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Executive Summary of Survey Among Temporarily Homeless Families

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Executive Summary of Survey Project Among Temporarily Homeless Families

The agency we were assigned is a non-profit organization centered around providing housing and resources for houseless families in the Seattle region. The agency consists of five housing locations along with additional day centers. The housing locations are Burien, Northshore, The Regrade, Bellevue, and the Family Diversion Center. They all offer family housing services, healthcare, education, and employment.

The goal of our project was to gather information from guests on the healthcare services that they have utilized. It was also used to gather requests for additional services at each site to improve quality of care. With the information collected, the health services at the agency will be improved and provide additional awareness to better meet the guests' specific needs.

Background

The families within the agency are described as two-parent families (pregnant or with children), single parents of all genders (pregnant or with children), extended families, and families with pets. The guest population varies from people coming from Seattle to those who have arrived from across the world, resulting in a variety of languages spoken at each site. These factors also provide a truly diverse population, each culture being accompanied by their own specific needs. In 2021, 76% of the families served identified as Black, Indigenous, or People of Color (Mary's Place, 2021). Out of all the guests at the agency, 40% of these families considered themselves African American or of African Descent. The agency commits to "create a workplace and service structure that advances equity, diversity, and inclusion as a priority" (p.7). In 2021, the agency served 592 families, had 138,644 overnight stays, served 415,932 meals, served 1,204 children and 592 families, and had 100+ women visit the day center on average each day.

Across the multiple locations, the organization commits to address barriers such as social determinants of health, and empower parents to build family stability, secure housing, and prepare for employment. Some of the healthcare services offered are dental, optical, mental health services, pediatric healthcare, and substance use aid. The agency also offers housing, assistance, and support to families with children with life threatening illnesses within their Popsicle Program (Mary's Place, n.d.).

The organization's Housing Services and Housing Specialist utilize a problem-solving approach along with light flexible funding to support their guests in finding permanent housing. Often, these families have a challenging time finding housing due to the Americans with Disabilities Act (ADA), size of the unit or family, language barriers, or other barriers. In 2021, the agency helped 549 families find permanent housing (Mary's Place, 2021).

A main priority among the guests and the organization is employment. The agency has partnered with 35+ different companies to provide a variety of employment options for the guests (Mary's Place, n.d.). In addition, the Employer Engagement team offers training for specific careers, readiness skills, access to referrals, and preparations for long-term employment (Mary's Place, n.d.). To accompany employment services, the organization also values education and encourages to maintain education for families by providing program resources for enhanced learning, language classes, GED classes, region-based school systems, and tutoring services (Mary's Place, n.d.). These resources are provided for guests and for houseless families not currently sheltered (Mary's Place, n.d.).

Activities and Methods

The foundation of our project was centered around the agency's willingness to improve guest utilization of health services through survey conduction. We began our project by

conducting a windshield survey of each shelter site. By doing this, we were able to get a sense of the community and understand the conditions that affect the health of the population. Moving forward, we collected data about the physical environment, social, economics, and services available (Rector, 2021). Using these observations, we developed a nursing diagnosis for the population. The nursing diagnosis is readiness for enhanced knowledge related to guest utilization of agency's health services.

The agency requested that we facilitate a previously designed survey, created by preceding SPU nursing students. Next, we researched the best method of conducting a high-quality survey in an ethical manner. An emphasis was placed on the importance of voluntary participation; therefore, we did not directly ask guests to fill out the surveys in order to avoid skewing data (Kelley et al., 2003). Our literature review revealed several different approaches to how to best conduct the surveys. We used incentives like baked goods and coloring pages for a greater participation outcome. We took into consideration the population of families at the agency and included an activity for children to do while parents took the surveys. We offered surveys to the guests to complete and made them aware of our intentions with the results (Kelley et al., 2003). We addressed the language barrier by using site-provided interpreter services. Our team conducted surveys at each agency location twice and input the data in an Excel document. We created graphs to display the data to the organization.

Outcomes/Limitations

We succeeded in collecting data from guests regarding the services they are utilizing and their additional needs from the organization. Visiting each site twice provided a greater opportunity to collect surveys resulting in more data. The results consisted of anonymous, voluntary responses which we compiled and analyzed.

Since participation was voluntary, the results were limited based on how many guests decided to engage in the survey. We attempted to address this limitation by visiting each site twice to collect the most data possible for each location and offering incentives to encourage participation. Another limitation we came across was a language barrier between us and some of the guests. This was addressed by having nine translations of the survey available to expand participation. We also utilized interpreter phone services when needed to communicate with guests.

Conclusion

Overall, the project's purpose was to conduct surveys at the agency locations and gather information about health services being used and current health concerns to improve care quality. We accomplished the organization's goal by implementing the surveys amongst the guests. By doing this, we hope to have achieved the desired outcomes of increasing awareness of resources by guests, accessibility of resources, and guest satisfaction. With our project, the health services team can set annual goals for guests and the organization. We encourage the continuation of survey use within the agency.

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