needs while putting small amounts of money away in reserves for long-term needs and goals. David had never had a personal budget before, but as he worked with the Coordinator, David was able to organize his current finances, expected expenses, and potential income sources, which were all displayed on the family's refrigerator. The created budget was used as both a motivation tool and a talking point for David's family since they would view the budget daily and understand their financial situation. They could also see physical proof that their situation was improving over time as the amount in savings slowly grew larger than the amount in expenses. Budgeting did not just help David but was also a fantastic opportunity for David's son to learn financial literacy skills and understand the difference between wants and needs. David fondly recalled his son being excited when, after weeks of saving, they were able to go to Chuck-E-Cheese after he had felt like an unsuccessful parent for not being able to afford to take him before.

Just as David experienced changes in his life through the program, he also saw changes in his son. In his interview, David shared how impressed he was with his son's level of maturity as they transitioned from being homeless. David noted that while his son did not put him down as a parent or belittle his efforts for change, he was initially confused about all the changes they were making in their life. However, the family discussed the circumstances that brought them to FPB and how their life could have gone if they had not connected with the community member who advocated for FPB and the

Stabilization program. After the discussion and seeing firsthand the amount of effort and discipline being made to change their trajectory, David's son willingly supported his father's efforts to make changes that would hopefully lead to positive outcomes. In the two years since they had been homeless and living in a shelter to transitioning out of the Stabilization program, David felt as if his son had gained knowledge in many of the areas he did, including financial literacy, self-discipline, and trust. However, he also gained another important aspect – a role model in his father as he saw him be humble and accept help while being dedicated to making changes for his family.

The Value of Relationships. Not only did the relationship between David and his son improve, but they also built trust with FPB staff members. The researcher found it heartwarming that, when asked about the significance of FPB and the Stabilization program, David spoke about the people rather than the program because the people made all the difference to him. To David, the FPB staff members genuinely cared about his family on a personal level and not simply because they were clients. He felt as if all the staff that came to mind showed a balance of compassion and accountability, which meant they would support families who wanted to work to make a change while not letting families remain stagnant or provide endless excuses rather than progress. It was not just the understanding that the staff would be there as families navigated their self-sufficiency journey but also the encouragement to develop confidence and trust in their own abilities as they gained more independence. Besides long-term self-sufficiency for families, FPB also hopes that families that can break the cycle of homelessness invest back into their communities to uplift others.

Breaking the Cycle in Brevard

Families can experience homelessness as part of an ongoing cycle due in part to being a victim (either of an individual or circumstance), benefiting from handouts, and then depending on others, and thus, the cycle continues. When parents are unable to break from the homeless cycle to become self-sufficient, it becomes harder for their children to become self-sufficient as they get older. Societal challenges like poverty and homelessness are not limited to one generation, and they can be affected by other factors in a community that can compound on a family's challenging situation rather quickly. Brevard County, where David's family and FPB are both located, has been increasing its average income and number of jobs in the county, and yet the cost of housing, both to own or rent, and the number of students in school qualifying for and utilizing the free and reduced lunch programs continue to increase. The County also ranges from 28% to 64% of families in zip codes across the community reporting as housing burdened, which is where families spend 30% or more of their income on housing and utility costs for daily living. Each year, information is gathered from families and then organized by zip codes so public administrators, nonprofit directors, policymakers, and other interested parties can get a snapshot of the community's needs and compare data to data collected in previous years. This information is important to David's family and their experience at FPB because FPB chose to place its roots in an area of the community with high need, especially regarding housing and self-sufficiency. By teaching David's family important skills like budgeting, healthy eating, and even interview practice, they were able to make progress toward self-sufficiency and break the cycle of homelessness.

Breaking this cycle does not mean that David's family has or will have a smooth journey moving forward. Toward the end of his interview, David recognized that while

his time in the Stabilization program taught him and set him up for success, there would always be temptations and obstacles along the way. Additionally, he and the Stabilization Coordinator acknowledged that while he learned more fiscal management skills than when he had entered the program, he would need to work regularly to continue improving these skills. However, David explained in his exit interview that no challenge he faced in the future would take away the skills he learned and the personal growth he and his son had throughout their time in the program that gave them increased self-confidence and a stronger relationship of trusting one another. Before the Stabilization program, David believed that problems would pile on like waves crashing on the shore. After participating in the program, David recognizes that life's challenges are an opportunity for him to rise to the occasion and prove repeatedly that he is capable of more than others around him had thought possible.

FPB staff makes an effort to keep in contact with families that have successfully exited the Stabilization program. However, they do not have the capacity with the current staffing levels to build stronger connections. It should also be noted that families also have half of the responsibility for communicating if they wish to continue a relationship with FPB, and the level of communication, if any, varies by family, with most families not keeping in contact with the organization. The Stabilization Coordinator has maintained some connection with David's family since they graduated in May 2022 with a few phone calls. Families that have graduated from the program are also invited to FPB events, and David's family has attended several events. Most recently, in November 2023, David spoke with the Stabilization Coordinator at an FPB event and shared that his family was still doing well and continuing to rent in the city of Cocoa.

Commonalities Among Exit Interviews

While the Stabilization Coordinator captured eight available exit interviews, David's family's interview was selected due to not only providing greater detail about the program's impact on their lives over time but also included common themes found in all the other recorded exit interviews. These common themes included the importance of relationships, stability, and skill development.

While the impact of relationship-building has been discussed earlier in the chapter, it is worth noting that each family comes with its own relationship dynamic and circumstances that can impact the relationships they can build within the program. The interviewees shared how previous relationships had led to instances of domestic violence, mistrust among friends, and selection of friends who could be bad influences in their lives. However, with the accountability and positive role modeling within the Stabilization program, families initially build a relationship with the Stabilization Coordinator that, as remarked by all families, was a turning point in their lives. Since his role focuses on supporting families' growth and progress towards goals, it makes sense that families first build a relationship with him and then interact more with other FPB staff, as needed. After all, the Stabilization Coordinator remains the case manager and primary point of contact for all Stabilization program participants. Therefore, it can be critical in a family's journey that the coordinator sets the tone and, as noted by David, models how a relationship can be an asset rather than a liability.

These relationship changes do not just occur among family members and staff but also among parents and children within the family unit. As David shared his story, he noted the impact that program participation had on him and his son in terms of how they

understood one another more and how their actions could affect the other person. Their time together was productive, and David believed that creating goals with his son ensured that he was also invested in their success. Parents still must take an authority role within the family unit to ensure appropriate decision-making. For families with older children, David reflected that children may have the capacity and maturity to understand the family's circumstances and would find value in actively participating in the self-sufficiency journey.

Stability was another common theme among exit interviews, and this was prevalent in David's story. From sharing how the family transitioned from apartment housing to a hotel, shelter, and living out of their vehicle before coming to FPB, David appreciated the clear expectations and structured support that created stability. The program's structure also led to daily and family routines, which set the foundation for healthier living and even better mental health. In the zip code where FPB is located, about 20% of residents reported having at least fourteen poor mental health days, and FPB staff actively works to ensure factors like stability and support are in place to lessen those statistics while connecting families, when needed, to community resources. David notes that the stability he found within the Stabilization program led him to secure housing and employment to meet their daily needs, which was key to exiting the program and living independently. Skill development was supported by FPB staff, which included interview skills, parenting, financial literacy, and even tutoring for David's son. Learning skill development tools made David feel and become both a better parent and employee. David shared with appreciation how FPB staff focused not only on housing and employment goals but also on family personal goals and celebrations upon milestone

achievements. While these actions can be seen as potentially small and insignificant, emotional and mental connections can go a long way in supporting families working towards self-sufficiency.

Summary of Qualitative Findings

The qualitative portion of the research shared the case study findings from David and his family as they experienced the Stabilization program and focused on personal goals leading to self-sufficiency. Before finding FPB, David and his family experienced eviction, which can be common among families experiencing homelessness, and this housing instability led them to seek out emergency shelters and live out of their vehicle before coming to FPB. While in the program, the family's progress towards self-sufficiency was monitored and supported by the Stabilization Coordinator, who serves as both the case manager and primary contact for all Stabilization participants. While David's story focused on the growth he and his son experienced, he did not point out areas of growth for the Stabilization program or anything he would change. It is unclear whether he did not have any suggestions or simply chose to highlight the positive impact he experienced through program participation, as did the other interview participants.

Family Promise of Brevard chose to build its headquarters in the zip code of Brevard County, with the highest poverty and other related statistics relevant to family stability and success. Through their Stabilization program, they are able to serve families in their community by connecting to community resources, learning life skills, securing adequate employment, and achieving self-sufficiency. While in this program, David shared how learning life skills like budgeting helped him become a more independent adult and a better role model for his son. Participating in the Stabilization program

allowed David to focus on providing for his son, ensuring he got to school daily and on time, and creating a plan for their future while in a stable environment. As David's son matured and learned more about fiscal responsibility and healthy eating, David experienced his own growth in learning to trust others, having faith in himself, and the importance of being committed to making positive changes in his life, one step at a time. To David, Family Promise of Brevard represented not just a program but a supportive network of people who offered unwavering guidance, instilling confidence and empowerment. When asked about the meaning of home, David emphasized "family" and the sense of welcome, safety, and growth that accompanied his experience within the Stabilization program. Based on the case study and input from the Stabilization Coordinator, it is clear that regardless of families' numerical scores towards self-sufficiency, families experience emotional and mental growth and self-development while participating in the program. The program's ultimate goal is self-sufficiency, but it is important to remember that growth in less tangible areas of life can sometimes be just as impactful for a family's future as employment and housing.

Common themes emerged from the exit interviews which were also highlighted in David's case study, including the importance of relationships, stability, and life skills. Families experiencing homelessness can face challenges in building and maintaining healthy relationships, and it was noted from participants how the Stabilization Coordinator not only set the tone for building new relationships but also modeled positive and healthy accountability. This growth in understanding, appreciating, and building relationships extended beyond adults within the program to also impact families personally, as many families experienced stronger and healthier relationships among

family members. These positive relationships helped families celebrate achievements while working together to continue progressing in the program. Beyond concrete achievements, the mental and emotional aspects of the journey held profound meaning, inspiring personal growth and a sense of empowerment among participants. Life skills like learning to write and speak as a professional helped David communicate better with potential landlords and his employer. He also felt that being a better communicator gave him more self-confidence as he could express himself more articulately. This self-confidence, to David, was invaluable in his growth and progress towards self-sufficiency since he recognized he would continue to have challenges to face even after transitioning from the program and being more self-confident helped him to realize he could tackle these challenges independently.

Conclusion

The qualitative and quantitative data showed that while the Stabilization program benefits families experiencing homelessness, the impact truly is different for each family, and the current measures can only capture certain aspects of progress. As the length of time spent in the program was the independent variable in the study, the researcher wanted to determine if longer or shorter periods of time impacted self-sufficiency. The research found that families that spend less than 12 months in the program have greater levels of self-sufficiency than families that spend more than 15 months in the program. However, the quantitative data cannot measure individual family challenges that can occur even as families are participating in the program that may be outside their control, such as the loss of employment or relational issues. Some families who spent longer periods of time in the program had lower self-sufficiency levels upon program entry that

needed more time than other families, including some of those who stayed for a shorter period. Based on the quantitative data, it was most common that the Stabilization program led to slightly improved or similar scores across the categories when compared to their intake scores. While none of the participating families showed overwhelmingly positive changes in their quantitative scores, the data does support that participating in the Stabilization program assists families in maintaining or slightly improving, rather than decreasing, their current level of self-sufficiency.

From a demographic perspective, the quantitative data also revealed that the majority of head of household participants were in the age group of 25-34 years, with most being female and non-Hispanic. An even racial distribution indicated that race did not impact the reported self-sufficiency within this study. Families with 3-5 members were most common, and two-parent households were more representative of the population than single-parent households, although neither variable significantly impacted self-sufficiency over time. Based on the literature review and previous research, it was unsurprising that employment and housing significantly impact self-sufficiency. However, even adults with employment can still struggle with self-sufficiency, especially in light of the COVID-19 pandemic as housing costs have increased and affordable housing units have decreased.

The research's qualitative data provided a case study from a family that had participated in the Stabilization program for 14 months and ultimately was able to transition to a rental unit without requiring an ongoing housing subsidy. David's family's experience highlighted the common themes in exit interviews from families graduating from the program, including invaluable stability, skill development, and relationships.

Family Promise of Brevard and its staff, primarily its Stabilization Coordinator, provide the structure and accountability necessary for families to focus and make progress on becoming self-sufficient. This includes a weekly schedule with meetings to reflect on progress, brainstorm solutions for current or potential future challenges, and create steps for the next set of personal and family goals. The structure provides stability to families like David's so they can build a schedule and develop healthy habits with the support of staff and volunteers if needed.

Skill development is an integral part of the Stabilization program, and adults are expected to progress with various skills and learning opportunities during the day if and when they are not at work. These skills include financial literacy, interpersonal skills, and being a good tenant. After participating in the program, David was a stronger communicator who was able to advocate for himself and his family. The family was also able to make considerable progress towards creating a stable budget, begin to save towards long-term financial goals, and even open a secured credit card to build up David's credit score. David felt that developing these skills made him a more self-sufficient adult and a more responsible parent and role model for his son.

To David, the change in how he approached, built, and managed relationships was one of the most impactful yet intangible components of the Stabilization program. Working with the Stabilization Coordinator helped David understand his struggles with relationships that had been broken due to previous issues and also provided him the opportunity to appreciate the positive relationships they could build over time. David also actively worked on his relationship with his son and believes that FPB staff encouraging,

supporting, and believing in him made just as much, if not more, of a difference as the steps he took throughout the program to work towards self-sufficiency.

Chapter VI

DISCUSSION AND CONCLUSION

This study explored the impact of time spent in Family Promise of Brevard's Stabilization program on families experiencing and transitioning from homelessness as they worked towards self-sufficiency. In addition to analyzing family progress data during their time in the program, demographic information was considered to identify if information about the composition and characteristics of families had any impact on their program experience and journey toward self-sufficiency. Qualitative information from a previously recorded audio interview provided a narrative and more personal perspective on the program's overall impact on self-sufficiency, which could not be gleaned from secondary data alone. The significant findings of this research for self-sufficiency of families who had participated in Family Promise of Brevard's Stabilization program are as follows:

- A) Families who participate in the program for less than twelve months tend to report higher self-sufficiency levels than those who participate for more than twelve months.
- B) Housing and employment are significant factors that impact family self-sufficiency.

- C) Family demographics, including family size, head of household gender, race, and age did not significantly impact self-sufficiency.
- D) The relationships built between staff and program participants can positively impact family outcomes and the overall program experience. Exit interviews help get a more holistic representation of a family's experience within the program when combined with the quantitative data from SSRS and SPDAT forms.

Quantitative Review

The quantitative data from Family Promise of Brevard was limited in terms of significance that could be drawn from a smaller population. However, data analysis provided useful information to both the researcher and FPB staff, including information that addressed the quantitative research questions and hypotheses.

Hypotheses Discussion

The first hypothesis stated that families that spent longer lengths of time in the Stabilization program would report higher self-sufficiency scores. However, the data indicates that families with longer program participation reported mostly lower self-sufficiency scores. This was surprising to the researcher since even though the literature indicated that between four and seven months was most common in similar programs (Fischer, 2000; Glisson et al., 2001), it was believed that the longer families had access to program and community resources, the greater likelihood that a family would become self-sufficient. Each family experience is different, but the longer families stay in a program without becoming self-sufficient, the greater the amount of resources they utilize, which can cause programs to be less efficient because resources cannot be utilized for more families. Additionally, there could have been unmeasured variables and

exogenous factors influencing the length of time a family spent in the Stabilization program. Variables such as mental illness, substance use disorder, disabilities, or self-confidence, as well as exogenous factors like personal drive or motivation, can influence a family's experience while homeless and may influence the length of time needed to attain self-sufficiency if it is attained at all.

Hypothesis two stated that there would be a difference in self-sufficiency reported by families with greater self-sufficiency reported by two-parent households over time as opposed to single-parent households. While the length of time has shown to have an unexpected negative impact on self-sufficiency, family structure did not impact self-sufficiency outcomes.

Hypotheses three, four, and five focused on family demographics of gender, ethnicity, and age, respectively. There were no significant differences in gender among the head of household in represented families, even though the literature supported that women experiencing homelessness are more likely to be younger, have less education, and earn a lower income than men experiencing homelessness (Phipps et al., 2019; Winetrobe et al., 2017). While the researcher hypothesized that families with a non-Hispanic head of household would report higher self-sufficiency scores than families with a Hispanic head of household, ethnicity was not a significant factor influencing self-sufficiency with longer lengths of time spent in the program. While there are many families with American-born Hispanic members, it stands to reason that for families who immigrated to the United States, a Hispanic head of household could have additional challenges, causing them to require additional time and resources to become self-sufficient, such as their English proficiency and what, if any, cultural feelings or

apprehension exists around seeking assistance. Additionally, families of various races and ethnicities were financially impacted by the instability caused by the COVID-19 pandemic, and housing became even more difficult to secure than it had been before the pandemic. The literature supported that 75% of families experiencing homelessness had African American or Hispanic members, so if ethnicity is not influencing the self-sufficiency of these families, additional research may be beneficial to determine if and how other unmeasured demographic variables could be influencing self-sufficiency over time (Portwood et al., 2015). For example, mental health, substance use, and/or the level of social support are among the demographic variables that could have an impact on self-sufficiency more strongly than demographic variables like race, ethnicity, and gender.

The literature has also supported that age could be a factor when considering self-sufficiency scores over the length of time spent in the program, but the literature was inconclusive on whether younger or older adults are more likely to become self-sufficient. In fact, the literature supports that younger people experiencing homelessness often battle with fewer work opportunities for a sustainable income since they have less work experience, often with fewer benefits, while older adults experiencing homelessness have an increased likelihood of general health issues and even mortality (Dickins et al., 2021; Munoz et al., 2005; Zerger et al., 2008). It was hypothesized that families with a head of household in the 25-34 age range would report more significant gains in the program over time, especially since that age group was neither the youngest nor oldest. Unfortunately, the research data indicated a weak negative relationship between age and self-sufficiency with no other points of significance in statistical tests. Even though the results were not statistically significant, future research utilizing a larger population with

the same trend may show that as the age of program participants increases, self-sufficiency scores decrease.

In regards to hypothesis six, the researcher firmly expected families where the head of household had full-time employment to report higher self-sufficiency scores over time than families with a head of household who had part-time employment. This expectation was grounded in the difficult financial situations families found themselves in after the 2008 housing crisis, where individuals had employment, but the employment did not earn enough to secure a stable living, as well as during the COVID-19 situation where unemployment rose to a range of 14% to 18.5%, depending on race (Falk et al., 2021; NCH, 2009). Many people experiencing homelessness lack reliable work experience, soft skills like interview and communication skills, or transportation to secure full-time employment; therefore, part-time employment is usually more attainable (Acosta & Toro, 2000; Long et al., 2007; Wong & Mason, 2001). However, when individuals are able to secure full-time employment, it is likely that as their income increases, so too does their stability and overall self-sufficiency. As expected with hypothesis six, employment and self-sufficiency had a strong positive correlation over time. This positive correlation highlights the potential benefit of Stabilization program staff in assisting adults in securing reliable full-time employment earlier in the program to mitigate the potential decrease in self-sufficiency that has been shown to occur as families stay longer in the program.

Qualitative Review

While the qualitative data gave a more holistic perspective of the information gleaned from the quantitative analysis, it also provided an answer to the two hypotheses focused on family experience within the program.

Hypotheses Discussion

The first qualitative hypothesis focused on how a family's need for housing brings them to FPB and how families gain greater self-sufficiency, stability, and life skills by participating in the program before exiting. This hypothesis is supported by the qualitative information, as noted in the participant's reflections on his own growth and his family's goal achievements that allowed them to exit the program and be self-sufficient. The previous research has also supported that families experiencing homelessness do seek out transition programs like FPB and its Stabilization program since the lack of affordable housing remains the main reason for homelessness (Timmer et al., 2019). FPB fills a need in the local community by providing the support and resources necessary for families experiencing homelessness to become self-sufficient. Life skills like: 1) financial literacy and budgeting; 2) eating healthy; and 3) parenting are tools families can use on their journey to self-sufficiency and beyond that will impact not only the adults, but serve as early lessons for children as well (Burt & Cohen, 1989; Fischer, 2000; Flohr, 2013). In the narrative, the represented family spoke to the impact that creating and placing a budget on their refrigerator led to greater awareness of finances. It also increased dialogue between family members and created a greater understanding of the self-sufficiency goals and the actions needed to achieve them.

Accountability within the program was also an aspect of the family's stability and journey toward self-sufficiency. David, a single parent of a 12-year-old son and

Stabilization program participant, shared how FPB staff would meet regularly with him to discuss steps towards housing and employment, and these conversations also included progress monitoring of individual goals. There were also celebrations when milestones were met and goals were achieved. Accountability itself helped keep families focused on making progress because meetings were scheduled regularly, and those who would not agree to the program requirements, including meeting frequency, would be released from the program. Therefore, families that remained in the program had the stability of program housing and resources until completion, or their situation changed where they could not meet the requirements and/or chose to leave independently. While the data currently does not distinguish between families who left the program voluntarily and those who were asked to leave due to not meeting expectations or following the rules, the program does have a 15% noncompletion rate. It is important to note that programs like the Stabilization program are not ideal for every family experiencing homelessness, and their circumstances or life choices may be better suited for a different program if and when they decide they are ready to make a change.

The second qualitative hypothesis was that positive relationships are the most significant non-tangible benefit families receive while participating in the Stabilization program. Regarding the exit interview included in this research, it was clear to the researcher that the people at Family Promise of Brevard made the most impact on the participant's life beyond simply assisting him in securing housing and employment so his family could become self-sufficient.

Having positive relationships and trust, no matter a family's self-sufficiency status, is no small thing in today's world where we are more digitally connected than ever

before. However, for families experiencing homelessness, these relationships can be even more impactful since they influence a person's perspective of self-worth and even whether or not a family has a place to spend the night. Even when families are rehomed and work to remain self-sufficient, they could start over with fewer or no relationships if relocation occurs away from their social networks (Toohey et al., 2004). Additionally, if trust relationships had not been built or modeled earlier in a person or family's life experience, then FPB staff may be the first person they could build trust in their life. The literature has also noted that it can be more difficult for children in families experiencing homelessness to build relationships (Adkins et al., 2017; Buckner, 2008).

The interview participant noted that not only had his family's time in the Stabilization program benefited him from a stability and self-sufficiency standpoint, but also that his son was able to view him as a positive role model and build a relationship with FPB staff. The participant also noted how he had built previous relationships with trust, and those relationships became unreliable through a series of unfortunate circumstances. Having committed and understanding FPB staff that build positive relationships with their clients certainly influenced this family's experience in the program and their communication skills and confidence level upon their exit. This is not to say that every family experiencing homelessness is in need of improving their relationships or building trust. However, with both the literature and qualitative information supporting the importance of positive relationships when working towards self-sufficiency, it is an aspect that cannot be overlooked.

Research Challenges

This project had a few challenges, and assumptions were made based on the nature of the organization. The study only focused on families that participated in FPB's transitional housing program. The primary demographics of homeless families were families with children with Heads of Household being either Caucasian or African American. Brevard County is a suburban, coastal area in the central region of Florida, and while it is home to NASA and its space program and engineering and healthcare are two of the largest employment sectors in the county, the county has a widening gap between its upper-class families and families in poverty. It is also important to note that the north end of Brevard County, where Family Promise of Brevard is located, has the lowest economic zip code and the highest concentration of minority residents than any other area of the county. Limiting the research to a program in Brevard County also creates research limitations around the available program participants and conclusions about the program that may be different if the Stabilization program was being executed in a different geographic area like the large urban cities of Miami or Orlando, Florida. Larger geographic areas for research may also include more variety in participant demographics and more significant population size.

Another challenge was the available data. While the organization expected to have more than 70 data points, there were just a few data points shy of the expected number from enrolled that could be used for initial analysis before data cleaning. Upon cleaning and organizing the data, the researcher determined that 60 families had complete and usable data for quantitative analysis. There were also differences in the number of families who completed the first assessment form (SSRS) but not the second form (SPDAT), leading to an even smaller population to use when analyzing data from the

second form. Additionally, the organization is limited in its data collection to families who commit to and attend check-in meetings with the Stabilization Coordinator, and while families who do not complete these meetings are ultimately asked to leave, this information does not capture the experiences of all families.

Since the data being tested and analyzed had already been collected by FPB staff members, further questions and clarification regarding responses could not be asked of families for more information so as to not break confidentiality. Since the research used one-time survey results, non-experimental research results, the project could not capture all of the program's long-term effects for homeless families using the services in the organization. Information is limited to what families share with the FPB staff, and that could include many, but most likely not all, of the program's effects. While the data collection forms allowed for useful quantitative data to be gathered, the forms restrict qualitative data that can also be gathered from families to provide a more holistic perspective, and this is where notes from the Stabilization Coordinator or space provided for families to provide more detailed information may be helpful.

In relation to the available data for the qualitative research, it should be noted that having only audio recordings of the families' post-program interviews was, while helpful in adding a holistic understanding of the numerical data, limiting in terms of being unable to glean additional information from responses. The low quality of the audio recordings made it challenging to discern some words and phrases shared by families or determine any vocal inflection that could have suggested families felt strongly about a particular statement, and having only the audio recordings meant that facial expressions were unable to be noted. Audio recordings of exit interviews were not conducted before 2018,

and not every exit interview was recorded and able to be referenced, hence why the Stabilization Coordinator provided only a few for the purpose of this research, where one was selected for narrative analysis and inclusion in the research. Overall, this was not detrimental to the research as the researcher appreciated having access to qualitative information to understand the program better from the family perspective. However, future research gathering qualitative data may benefit from in-person or virtual interviews that allow for higher-quality audio and facial expressions.

The final and potentially most complex challenge was the unique experience of homeless families. While homelessness or lack of stable housing brought each family to FPB, this study cannot measure the factors that impacted a family's life prior to entering the program or measure their internal character traits that may cause some families to be more successful at self-sufficiency than others, such as motivation. Homelessness affects individuals and families differently, so when information-gathering is limited to a survey, details that can explain or provide insight into circumstances, success, or failure are lost. The quantitative data could be supplemented with the post-program audio recording, but this information was limited compared to the total number of families participating in the Stabilization program. For the sake of a program evaluation, the case study provided a glimpse into the more personal side of family homelessness, although it does not detract from the quantitative data results. As the COVID-19 virus continues to affect communities, the information accessed to provide additional context for this study is limited to January 2020-December 2021 due to the unpredictable nature of the virus and its long-term effects on society, which is another challenge of the research.

Key Assumptions

Assumptions were made based on the organization and the program participants. It was assumed that adults providing information to FPB were being truthful about their circumstances, characteristics, and experiences since it can be difficult to verify self-reported information. FPB staff and the researcher also assumed that every family who entered FPB's program wanted to transition from being homeless to having stable housing and self-sufficiency, as families who do not want or work towards these goals were asked to leave to find a program better suited to them. Additionally, there is an assumption that the program participants would not be negatively affected or harmed due to any conclusions reached with their data. Since program staff conducted the data collection, it was assumed that families communicated using either their native language or their language preference and understood the questions. Regardless of each family's length of time in the program, it is assumed that they used at least one service during their time in the program, whether it be temporary housing on campus, connection with the local employment agency, or another service.

Research Implications and Recommendations

There are five research implications for both Family Promise of Brevard and other organizations that serve people experiencing homelessness with similar transitional programs. Homelessness is a problem that will most likely continue for the foreseeable future, and public administrators, executive directors, and others in the field have the opportunity to utilize research to make informed decisions that not only positively affect their clients but also decrease the number of people experiencing homelessness in their communities.

As shown throughout the research, Family Promise of Brevard is committed to the people it serves, and it is the researcher's opinion that continuing to make changes to the Stabilization program based on the data will only improve family outcomes. Regarding process changes, the researcher recommends making changes to the Stabilization check-in form for efficiency and effectiveness. These changes include using the SSRS form as a baseline rather than utilizing two forms and combining the data while changing the current SSRS form to understand family needs and strengths more specifically. Currently, the form does not have an overall score for self-sufficiency, either as a separate scoring category or a calculated average from the form scores across all categories. Creating this specific measurement would assist families in determining their overall self-sufficiency coming into the program and when they exit the program, which can be difficult to determine when reading individual category scores.

Additionally, the SSRS form categories could be broken down to be more specific to identify family needs. The form could also be adapted to include questions about other potential variables that impact self-sufficiency, such as local support systems and relationships, and even questions that gather more information about the family's experience with homelessness, such as if the family had been homeless multiple times or what types of resources they reached out to or used prior to entering the program. This information would provide FPB staff and others with better insight into the family's experience and level of need. If the form can be completed digitally, the researcher recommends that digital forms incorporate the use of conditional questions or questions that would only ask additional clarifying questions or present clarifying categories if the

initial response showed a need based on specific input to better capture family progress without making the check-in and evaluation process a lengthy process.

From an internal perspective, FPB staff may find it beneficial to create and maintain a database of Stabilization clients similar to what was created for the purpose of this project's data analysis. A database containing all data, averages, and rates of change would allow for regular data analysis to determine program effectiveness and family progress and be an accessible tool for organizational transparency. By incorporating a rate-of-change calculation for each family and category, it could be easier for staff to identify areas of strength and needed growth since those calculations would measure family progress since entering the Stabilization program. Demographic data could also be tracked in the same database using Table 2, which is referenced in the previous chapter, to support analysis and transparency. Organizing all clients in one area can better utilize the available data to understand the program's effectiveness, make quicker, data-based changes, and even include data analysis in grant requests to showcase the necessity and purpose of funds for direct client impact. Additionally, staff would be able to review program progress and family demographic information simultaneously, allowing them to identify how their resources support families of various demographics.

Future research opportunities could include expanding the sample in order to improve the statistical significance of data and analysis for program and policy recommendations, as well as broadening the research scope to include unmeasured variables that could be influencing self-sufficiency. These variables could include, but are not limited to, mental illness, substance use disorder, disabilities, and self-confidence. Additionally, case studies comparing the FPB Stabilization program to similar programs

either within the state of Florida or in similar socioeconomic or geopolitical regions as Brevard County, Florida, may be beneficial to identify key strengths of transition programs and utilize proven processes to improve client outcomes.

Changing how the FPB Stabilization program staff collect information at intake and progress meetings could benefit the families and program implementors. While the two collection forms measure different aspects of family needs, the categories are largely the same, and since fewer families completed the second assessment, it may be more efficient if the forms were condensed to one with more specific category explanations. Not only would one form be less time-consuming for the staff and families to allow for more meaningful conversation during the meetings, but also make data analysis, leading to program changes to be more streamlined. Calculating the rate-of-change the families experienced in each form category was helpful for the research since no singular 'self-sufficiency' category was assigned to determine program impact. Therefore, the researcher recommends adding a self-sufficient overall category to the form for self-reporting purposes to get a more holistic picture from the families' perspective.

Another recommended change to the intake and evaluation forms would be to include additional opportunities to gather qualitative information from families that could be beneficial in regard to understanding the family and potential motivations. Optional qualitative questions that could provide additional and useful information could be as follows:

- 1) What was your family's most recent success?
- 2) What brings you fulfillment and/or joy when thinking about your family?
- 3) How do you best feel appreciated or valued?

From the outside, it can be easy to assume that these questions may be unnecessary since families are currently struggling to have come to FPB, have a desire to be self-sufficient, or at least no longer experiencing homelessness, and families may not be able to identify joy or fulfillment in a difficult situation. However, giving families an opportunity to complete these questions allows staff to better understand their families on a personal level and provide a helpful segway to building a positive relationship. Since the questions are optional, families who do not want to answer them or feel uncomfortable answering them are not compelled to do so. Ideally, even families who initially choose not to answer the questions upon intake may gain more confidence and have better experiences that can be documented on the form to celebrate their growth and success, as well as provide encouragement to FPB staff that their work is impacting more than just the quantitative measures.

In order to gather greater amounts of information consistently, the researcher recommends scheduling audio-recorded exit interviews with each head of household and using a set of structured interview questions each time. The staff member can have flexibility in asking follow-up questions, but by asking each family the same questions, it can be easier to analyze and determine the impacts from a qualitative perspective. Additionally, interviews can be conducted via video conferencing to allow for scheduling flexibility and enhanced audio quality. When collecting data, family responses should be directly inputted to a spreadsheet or other tracking tool so data can be easily referenced and used for statistical analysis. If a tracking tool can be utilized, the researcher also recommends calculating the rate-of-change for each category in order to celebrate specific areas of growth over time with families while also being able to target categories

that have remained stagnant or even seen a decrease in scoring since entering the program. On the SSRS form, the average rate-of-change in all categories was zero, and since that was the form that captured data from all families, it could be useful for FPB staff and families to be able to see what their progress has been over time if FPB staff feels that level of transparency would be helpful to families. It is important to note that each family has a different experience, and FPB staff build different relationships with each family, so staff should have the autonomy to decide terms of data transparency after getting to know each client and whether the rate-of-change information would be helpful.

Program Recommendations

The research has supported the belief that Family Promise of Brevard is making a difference in the lives of local families experiencing homelessness by helping them remain stable or make gains toward self-sufficiency. From the data analysis, the researcher has five recommendations for the Stabilization program to enhance the current offerings and functions to improve outcomes. While the quantitative data did not provide much significance in terms of demographic variables to identify ideal clientele for the organization, it did provide insight into the variables that significantly impact overall self-sufficiency over time – housing and employment. These pillars of self-sufficiency are also already the main focus of the Stabilization program, so the researcher would encourage FPB staff to continue their dedicated work to prioritize family self-sufficiency through the securing of safe and stable housing, as well as employment that provides adequate income to cover daily expenses and support long-term budgeting. This work can also include the classes offered to families, including financial literacy, healthy eating,

communication skills, parenting skills, and more, as identified as areas of need for each family.

The qualitative data highlighted the importance of consistently and continuously investing in relationship-building with Stabilization families. This creates a solid foundation of trust between the FPB staff and families as they work together to achieve goals and milestones toward self-sufficiency. It also fosters communication, honesty, and accountability as they model healthy and positive relationships. The Stabilization Coordinator should continue to meet regularly with clients, and other staff members could follow up with phone calls or emails if in-person visits after the program exit are too taxing on resources. By tracking connection points with families during and after the program, FPB staff can utilize the data with larger samples for long-term program impact. Economic factors in this study had a more significant impact on self-sufficiency than demographic variables, so as FPB continues to focus on these aspects, families will continue to find stability and growth in program participation.

Children's education was also part of the qualitative data that captured more of the children's experience in the program. Since this information comes from parents and can be limited, the Stabilization program could add an additional education aspect for children, parents, and the coordinator to evaluate together to support children in academics and behavior at school, as needed. This could also be an element of self-sufficiency where students can see themselves actively contributing to their family's success in the program when they work hard in school. If staff does not have the time to add this aspect to the program's regular check-ins, an academic evaluation, and goal-

setting could be infused in the parenting skills area where parents are encouraged to support their child's school experience.

Further innovation to the program based on participant and staff feedback, available training and seminars, and current research will only enhance the program as it continues serving families in the community. FPB can utilize exit interviews, staff questionnaires, and even involve the community in stakeholder interviews or roundtable discussions to receive regular feedback on potential changes, as well as brainstorm new ideas that could be implemented over time. By continuing to be a safe haven for families seeking to become self-sufficient and connect families to the network of community resources, the Stabilization program is making a difference in the lives of adults and children in Brevard County.

Contributions to Knowledge

The most interested in this study and the knowledge gained from it was Family Promise of Brevard, as this study allowed them to evaluate their program and its effectiveness and make decisions to further break the cycle of homelessness for families in Brevard County. While the data limitations lessened the project's potential impact, the data analysis and information can be used to improve how FPB collects data from participating families throughout the evaluation process and make program adjustments. Additionally, local organizations and those outside of the local area that serve subgroups of the homeless population were also interested in understanding more about the program and how it specifically meets the needs of those experiencing homelessness. Since each Brevard program is set up and executed differently, but all operate within the Continuum of Care, this project can provide information for identifying if expected program

participation lengths need to be shortened or lengthened or even if a program evaluation of their model serving different clients would be beneficial. With the long-term effects of the COVID-19 pandemic still unknown, this information can prove valuable to organizations being created now and in the future, as they seek ways to address family homelessness that was impacted by the pandemic effectively and as housing affordability and availability become more restrictive.

From a broader perspective, those in policymaking or public administration roles that create policies for or interact with people and families experiencing homelessness can gain a deeper understanding of the characteristics of the current homeless population regarding families. Since Brevard County policy regarding homelessness is limited, this can be an opportunity to educate policymakers on the challenges faced by those working towards self-sufficiency so policies can be created to support their self-sufficiency efforts or organizations with transitional programs. These policies could be county-specific and focus on the community's needs, or they could connect people to the networks and CoC available. Policies based on old data do not help those currently struggling, while current data can inform policies that could directly impact people in need now. Evaluation processes and forms can be updated to better reflect the situations and needs of people experiencing homelessness and provide appropriate information for the decision-making process amongst policymakers and public administrators who may manage homeless programs. There are governmental departments that work to address homelessness, but when they do not have data identifying models that work in particular areas and those that do not work, our society cannot address the issue of self-sufficiency, including the pillars of stable housing and employment, on a larger scale but if researchers can make

the local data more accessible and meaningful, there can be greater impacts made across the nation.

As discussed previously, the research addressing homelessness in families and, in particular, program evaluations for programs addressing family homelessness is sorely lacking. Since there has been a rise in research on homelessness, families are not as well documented when counting the total number of homeless in our nation, and they are just as underrepresented in the literature. The researcher hopes this study provided a respectful and purposeful glimpse into the world of a local organization with a structured programming that, with some recommended changes, could be a model for other programs in areas around the nation.

Conclusion

While the quantitative data was largely inconclusive about the impact that various variables have on self-sufficiency, it was clear that employment and housing had the most significant impact on family self-sufficiency over time while in the Stabilization program. Even though the other variables did not have the same impact, the lack of strong negative results supports the idea that FPB and its Stabilization program provide the resources and support to keep families stable and prevent them from continuing the cycle of homelessness. This type of program continues to be needed in the community as our country continues to struggle with the lack of affordable housing options and the rising cost of living.

The qualitative data shines a light on the less-measurable but just as impactful piece of the Stabilization program: the human element. The client interview information was nothing short of glowing feedback and appreciation of the program and staff's impact

on his life and the life of his family. The program supports the development of family life skills, employment, and important personal areas like relationship-building and trust. The feelings of confidence and self-worth that David shared after working with the staff cannot be measured in quantitative scores or rates-of-change, but a person's mental well-being and faith in themselves and others can work wonders in goal setting, progress, and achievement. The Stabilization program and its implementation staff should be commended for the personal growth they inspire in their clients through their commitment and compassion.

Homelessness is a complex issue, and each family has its own experience as it transitions to self-sufficiency, whether on its own or with the support of an organization like Family Promise of Brevard. It is important to recognize that while this research gives us a glimpse into the experiences of those in the Stabilization program, it cannot shed light on or draw conclusions about every program or experience. It is the researcher's hope that as programs similar to the Stabilization program serve additional families, data can be utilized to draw meaningful conclusions and inform program and policy changes so homelessness can be eradicated. Until that time, transition programs that support families experiencing homelessness will need resources and community support to continue empowering families to build a foundation for a more stable and fulfilling future.

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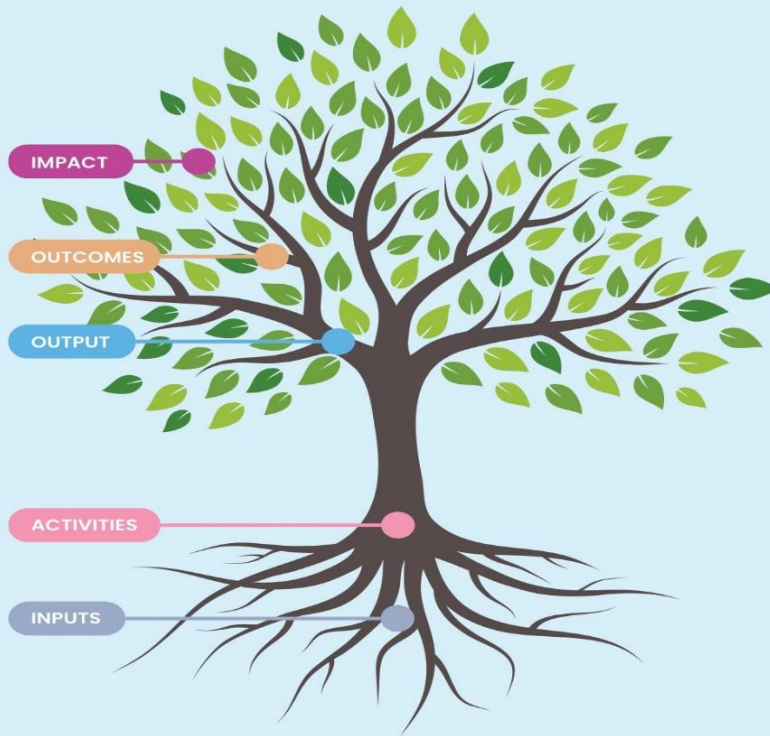
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Appendix A

Family Promise of Brevard Logic Model (Part 1)



HOUSING STABILIZATION LOGIC MODEL



INPUTS

- Service provision by qualified staff in a community setting focused on key assets for stability
- Collaboration with homeless coalition partners, landlords, school district, health, career, childcare, and local community stakeholders
- Technology to track data and progress towards goals
- Funding options, including public, private, and partnership models
- Family input and preferences regarding community based wrap around services

ACTIVITIES

- Assess family strengths, needs, abilities, and preferences
- Develop short term and long term goals to build key assets to stability
- Empower families through the delivery of evidenced based case management focused on tenancy education, financial literacy, resource linkage, and economic mobility.
- Engage with landlords to mitigate negative outcomes
- Elevate opportunities for families through relationships with local stakeholders
- Collect data and track progress on the family's progress towards goals

OUTPUT

- Families who exit shelter will engage in stabilization services for 12 months
- Once transitioned, families will create a comprehensive plan outlining steps towards stability
- Case management, delivered in a step down model from weekly, to bi monthly, to monthly
- Metrics and evaluation criteria to assess the family's progress at 3 month intervals during 12 months

OUTCOMES

- Reduced number of families who re enter of county's coordinated assessment system defined as 'homeless' by HUD
- Enhanced accessibility to housing, health, childcare, education, and careerservices to stabilize the household
- Increased self sufficiency to remain in stable housing
- Decreased acuity and level of service provision over time
- Strengthened relationships between families, service providers, and community stakeholders

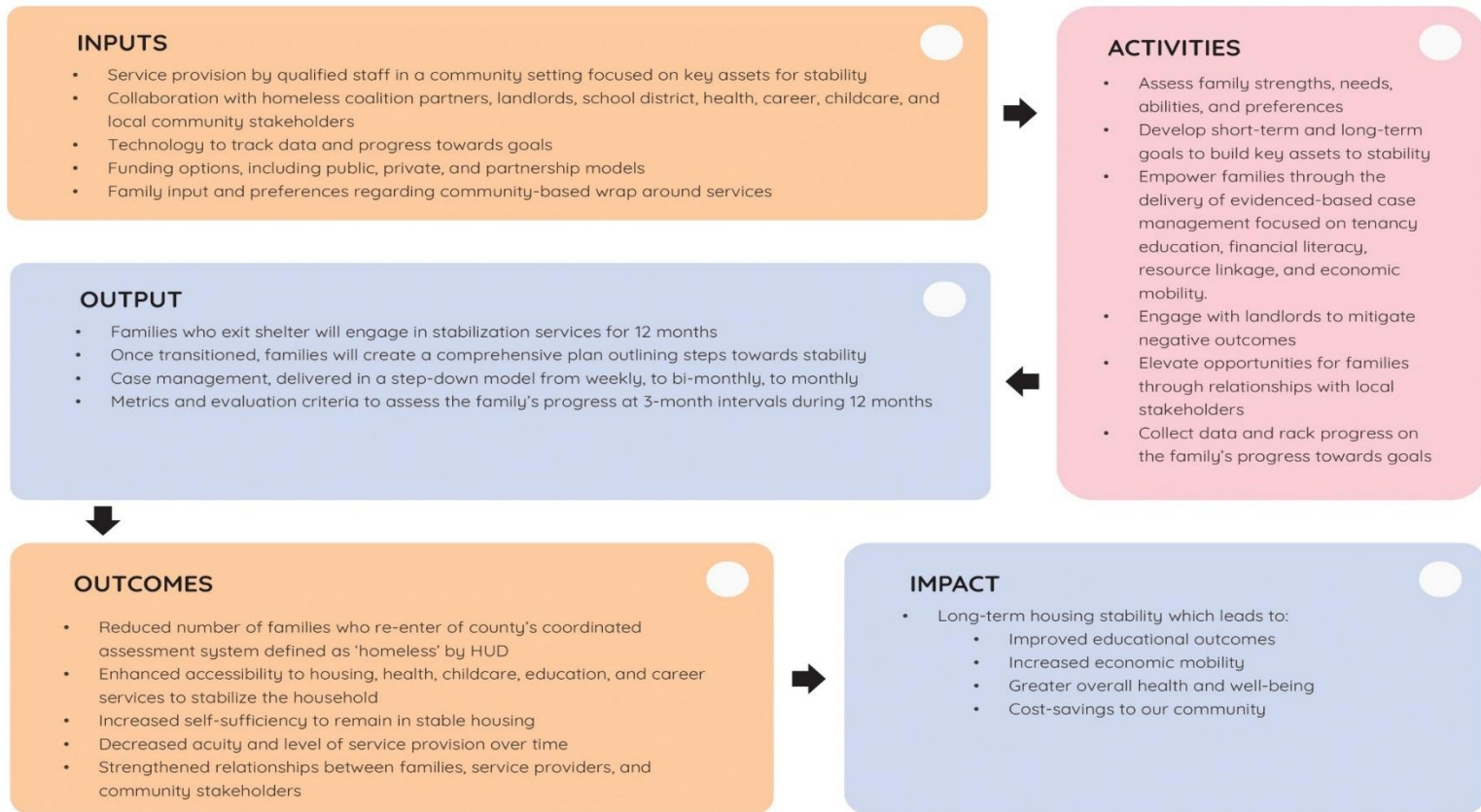
IMPACT

- Long term housing stability which leads to:
 - Improved educational outcomes
 - Increased economic mobility
 - Greater overall health and well being
 - Cost savings to our community

Appendix A

Family Promise of Brevard Logic Model (Part 2)

HOUSING STABILIZATION LOGIC MODEL



Appendix B
IRB Approval



**Institutional Review Board (IRB)
For the Protection of Human Research Participants
PROTOCOL EXEMPTION REPORT**

Protocol Number: 04290-2022

Responsible Researcher(s): Diana Adams

Supervising Faculty: Dr. Hanae Kanno

Project Title: *A Place to Call Home: Program Evaluation for Family Promise of Brevard.*

INSTITUTIONAL REVIEW BOARD DETERMINATION:

This research protocol is **exempt** from Institutional Review Board (IRB) oversight under 45 CFR 46.101(b) of the federal regulations **category 4**. If the nature of the research changes such that exemption criteria no longer apply, please consult with the IRB Administrator (irb@valdosta.edu) before continuing your research study.

ADDITIONAL COMMENTS:

- *Upon completion of the research study, all collected data (e.g. data set, name lists, etc.) must be securely maintained and accessible only by the researcher(s) for a minimum of 3 years. At the end of the required time, collected data must be permanently destroyed.*

If this box is checked, please submit any documents you revise to the IRB Administrator at irb@valdosta.edu to ensure an updated record of your exemption.

Elizabeth Ann Olphie

05.05.2022

Thank you for submitting an IRB application.

Elizabeth Ann Olphie, IRB Administrator

Please direct questions to irb@valdosta.edu or 229-253-2947.

Revised: 06.02.16

Appendix C

SSRS Rubric (Part 1)

	Housing	Employment	Income	Food/ Nutrition	Child care	Child Education	Adult Education	Legal	Healthcare
1	Homeless/Eviction	None	None	None or no means to prepare; relies on other sources of free/low-cost food	Needs but none available and/or not eligible	Eligible but not enrolled	Literacy barriers and/or no HS diploma/GED	Outstanding tickets/warrants	None with need
2	Transitional/temporary/substandard housing; current rent/mortgage unaffordable	Temporary/part-time/seasonal; inadequate pay; no benefits	Inadequate; spontaneous/inappropriate spending	Food stamps	Unreliable/unaffordable	Enrolled but not attending	Enrolled in literacy/GED program; language not an employment barrier	Charges/trial pending; noncompliance with probation/parole	None and difficulty when need to access care; household may be in poor health
3	Safe, stable, adequate housing	Full-time, inadequate pay; few or no benefits	Meet basic needs with subsidy; appropriate spending	Meet basic food needs, occasional assistance	Affordable and subsidized, but limited	Enrolled, but one or more children attend occasionally	HS Diploma/GED	Compliant with probation/parole	Children on state healthcare
4	Safe, adequate, subsidized	Full-time, adequate pay/benefits	Meet basic needs/ manage debt without assistance	Meet basic food needs without assistance	Reliable, affordable, available; no subsidies	Enrolled and attending most of the time	Needs additional education to improve employment and/or address literacy challenges	Completed probation/parole within past 12 months, no new charges	All can get care, but may strain budget
5	Safe, adequate, unsubsidized	Permanent employment with adequate income/benefits	Sufficient, well-managed income; able to save	Can purchase any household food items	Can select quality childcare of choice	Enrolled and regularly attending	Completed education/training for employment; no literacy issues	No felony criminal history and/or no active crim. just. involvement in 12+ months	All covered by affordable, adequate health insurance

Appendix C

SSRS Rubric (Part 2)

	Life Skills (hygiene, food, etc.)	Mental Health	Substance Abuse	Family/Social Relations	Transportation	Community Involv.	Safety	Parenting	Spiritual
1	None	Danger to self/others, severe difficulty with daily life due to psychological problems	Severe abuse/dependence	Lack of needed support; present abuse or child neglect	No access to public/private transport	None	Residence unsafe; high lethality; potential CPS involvement	Safety concerns	None
2	A few but need assistance	Recurrent symptoms but not a danger	Dependence; focused on getting/using drugs/alcohol, withdrawal	Has support; support lacks ability/resources to help; not relating well; potential abuse/neglect	Available but unreliable/unaffordable; may have car but no insurance, license, etc	Isolated/no social skills, lacks motivation	Threatened/temporary protection available	Minimal	Little interest; worried about today; some connection to spiritual role models
3	Most daily needs met	Transient, mild symptoms; moderate functioning difficulty	Use within 6 months; problems related to use; problems persisted for at least 1 month	Some family/friends support; family seeks to change negative behavior	Available and reliable, limited/inconvenient; licensed and min. insured	Doesn't know how to get involved	Adequate; ongoing safety planning	Apparent, not adequate	Neutral, will seek and grow if motivated
4	All basic needs met without assistance	Minimal symptoms/responses to stress; slight functioning difficulty	Use within 6 months but no related problems	Strong family/friends support	Generally accessible to meet basic needs	Some involvement but still barriers (transport, childcare)	Safe; uncertain future	Adequate	Interested, seeking higher power for growth
5	Provide beyond basic needs for family	Absent or rare symptoms; good/superior functioning	No drug/alcohol abuse in 6+ months	Healthy support network; stable household with communication	Available and affordable; vehicle is insured	Actively involved	Safe and stable	Well-developed	Giving back to community; modeling spiritual beliefs

Appendix D

SPDAT Rubric (Part 1)

	Mental Health	Physical Health	Medication	Substance Use	Experience of Abuse	Risk of Harm to Self/Others	Involvement-High Risk Situations	Interaction-Emergency Services	Legal Involvement	Managing Tenancy	Personal Money Mgt
1	Serious mental illness and not in heightened state of recovery or major barriers to perming tasks due to mental health	Co-occurring chronic HCs, attempt to treat but condition is not improving, palliative health condition	New meds with neg. impact on life; shares/sells meds and keeps minority; misuses meds; unfilled prescription from >90 days	Life-threatening situation due to sub abuse; sub use almost daily and inebriated; binge drinking or inhalant use 4+ times; sub use result in passing out 2+ times	Abuse or trauma believed to be a direct cause of homelessness	Left an abusive situation <90 days; in <30 days have attempted, threatened, or harmed self/others or were involved in altercation	Engaged in 10+ events; in the past 90 days, a family member left an abusive situation	In the past 180 days, family total of 10+ interactions	Current legal issue resulting in either fines >\$500 or incarceration for >3 months	Currently homeless; in the next 30 days, will be rehoused or homeless; In the past year, was rehoused 6+ times; support involved 10+ times	No family income; substantial debts of \$1k+; Cannot create or follow a budget (even with help); Not aware of amount spent on substances if house includes a substance user
2	Hightened concerns about mental health, fewer than 2 hospitalizations, or diminished ability for tasks/daily living due to mental health	HC present and not receiving professional services by choice, because of lack of community resources, or unable to follow treatment plan due to homelessness	New meds with no neg. impact on life; shares/sells meds but keeps majority; intensive assist. for meds	Serious health impacts due to sub use, but not life-threatening; drug use >12 times; reach alcohol threshold >5 times, or binge drinking 1-3 times	Abuse/Trauma not a direct cause of homelessness, but is impacting life	Left an abusive situation in the past 180 days, but no abuse in 90 days; Attempt, threatened, or harmed self/others in past 180 days but not <30 days	In the past 180 days, engaged in 4-9 events; a family member left an abusive situation but not in the past 90 days	In the past 180 days, family total of 4-9 interactions	Current legal issue resulting in either fines <\$500 or incarceration for <90 days	In the next 60 days, will be rehoused or homeless, but not in 30 days; in the past year, was rehoused 3-5 times; in the past 90 days, support needed 4-9 times	Real/perceived debts of <\$999 being past due or making payments; Intensive assistance to create/manage budget; Not budgeting for substance use, if house includes a
3	Some concerns, but no major concerns about safety, housing, and no screening needed	Minor HC being managed and/or cared for, has moderate impact on daily life	Meds not taken on time or correct dosage; reminders and refill assist. Self-manages for <30 days	In the past 30 days, drug use led to inebriation <12 times or alcohol use exceeded thresholds <5 times	Abuse or trauma, but not impacting life or ability to get out of homelessness; engaged in therapy, but not recovered	Left an abusive situation in the past year, but no abuse in 180 days; Attempt, threatened, or harmed self/others in <365 but not <180; 366+ days ago 4+ altercations	In the past 180 days, engaged in 1-3 high risk/exploitive events or 181+ days ago left an abusive situation	In the past 180 days, family total of 1-3 interactions	Minor issue occurred in the past year and resolved through CS or fines; outstanding minor issue unlikely to lead to incarceration	In the past year, was rehoused twice; In the past 180 days, rehoused 1+times; continuously housed for >90 days but <180 days; needed 1-3 times of assistance	In the past year, family income source has changed 2+ times; family is budgeting but short of essential needs funds; Self-managing for <90 days
4	All in heightened state of recovery, have a plan, and engaged with supports	One serious HC, but managing; have health supports, and is informed on how to manage issue	Self-managing meds >30 but <180 days	No alcohol beyond thresholds or if sober, no sub use in 30 days	Reported abuse or trauma; considers self to be recovered	Over a year ago, a family member had 1-3 altercations	Any involvement occurred >180 days but <365 days ago	Any interaction occurred >180 days ago but <1 year	No current issues and any issues have previously occurred didn't involve community service, fines, or incarceration	Re-housed once in one year or continually housed for >180 days but <365 days	Self-managing finances for >90 days but <180 days
5	No mental health issues disclosed/observed	No serious/chronic health condition (HC), minor health conditions managed	No meds or self-managing 181+ days	No sub abuse in the past year	No reported abuse or trauma	Whole family reports no self-harm, being harmed, or harming others	No involvement by any family member in high risk/exploitive events	No interaction with services in the past year	No legal issues within the year; no conditions of release	Continuously housed without assistance for 1 year	Self-managing finances for >180 days

Appendix D

SPDAT Rubric (Part 2)

	Social Relationships	Self-Care & ADL	Meaningful Daily Activities	History-Housing/Homelessness	Parental Engagement	Stability Family Unit (score in the past year)	Needs of Children	Family Size (One-Parent Family)	Family Size (Two Parent Family)	Interaction-CPS or Family Court
1	Homeless and most relationships are homeless; Others are placing housing security at imminent risk; Left poor relationship in the past 90 days; No friends/family follow social norms	No self-care skills; homeless and relies on others daily; shows hoarding behavior and not aware that is an issue	Any family member has no planned, legal activities for fulfillment	Over the past 10 years, cumulative total of 5+ years being homeless	No attachment to children or activities; children <12 unsupervised for >3 hr/day; older children >4 hr/day or are caretaking 5+ days/wk	Arrangements have changed >4 times; children have left/returned >4 times	Children living with friends/family for 15+ days/month; Children not in school; Escaping abuse; Currently homeless	Pregnant OR at least one child 0-6 OR has 3+ children (any age)	Pregnant OR 4+ children (any age)	Interactions with CPS in the past 90 days; In the past year, one (or more) child has been removed and not reunited at least 4 days/wk; Current issues to be decided in family court
2	Homeless and some friends are housed; In 90-180 days, left an abusive relationship; Friends/family having some neg. consequences on wellness or housing; Reconnecting with previous friends but 170xperiencing difficulty	Some insight into self-care but lacking other areas; In the past 180 days, relied on others for basic needs for more than 14 days in a month	Any family member is exploring new activities or returning to activities for fulfillment	Over the past 10 years, cumulative total of >2 years but <5 years being homeless	Weak attachment to children; family activities 1-4 days/month; children <12 unsupervised for 1-3 hr/day; older children 2-4 hr/day or are caretaking 3-4 days/wk	Arrangements have changed 3 times; children have left/returned 3 times	Children living with friends/family for 7-14 days/month; Children miss 3+ days/wk of school; Abuse in the past 180 days that has ended	At least one child 7-11 OR two children (any age)	At least one child 0-6 OR three children (any age)	Interactions with CPS have happened but not within 90 days; One (or more) child removed from custody and child is reunited with family 4+ days/week; Issued solved in family court
3	Homeless but friends and family are housed; >180 days ago, left an abusive or dependent relationship; Developing relationships but not fully trusting	Fully aware of self-care but not mastered skills or time management; In the past 180 days, relied on others to meet basic needs <14 days in a month	Some are attempting legal activities for fulfillment or are not committed to continuing activities	Over the past 4 years, cumulative total of >30 but <2 years being homeless	Some attachment and responsibility for children; family activities 1-2 days/wk; children <12 unsupervised for <1 hr/day; older children no more than 1-2 hr/day or are caretaking <2 days/wk	Arrangements have changed 2 times; children have left/returned 2 times	Children living with friends/family for 1-6 days/month; Children miss 2 days/wk of school (not sick); Abuse ended >180 days ago	At least one child 12-15	At least one child 7-11 OR two children (any age)	In the past year, some CPS interactions but not within 180 days; No active issues
4	Housed for <180 days and family is engaged with friends/family with no neg. consequences on housing stability	In the past year, family used community resources <4 times and HOH is taking care of family needs	Everyone has planned, legal activities for fulfillment 1-3 days/wk	Over the past 4 years, cumulative total of >7 but <30 days being homeless	Strong attachment and responsibility for children; family activities 3-6 days/wk; children <12 never unsupervised; older children no more than 1 hr/day	Arrangements have changed 1 time; children have left/returned 1 time	Children living with friends/family for >7 days/month, but not in past 90 days; Children miss 1 day/wk of school (not sick)	At least one child 16+ years old	At least one child 12+ years old	No interactions with CPS within the past year and no active issues
5	Housed for >180 days and family is engaged with friends/family with no neg. consequences on housing stability	For the past year, fully taking care of daily needs independently	Everyone has planned, legal activities for fulfillment 4+ days/wk	Over the past 4 years, cumulative total of <7 days being homeless	Strong attachment and responsibility for children; family activities daily; children always supervised	No change in parental arrangements; children haven't left or returned to family	Children living with friends/family for <7 days/month; Children have consistent school attendance; No abuse; Family is housed	Children are permanently removed and household is transitioning to services for singles/couples w/o children		No serious interactions with CPS