Webinar Transcript: Results from the Latest Voices from the Field Survey

Thank you for joining us will start shortly Good morning or good afternoon, depending on where you are.

My name is Joy Moses and I’m joined by my colleague, Jackie Gardner for today’s webinar, focused on the alliances series.

Of surveys, which we call Voices from the Field that highlight issues that are impacting people experiencing homelessness.

And Service Providers and Systems during COVID-19.

Which is basically.

These very unusual times we are living through.

We are going to go over some information about our surveys and I’m gonna actually at this point turn the floor over to Jackie to start off the conversation.

Jackie.

Thank you.

Joy I’m going to just share my screen.

We will get started.

All right.

So again, I echo statement.

Thank you for joining us.

We're going to jump right in.

As Joy said, we are the presenters today.

Joys the director of homelessness Research Institute, and I'm a resource research associate on the team.

So some quick housekeeping.

If you have questions for either of us, please use the Q&A feature to ask those questions.

And we encourage you to use the chat feature so that you can have conversations amongst yourselves.

The presentation, but be sure you’re sending it to all panelists and attendees.
Otherwise, it just comes to us and no one else sees your message.

And then I just wanted to remind everyone that as always, we’re recording our webinars.

And it will be sent out to all of our registrants and posted on our website.

Like usual.

And you’ll notice we have a pretty short agenda today and the reason for that is we want to go over all of the findings with you, but also we’d like to hear from you, so we’re encouraging you to use the chat functions.

So that we can.

Here are about what’s happening in your communities.

Or you can talk to each other and learn from what’s happening in places that differ from yours.

So a quick overview.

Back in April of 2020, NEH, the national limestone homeless has started conducting surveys of because we wanted to understand the impacts of COVID-19.

And how communities were responding.

And this project has actually been a continuous effort through the pandemic.

So there’s actually.

Three previous survey efforts and the results are all on our website at that link.

And again, we'll send the slides out along with the video.

So you’d have all of these links.

Like the earlier surveys, the fourth round of surveys focused on things like health, housing, resources and other topics related to the pandemic.

But new for this round was an additional survey outreach effort to service providers and advocates.

And that was done so that we could get some additional input from the communities to see how it was for, you know, people doing frontline service and people.

Doing advocacy efforts at the local level, you know what, has this pandemic caused to happen for them?

And we got some very interesting and valuable information from that as well.

So go over the methodology of the surveys and then we’ll jump right into the results.

Basically what we did was sent an email to all of the COC contacts listed on the Department of Housing and Urban Development Grant contact page.

We sent it out on the 23rd of February with deadline for completion of March fifth and we used Survey Monkey as we do for all of our surveys.
And we actually decided this time, we were going to send out personal emails to two groups. One of those was groups who had responded to one of the first three surveys, but not the fourth survey, or contacts who never responded to any of the previous surveys. And we collected those responses through the 31st of March of this year. And after removing duplicates and empty records, we had a 147 units. Sees represented, which is 37.5% of all of the CEO sees. And the completion rate was about 50%.

The service provider and advocate survey had a similar process. We invited them to complete a survey through our alliance weekly newsletter. We asked the people complete their surveys by March 16th, but then we extended the deadline to March 19th.

We had a total of 630 responses, but some didn't qualify because they identified as something other than a service provider or advocate. And of those 566 qualified responses, a 113 were from advocates and the remaining 453 were from service providers.

And we actually received responses from all across the country and the US territories everywhere, except for a representative from the state of Mississippi. And with that, I would like to turn it over to Joy to talk about the areas we focused on and what the results showed.

So please pardon the brief transition period.

.. And I will go ahead and.

The presentation.

So basically, we asked the various participants in our survey questions in a limited number of areas are defined.

List of areas.

Those included consumer health, crisis response, housing, permanent housing, and sheltered homelessness, resources, staffing.

And we grouped together advocate in insights as its own category because it was very enlightening and summarize a lot of what we needed to know.

Or summarize a lot of what we needed to know about.

Going on in the field.
So of course, when we're in the middle of a pandemic and a large scale health crisis.

One of the first things we want to know is about health.

As we began this survey in February and March, obviously, vaccinations were and are.

Be concerned, they had become available.

And everyone was thinking about how are we going to make sure that people experiencing homelessness are able to participate in this broad vaccination programs.

So there were against sub areas that we were concerned about.

Priorities, plans.

Trafficking, track tracking.

Sorry.

I'm an implementation.

The first one is priorities.

The CDC had recommended or just say the CDC had suggested the possibility of prioritizing people experiencing homelessness within plans or vaccination plans or states in local areas.

The Kaiser Family Foundation has been tracking what state and how many states did so.

So according to their information, it was roughly half the states.

We and our survey asked are.

How many of you are, which of you have a prioritization in some ways for people experiencing homelessness that applies to your state or your local area.

56% said that they did a lot of these were tied to.

And concerns about congregate shelter.

So that might have put some limitations on who which members of the homeless which homeless consumers were prioritized.

We asked about plans if CEO sees.

Had plans in place or where a part of plans to conduct mass vaccinations of people experiencing homelessness.

At that time, there were 49% that said they did.

We anticipate that as time went on, more of those they have come at may have come into.

Existence as we got further along in the vaccination process, we were curious about how many clc is we're going to track who was vaccinated and how many people we're going to vaccine, how many people were vaccinated.
We discover that that number was less than half.
We were curious about how this was going to affect the way the information available and public health decisions.

If people didn't necessarily know how many people experiencing homelessness [inaudible] vaccinated and where they were and they were still is a little bit of a concern, but obviously there were some barriers.

They're related to whether or not there was data integration that happened in those places.

Whether or not systems were basically sharing information.

It's often difficult.

And ad [inaudible] basis start sharing with a system that has medical information.

But we did here that we're looking into self-report information or had other ways of tracking the next issue we looked at was implementation.

This was something, this was a category of questions that we asked of service providers.

And by service providers, we mean shelter providers rapidly housing providers coordinated entry folks.

We asked them if some of their clients or the people who were coming.

Their doors had been vaccinated are ready.

Again, this is a defined time period, late February, March, actually, for service providers, it was during the month of March.

At this stage, 61% said that they had people who had already started.

Can you vaccinate?

Which we found to be very encouraging because we were still in the early stages of the national process of getting everybody shops.

So as I said, we were encouraged by that and we had some additional questions for service.

Mainly about the roles that they were playing in the process.

That would be reflected in the chart off to the right.

We heard a lot of encouraging things.

Again, that the [inaudible] majority of service providers we're educating clients about vaccinations.

A huge number, 57% said that they were providing space for vaccinations.

So hopefully that was easy in the process.

If people providing shots were coming to locations where people experiencing homelessness live or get services.
Are hopeful that the process went smoothly.
In many places throughout the country.
The other thing that we were curious about is just the nature of COVID-19 cases.
There is information that is available that I point to that the National Health Care for the Homeless council has regularly updating.
They provide information on how many people coming into their health centers have been vaccinated or test positive.
They also attract testing events.
So any sort of widespread, wide-scale testing of a shelter or a community, et cetera, that information is very informative, but we also wanted to kind of get a sense of how many of the service providers.
Were able to read said that they that their clients were impacted by the crisis and that was a significant number.
76% reported that they had some clients are at least one client that had tested positive for COVID.
Which suggested that this was a very real issue that people were dealing with as providers in addition to what was going on and overall, nation.
More than a little more than one and forehead experienced some breakout amongst them.
Clients.
So that became that is something that became a much bigger issue for them then one or two people testing positive.
A big issue that we have identified throughout the various parts of this series is the crisis response housing.
It was the most common way that systems reacted and altered the course of business in order to respond.
Respond to the pandemic.
The vast majority in every survey that we have done have said that they had some sort of non congregate housing program.
Largely hotels and motels that they were able to newly commissioned.
We haven't curious.
As time has gone on of how many, how many of those programs are still up and running.
We asked this question at the end of last year and we ask it again.
As part of this survey, and 79% of CLC said, Yes, we we have our of the ones who had a program.
They said that they were still up and running.
Big reasons that they attributed this continuance were of course, that the funding is still available, That is what allows us to do our work.

And then they also said, obviously there is.

Big focus on preventing the spread of COVID within their [inaudible] and hotels and motels are big part of that.

That effort.

There were a limited number of [inaudible] who had ended the programs.

And.

Had stopped.

They're not congregate shelter.

And whole or in part.

And again, we asked why a big response was in the form of a limited number of COVID-19 cases, either a must the people experiencing homelessness or just in the community generally.

And some sided funding.

Limitation.

We were a little concerned about this or we just wondered about responding to limited case numbers by Indian Hotel motel programs.

There has been some research.

Forms.

There's research on Kongregate shelters that suggests that once the virus is introduced in those environments, it can become live spread.

And then researchers at the University of Washington who appeared in one of our previous webinars.

Found that people who were in hotels and motels where I'm less likely to contract the virus than those who were not.

So.

Ideally, the research would suggest that you would keep those beds open in order to continue to have limited number of cases.

But we did have some people saying that the limited number of cases drove the end of the program.

One of the other things that we have been curious about is how many people experiencing homelessness had been able to access these not congregate shelter beds.

And various stages in the process, we have seen some evidence that suggests it's a limited number.

In our early surveys.
In our first survey, we asked how many such beds have been created.

At a later point, we asked for some data collection from some Celcius, who volunteer that information.

And in this latest survey we asked, again, How many.

Have you added in this category?

And essentially when we asked how many bears were added in the category of between the 20, 20 hit and the 2021 [inaudible], which is done in January of each year, we saw that?

Yes, there was.

Dramatic Ralph's and congregate shelter.

As we can see here, I was a 148% growth more than any other category of housing during that time period.

But we also noted that the increases amounted to a small number of bits for the he responded to these questions.

So again, we felt like there is probably a small slice of people that homelessness.

Who've access these resources.

And we've seen that in this, survey, previous surveys in our previous data collection.

Again, we were wondering if that resource should have been used more expansively, given what we know from the research on the effectiveness of non-cognitive shelter and preventing the spread of the virus.

In relation to crisis response housing.

Earlier in this, earlier in the year, the federal government.

Announced that fema would be offering a more expansive reimbursement for non congregate shelter for basically for a number of.

Hotel and motel rooms across the country, which does provide an avenue for increasing the availability of those beds.

But we learned that only 47 of our COC respondents anticipated that they would be participating in.

Offer.

We were curious about some of the reasons that people would have for those types of decisions are systems would have for those types of decisions.

We asked it in a general way and also an open-ended way.

And what's off to the right of some of their responses.

We got back from participants.
Some of them indicated that they were not a part of the decision-making process about using the fema funds that there were other state or county government officials who were making those decisions.

They talked about.

Perception that the programs were not needed.

They cite a bureaucratic concern.

how quickly they would be reimbursed and the reporting requirements.

They talked about insufficient staffing to manage the scale up of fat.

New housing.

And the a big issue that is definitely external to systems is that I'll tell the hotels just didn't want to serve some of their clients, which is a big barrier.

Some we're using other funding.

Sources we know from our previous surveys.

And this one that a lot of CLCs were using cares Act funds for their hotels and hotel rooms and they have been using other funding streams as well.

And there were some people who still didn't have enough information.

The changes in policy or how to apply.

as as homeless advocates and as homeless service providers.

A lot of us tend to be focused on permanent housing and making sure that people are not homeless.

So.

Luckily or happily, I should say we were we were we noted that every group that we surveyed said that said some gave us some responses that indicated that permanent housing was critical to them and they had it on their mind and it was a part of their plans and what they thought was necessary for the people they serve.

So we heard this in some form or fashion from service providers and advocates.

When we asked the about how they had spent the cares Act funds, which they.

Which were a part of legislation in early 2020, 76% of them said they had spent at least some of that money on more permanent housing beds.

We were curious about, again, as I mentioned, we asked about.

Gross and the different types of housing over the course of the crisis.

based on looking at the HQ, the [inaudible] changes.

And I'm sorry, I should spell that out, but housing inventory account changes.
And essentially, we felt.

That there was a growth of 7% for Pm in the category and 16 percent in rapidly housing category for the respondents who were who gave us their bed count numbers.

But we were curious and a lot of we noted that there's been a lot of conversation about people in housing in non congregate shelter housing.

That's resulted from the emergency.

A lot of that housing was dedicated to older adults or people with disabilities or illnesses.

Some of it was used for shelter, decompression.

We were curious what happens to people when they leave those housing, those temporary housing situations.

And we asked our CLC representatives to estimate make estimations or where they go and they estimated that 42% of people who leave hotels and motels for for permanent housing, which means that most don't.

A lot.

They believe that I'm sorry.

Yeah.

Which means most don't.

They believe a lot of people leave for congregate shelter?

Or they are unsheltered, are doubled up or a big category is just unknown.

They don't know.

What happened to that.

an additional category we looked at was unsheltered homelessness..

This is definitely going to be a big area as we move into the future.

It was a big area as we were going into the crisis.

When the pit when there was a PIT Count taken right before war covid the national emergency was declared in March of 2020.

The nation did a PIT Count in January, just a couple of weeks before that.

And at that time, we had already noted that there was a 7% increase in unsheltered homelessness Over the previous sheet..

Since that pre-COVID period we were we asked if they had any reason to believe that they were gross and unsheltered homelessness since then.

And that 47% said yes.
So that is it definitely concerned that the population maybe growing that clc is believed that unsheltered population is growing.

One difficulty that is associated with this is that the typical procedures for counting the group have been disrupted.

As we started the January 2021 pit, which is of course, earlier this year.

The pandemic was clearly going to interfere with the process that involved a lot of volunteers going into the field or a lot of workers going into the field and having.

One on one conversations with people.

Going to trainings for that process in small and big rooms with a lot of other people.

So how did issue guidance about making a to the process.

We asked.

Our survey respondents, you know, what did they do for the 2021 [inaudible] roughly one in three said they didn't do account of unsheltered people at all.

And of the remainder of the remaining participants, 85 said that they had altered their methodology.

In some way.

So as we are basically in a recession in a period where on children homelessness, maybe growing, definitely hit a roadblock and effectively measuring that particular problem in the same way that we are accustomed to.

Their hasn't.

A lot of conversation from HUD and from the alliance and others about finding other ways to keep track of this group.

And we ask our participants how they were doing that.

They listed a number of they gave us a number of responses.

A large number of them, as you can.

See off to the right, we're already tracking and shelter people in HDMI throughout the year.

Similar to that, there were there were participants that had by name list.

And then we heard of other useful approaches, including ligated looking at drop-in center data.

Someone mentioned in camp mapping.

A couple of people have talked about doing many PIT counts at different times of the year to see to continue to understand how the population is shifting.

And then there was a mentioned.

Counts as well.
Another area that we tend to spend a lot of time on because we want to make sure that providers have the resources that they need to do their work is money.

So we are curious about how people are spending their money, how much money they need, et cetera.

I mentioned the cares Act earlier that was passed and the beginning part at the very beginning of the crisis, early in 2020, it did direct 4 billion to the emergency solutions grant program.

We were curious about how we’re spending that money.

41% said they still have some unspent in an obligated funds.

And then we were curious of the funds that had been spent and obligated or how did they use them?

And it was quite clear that you can see on this chart that they used it for they use these funds for a variety of needs.

Top among them with staffing, the previously mentioned to hotel and motel rooms for a non congregate sheltering.

Permanent housing.

Ppe, resources for in so the money was in the field and doing a lot of good.

We believe that some are also directing resources towards long-term goals and doing long-term.

Some of the remaining funds.

Since the cares Act of 2020, there has been a new relief legislation that was passed earlier this year in 2021, the American rescue plan Act funds are directed within.

That legislation to various programs that could impact housing stability, housing instability, and homelessness.

But it's notable that the funds are not flowing directly to homeless services programs.

They may be.

And hopefully and should be engaged in efforts to spend down those those funds and use those resources including providing people and families with housing vouchers, and and eviction prevention services, et cetera.

We're hoping that that coordination happens, but we suspect that it's hard for providers and for systems to completely predict what the impacts will be when they're not directly connected to those resources.

We were curious about again, our direct service providers.

The shelters and others, how they in particular were fairing.

One in four of them told us that they had lower than typical fundraising outcomes, which is probably something that may be not too surprising during a recession of this type, 35% of the providers said that increased demand for their services outstripped, is outstripping any new funds that they have received.
As mentioned, their new funds globally through communities, but there's also an increased demand.
And for many it's not balancing out.
We were curious.
On how, what we asked an open-ended question about the challenges they were facing.
Of course, there are some non-profits that rely on fundraising events each year.
Some of those obviously had to be canceled if they were in person events so that could have put a dent in some people's fundraising efforts.
They talked about decreases in state and local revenues leading to cut backs and contracted services with with agencies relatedly, reduced income from billable.
Services.
And then of course, they had new expenses needed.
Obviously, they needed PPE and hazard pay.
They made him needed new employees.
All sorts of things associated with the crisis that require new resources.
And then I think with the unusual circumstances and the unusual funding, streams, they were trying to manage the future funding uncertainties and how they should think about.
Next month or next year.
Another area that we have been curious about throughout the course of this project is staffing.
Every this is our fourth survey of Celcius.
Each time the we have seen huge margins of people expressing., that they're funding funding, staffing shortages in their systems.
They point to frontline shelter staff and case managers and street outreach workers as being particularly.
Affected.
They don't have enough of these.
And they expressed that this is at least in part due to the crisis.
At various points we've asked about the kinds of challenges that these workers face, and we have seen again, a significant responses related to increased stress, exhaustion.
And just general decrease more [inaudible] during unusual circumstances.
There's been a conversation by our organization and others about how do we support workers to make sure that they continue in their employment, that they're still able to do the best work possible.
And our respondents talked about a lot of a lot of things that they were trying to do to make to make sure that their workers felt appreciated and that they were able to continues to others.

Those things included, of course, at homework options, which a lot of us are familiar with and work schedule adjustments.

But there was also a mentioned financial incentives that was 35 percent of our respondents.

This could take the form of hazard pay or bonuses.

They talked about paid leave.

30% of those responding, and then they talked about other useful tools that can help employees who are going through tough days.

And these include appreciation events, employer provided lunch.

And virtual exercise and wellness activities and team building activities.

Sort of previewed, mentioned at the beginning that we were particularly curious about the things that, advocates in communities would highlight and how they would summarize.

As the homeless services system and provide a response to the pandemic.

And these two charts represent on what they said.

So we believe that there is some division between communities and.

What is happening in the field.

But I pulled out the top three responses in each category.

The first category being we as advocates, what, you know, basically what is working really well and your community.

From your point of.

You as an advocate and the top three things they cited were street outreach, reaching out to unsheltered people and the vaccination planning and delivery.

In addition to asking about the successes that they saw, the asked about will appear to be.

The continue appear to be the biggest challenge areas.

And then we saw somewhat overlapping lists.

Vaccination planning and delivery.

Again, we must point out that this was a little earlier in the vaccination process.

And so far some people answering.

I actually I'm sorry for the it was in March of various points in March.

But some people identified the top choice was vaccination planning, delivery as a challenge.
And then a number two the familiar need for more permanent housing.

And then.

As with the success list, some perceive the reaching serving a shelter people as a particular challenge.

So.

It is likely that the answers vary depending on what community you were in.

Some are doing well at various parts of their response.

Some are experiencing challenges.

In those same overlapping areas but this was helpful.

To fulfilling, to filling out our knowledge of the types of things that were going on in the field.

And the last thing I'll mention is a big thank you to anyone who is participating in this webinar or who.

Hears this webinar.

We definitely appreciated those of you who contributed your responses.

As we mentioned at the top and throughout the reached out to a significant number of CLC representatives directly.

Service providers, and advocates.

And we received the overwhelming response and it was very helpful.

Not only in our understanding, but the community's understanding of some big picture trends occurring within homelessness.

It definitely can serve as a way to understand how your individual communities or states experiences compared to others can point to places where we can all learn more about how to better serve clients.

And it can definitely influence the way policymakers think about this issue.

The resources they direct towards it.

And how they.

Otherwise shape the response and the aftermath of the response.

So hopefully we're heading into a post-crisis period.

And it's good to know where we stand as we're doing that.

So we wholeheartedly thank everyone who participated.

We're saying over and over again.

So we wanted to highlight that there's just a couple of like a little details here are housekeeping information.
This is our contact information for the two of us.

So here are also the links to the previous surveys and the previous materials, as well as information about the alliances center for learning.

If there are any questions we can take a few.

If.

If we wanna have a little bit of discussion, we have a few minutes for that, where we're nearing the time we did want to make sure that we were doing a brief overview and that time extends x to x sensitive.

Program that involved extensive amounts of time.

What will we just wanted to get some of the highlights out to you in another form.

Weekend, we can see in any questions yet.

So if you have questions, please put them in the questions and answers box.

.. And if you want to send them to everyone so that they can see your question, you can do it in the chat.

Sending it to all panelists and attendees.

I'll also say to those of you who are, who are participating live, or looking at a recording.

You can conveniently use this slide that we're on to email us any additional questions.

And to further engage with us around this project and the results of his project.

We definitely appreciate you joining us today.

And we look forward to continuing the conversation tomorrow.

And hopefully not too much further into tomorrow.

In relation to COVID, but other issues have a good rest of your day.

Thanks, everyone.