DOMESTIC VIOLENCE AND HOUSING INSTABILITY: PROVIDERS’ PERCEPTIONS OF THE EFFECT OF SOCIAL SERVICES ON WOMEN SEEKING FORMAL ASSISTANCE

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Abstract

The goal of this study was to examine the effects of different ecological layers on housing outcomes for women who access either homeless or domestic violence service agencies. An ecological framework was used to explore factors that might affect housing outcomes for clients in both types of agencies. The focus was primarily on the individual and organizational levels, with some exploration of social and community factors. Structured interviews were conducted with a geographically diverse sample of homeless and domestic violence providers in the United States who served adult women. Interviews included both closed- and open-ended questions yielding quantitative and qualitative results. Few significant differences between the clients of homeless agencies and the clients of domestic violence agencies were identified. Logistic regressions were used to explore factors that predicted whether female clients obtained permanent housing when they exited the program. Clients were more likely to find permanent housing when they had children. Also, clients who were unemployed at discharge were more likely to find permanent housing. Organizational-level factors that predicted successful housing outcomes included providing more services/referrals to women, having rules for program participation, and agencies working well with other social service providers in their area. This study has implications for agency policies and procedures as it may be necessary for agencies to address gaps in housing services for some groups of women (e.g., single women without children). Future research is needed to explore the relationships found in the current study in more detail. Specifically, with recent policy changes prohibiting domestic violence agencies from mandating that women participate in services in order to receive housing
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assistance, it will be important to evaluate the effect of this change on housing outcomes for women, especially in light of the current study’s findings. In conclusion, this study suggests the importance of considering multiple levels of the ecological model to increase our understanding of what factors contribute to successful housing outcomes for women who use domestic violence and homeless services in the United States.
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Introduction

Economically disadvantaged women with a history of domestic violence face a host of barriers to achieving stability and wellbeing. In particular, their experiences of domestic violence\(^1\) may interfere with their ability to achieve stable housing (Yoshihama, Hammock, & Horrocks, 2006). Research has shown that domestic violence is correlated with poverty, housing instability, and homelessness for adult women (Baker, Cook, & Norris, 2003; Pavao, Alvarez, Baumrind, Induni, & Kimerling, 2007; Tolman & Wang, 2005; Wenzel, Tucker, Elliott, Marshall, & Williamson, 2004). Because of the complex interplay between housing and domestic violence, it can be difficult to understand the causes, risk factors, and contributors to housing instability. In addition, throughout the country, there is a patchwork of social service agencies serving in various capacities to alleviate the problems associated with domestic violence, poverty, and housing instability for disadvantaged women, which may add to the barriers women face, as these services are not necessarily well-coordinated (Baker, Billhardt, Warren, Rollins, & Glass, 2010).

For women experiencing domestic violence and housing problems, there are individual, social, institutional and cultural factors that affect their ability to move toward a more stable life. In particular, institutional supports (e.g., welfare, shelters) play an important role in women’s lives as they often seek formal help for themselves and their families (Baker et al., 2003; Liang, Goodman, Tummala-Narra, & Weintraub, 2005).

\(^1\) For the purpose of this study, “domestic violence” is defined as physical, sexual, and/or emotional violence perpetrated against a women by her domestic partner that leads to the perpetrator gaining an advantage in power and control (Goodkind, Sullivan, & Bybee, 2004; Johnson, 1995). This definition refers to a specific type of violence involving psychological intimidation and threats against the victim, often including economic abuse and social isolation, which perpetuates the victimizer’s control (Bontempi, Eng, & Quinn, 2008; Rollins, Saris, & Johnston-Robledo, 2001).
Individual factors such as substance abuse and mental health problems are correlated with both housing problems and domestic violence, thereby increasing the risk for long-term problems with housing stability and safety (Wenzel, Tucker, Hambarsoomian, & Elliott, 2006). In these difficult circumstances, women are more likely to succeed when they have quality support, both formal and informal (Levendosky, Bogat, Theran, Trotter, Von Eye, & Davidson, 2004; Trotter & Allen, 2009). As an example, women access a variety of sources such as family, friends, domestic violence shelters, welfare offices, or the criminal justice system to help them establish security and stable living conditions.

Understanding the connection between domestic violence and homelessness is important as the number of homeless families is increasing nationwide. Data show that this growing population is mostly headed by females (United States Conference of Mayors, 2009). In addition to homelessness, domestic violence is also a problem nationally. A 2009 census found that on a given day over 65,000 women are receiving domestic violence services. Nationally, 74% of domestic violence services provided are emergency shelter. Service providers report not having enough staff or funding to adequately provide support services for victims of domestic violence (National Network to End Domestic Violence, 2010). Compounding the problem is the current economic recession, which is causing additional strain on the workforce, as unemployment has remained high since 2008 (Bureau of Labor Statistics, 2013). Research shows that in such economically strained circumstances, violence can be prevalent, and the risk for domestic violence may be increased (Wenzel et al., 2006).
Reaching a better understanding of the interaction between poverty and domestic violence, and the influence of formal (institutional) supports is critical to ensure successful outcomes for women. One way to accomplish this is to take an ecological, systems approach to understanding how domestic violence and housing instability are influenced by the social services system, particularly because many women interact with a variety of agencies as they seek help for problems related to domestic violence such as housing or financial assistance (Allen, Lehrner, Mattison, Miles, & Russell, 2007; Baker et al., 2010). Therefore, this study will examine domestic violence and housing from the lens of service providers. In this way, this study will provide a picture of the formal support system for battered women and how this system affects women’s ability to find stable housing.

**Literature Review**

**Domestic Violence and Housing Problems**

Addressing domestic violence and housing problems is a complicated task because of the diversity of factors that affect both of these social problems. A historically growing number of female head-of-households are living in poverty, and they are more likely than middle-class women to experience abusive adult relationships involving exploitation and violence (Williams, 1998; Yuan & Yuen, 2009). Homeless women and families have been found to have a higher incidence of childhood abuse and violence as adults (Bassuk, Dawson, & Huntington, 2006; Bassuk & Rosenberg, 1988; Black, Sussman, & Unger, 2010). There is a substantial body of research showing how domestic violence destabilizes the lives of women, and how poverty further complicates this destabilization (Lown, Schmidt, & Wiley, 2006; Wesely & Wright, 2005). In particular, the literature shows a bi-
directional association between domestic violence and poverty. Domestic violence (physical, sexual, or psychological abuse) is prevalent in populations of women in homeless shelters, low income housing, and welfare recipients (Wenzel et al., 2006). Violence exposure has been shown to predict homelessness for poor women (Kennedy, 2007). Conversely, life histories of poor women show that a history of domestic violence increases the likelihood of later receiving welfare assistance (Yoshihama et al, 2006). Women accessing housing services such as shelters and low-income housing have been shown to experience a disproportionate amount of violence from a variety of sources, including, but not limited to, intimate partners (Wenzel et al., 2006; Wenzel et al., 2004; Zugazaga, 2004). Women in homeless shelters are similar to women in domestic violence shelters in terms of rates of victimization and violence and poverty-related issues, indicating a general overlap between populations of homeless women and women with a history of domestic violence (Stainbrook & Hornik, 2006).

In addition to homelessness, there is an established, though not as clearly researched, link between domestic violence and housing instability (Pavao et al., 2007). Although there is less research on domestic violence and housing instability, there does seem to be many of the same predictors and outcomes as found in research on domestic violence and homelessness. Housing instability can include sacrificing necessities (e.g., food, electricity) in order to pay for housing, doubling up with friends or relatives, credit problems, and being threatened with eviction (Baker et al., 2003; Rollins, Saris, & Johnston-Robledo, 2001). Women who report a recent history of domestic violence have more instances of late rent or mortgage payments, frequent moves to find affordable housing, and periods of time without their own housing (Pavao et al., 2007).
The importance of housing stability for women who have experienced domestic violence cannot be overstated. Adequate housing has been shown to be linked to improved wellbeing for populations experiencing homelessness and for women who survived domestic violence (Anderson, Saunders, Yoshihama, Bybee, & Sullivan, 2003; Berger, Heintze, Naidich, & Meyers, 2008; Metraux & Culhane, 1999; Zlotnick, Robertson, & Lahiff, 1999). However, although leaving an abusive partner leads to better outcomes in the long-term (Sonis & Langer, 2008), it can also put women at risk for severe violence in the near-term, and make it difficult for them to find permanent living conditions (Campbell et al., 2003). For example, landlords have been known to discriminate against women with abusive partners (Hirst, 2003). Also, leaving an abuser with whom a woman is financially interdependent can lead to immediate and long-term housing and financial instability, as women are unable to pay rent on their own. Women in this situation are forced to look for a place to stay with friends and family or through emergency shelters and transitional housing programs, which may not necessarily lead to long-term solutions to their housing needs. In fact, help-seeking activities of women escaping domestic violence often focus primarily on acquiring housing, and specifically emergency shelter (Allen, Bybee, & Sullivan, 2004; Netto, Pawson, & Sharp, 2009).

It is important to note that sometimes women are not able to get into emergency shelters as they are often full. The result is that many women end up returning to their abusers to attain some housing and financial stability (Bybee & Sullivan, 2005; Metraux & Culhane, 1999). In addition, qualitative studies describe ongoing cycles of domestic violence and housing instability over an extended period of time, leading to a dependence on social services and a feeling of powerlessness that is further complicated when women
lack control of their lives outside of the home, such as at work or in other activities (Bontempi, Eng, & Quinn, 2008; Rollins et al., 2001).

**Domestic Violence and Employment Problems**

In addition to housing stability, employment and financial stability are important factors for women’s safety and wellbeing. Unemployment and underemployment are risk factors for homelessness and housing problems. In fact, many homeless individuals report being employed, but their wages are insufficient to cover housing and other necessary expenses (Nooe & Patterson, 2010). Data also consistently show that women’s income decreases as domestic violence increases (Brush & Higgins, 2004; Tolman & Wang, 2005). Recent partner violence is associated with women working less and earning less over time than similar peers (Riger, Staggs, & Schewe, 2004; Tolman & Wang, 2005). In particular, physical health problems resulting from injuries sustained can prevent a woman from going to work or cause an employer to send an employee home for the day (Riger, Raja, & Camacho, 2002; Staggs & Riger, 2005). Woman whose work is affected by manipulation or other actions by their abuser can face consequences such as being reprimanded, written up, or even fired or forced to quit (Brush & Higgins, 2004).

Problems maintaining employment have been found to be more pronounced and frequent when the violence at home has a psychological component (Kimerling, Alvarez, Pavao, Mack, Smith, & Baumrind, 2009). When abusive partners exert psychological power and control, this control usually includes financial and social limits that affect women’s ability to go to work, keep their job, and have some control over their finances; as a result, women who are experiencing domestic violence change jobs more often and
have fewer economic resources (Brush & Higgins, 2004; Lloyd, 1997; Sonis & Langer, 2008). Women whose partners sabotage their jobs or efforts to work have more problems with hardship and food and housing insecurity (Brush & Higgins, 2004). Reduced employment, reduced income, and other problems associated with hardship affect a woman’s ability to plan for economic security and may, instead, lead to a longer term dependence on formal and informal assistance (Tolman & Wang, 2005). However, there is evidence that in the long-term, stable employment can be attained by women who are no longer being currently abused (Staggs & Riger, 2005). In fact, being employed is related to long-term wellbeing and stability and associated with a lower risk for revictimization in the years after domestic violence intervention (Bybee & Sullivan, 2005). Also, battered women who are employed are more likely to seek legal assistance to address domestic violence (Fleury-Steiner, Bybee, Sullivan, Belknap, & Meltron, 2006).

**Ecological Theory**

As noted above, the complicated relationship between domestic violence and housing problems leads to a dependence on social services. The nature of this dependence is not always clear as individual, social, organizational, and cultural factors all affect the outcomes of the formal support provided. For example, problems with housing and financial stability as a result of domestic violence are related to a variety of risk and protective factors, such as childhood abuse, substance abuse, social networks, public assistance, and cultural norms. Understanding these interrelated issues is important, but challenging. Research tends to focus on very specific elements (like medical research on
health implications, psychological research on barriers to recovery) of domestic violence and housing problems (Baker, 2010; Heise, 1998).

By contrast, ecological theory may be better equipped to understand this complex relationship. Initially developed by Bronfenbrenner (1979) to explain human development in social and cultural context, ecological theory has been applied to a variety of social problems as a way of accounting for predictors and influences found within individuals, families, communities, and cultures—and looking at the interactions between these levels of influence. The ecological model is depicted as embedded circles of influence, a small circle representing the individual contained by larger circles for each outer level.

This framework can be used to explain the link between domestic violence and housing instability and their correlated individual- and community-level factors (Baker, 2010; Campbell, Dworkin, & Cabral, 2009; Heise, 1998; Riger et al, 2002; Sitaker, 2007). It also allows researchers to account for an individual’s interaction with the world at various levels from the individual to the family, community, and up to policy and global levels, and has been used to understand domestic violence and related issues (Baker, 2010; Campbell et al, 2009; Heise, 1998; Swick & Williams, 2006). This model also acknowledges the passing of time and interactions between these relationships over time (Heise, 1998). Additionally, the ecological model allows researchers to investigate social services from a systems perspective, acknowledging the web of interrelationships within and among the organizations and beyond (Allen et al., 2007; Foster-Fishman & Behrens, 2007; Hawe, Shiell, & Riley, 2009; Schensul, 2009).
Bronfenbrenner’s embedded circles of influence in development have often been used as a framework to study violence in the home—especially child abuse (Little & Kantor, 2002). This model has also been used to explain violence against women, though not extensively (Campbell et al, 2009; Sitaker, 2007). Heise (1998) presents a theory to explain the varying conditions that lead to male-female violence, from the sociocultural climate of male privilege (macrosystem) down to institutional and community influences such as poverty (exosystem), to family and household conditions such as substance abuse by the partner (microsystem), and finally to the personal history of individual women, including childhood exposure to abuse and violence—all factors that have been empirically found to influence or correlate with male-perpetrated domestic violence. Many of these factors also affect homelessness and housing instability in women who have experienced domestic violence (Baker, 2010). This ecological perspective helps synthesize existing studies in the social sciences and provides a way of thinking about domestic violence, highlighting vulnerabilities such as housing problems.

Following from the ecological model, risk and protective factors related to the individual, social, institutional, and policy and cultural levels will be discussed below. Interventions are targeted at a variety of levels to address the needs of women and families who experience domestic violence and are at risk for housing instability, such as counseling at the individual level and public entitlements at the policy level (Baker, 2010; Carlson, 1997). Ecological theory has also been used to explain the success of women’s help-seeking efforts (Campbell, 1998; Campbell et al, 2009). In particular, domestic violence services often focus on only one domain (such as individual mental health) and have been criticized for ignoring the contextual factors involved in the process of escaping abuse and
achieving stability. It is important to understand how these varying levels interact to assess the role of formal services and how to optimize limited resources to provide the greatest impact. Contextual factors in the individual, social, institutional, policy and cultural domains will be discussed below to highlight the importance of each level of influence and how this wider view can contribute to the improvement of social services in support of battered women. While this study focuses on the institutional level (and to a lesser extent on the policy level), interactions with individual and social factors are important to consider, and will be included in the data collection process where possible.

**Individual-level.** Individual-level factors that predict increased risk of domestic violence include: childhood experience or witness of violence, sexual molestation in childhood, low self-esteem, poverty, being unmarried, and individuals’ or partners’ substance abuse and poor work history (Buzawa, Hotaling, & Byrne, 2007; Caetano, Ramisetti-Mikler, & Harris, 2008; Cattaneo & Goodman, 2003). It is important to note that ethnicity and race are not predictors of domestic violence when analyses control for socioeconomic status (Bassuk et al, 2006). Many related factors are predictors of perpetration as well as victimization, such as experiencing violence and abuse in childhood (Baker et al., 2003; Berzenski & Yates, 2010; Sitaker, 2007).

A major theme in the research of individual risk factors is a cycle of violence and victimization, from violence and abuse in childhood to partner violence and victimization in adulthood, all of which can be a barrier to long-term economic and housing stability (Bassuk et al, 2006; Berzenski & Yates, 2010; Black et al, 2010; Buzawa et al, 2007; Byrne, Resnick, Kilpatrick, Best, & Saunders, 1999; Vatnar & Bjorkly, 2008). Childhood factors
that have been found to be predictors of both domestic violence and housing instability revolve around various types of abuse and victimization. A history of foster care, physical abuse, witnessing domestic violence, and sexual abuse have all been found to predict or correlate with domestic violence in adulthood, especially revictimization, where there is more than one period of violence in a woman’s adult life (Buzawa et al., 2007).

As discussed above, another ongoing correlate for women is poverty; women receiving welfare benefits have a much higher rate of domestic violence— and among welfare recipients, those who had a history of substance abuse, homelessness, and being single, divorced, or separated had even higher rates of violence (Lown et al., 2006). Poverty is also a societal problem and is an example of a multi-level factor that moderates the effects of domestic violence and housing instability (Heise, 1998). However, longitudinal research has found that while many poor women experience some form of domestic violence in their lifetimes, it is not a constant. Rather, it occurs during brief periods (Bybee & Sullivan, 2005). Homelessness for families and low-income women also tends to also be episodic, marking a brief period of time, though housing instability may be more chronic (Baker et al., 2003; Patterson & Tweed, 2009).

Although abuse is episodic, negative effects on women’s wellbeing may last for years. Mental health effects, such as depression, may also continue after the abuse has ended and can affect a woman’s ability to cope (Anderson et al., 2003; Beeble, Bybee, Sullivan, & Adams, 2009; Bassuk et al., 2006; Campbell et al., 2009). Beeble and colleagues (2009) found that psychological abuse (as opposed to physical abuse) was most associated with quality of life outcomes in the years following abuse. Consistent with the learned
helplessness model of depression, the use of power and control by the abuser can lead to a feeling of victimization and powerlessness that results in depression (Filson, Ulloa, Runfola, & Hokoda, 2010). Lifecourse perspectives and cluster analyses have revealed how experiences of violence affect women’s interactions with other levels beyond the individual (Campbell, 1998; Yoshihama et al, 2006).

**Social level.** Women who face domestic violence commonly talk about the abuse with their friends and family; they seek and often receive support from their social and familial circles (Goodkind, Gillum, Bybee, & Sullivan, 2003; Levendosky et al, 2004). A great deal of research has examined the interaction among social networks, domestic violence, and housing problems (Levendosky et al., 2004; Riger et al, 2002). Social support is often categorized into informal (personal friends and family) and formal (institutional providers such as therapists and social workers). Support can be either tangible (providing a place to stay, money, transportation, childcare, etc) or intangible (emotional or informational support)—both forms have been found to be beneficial, but tangible support (often an offer of a place to stay) is more strongly associated with better outcomes for women trying to leave their abuser (Beeble et al., 2009; Goodkind et al, 2003; Vostanis, Tischler, Cumella, & Bellerby, 2001). Social support is also related to improved psychological wellbeing and better housing outcomes for people facing housing problems or homelessness. For homeless adults, social support facilitates stable housing (Calsyn & Winter, 2002). If members of one’s social network are unable to help, then tangible support must come from external, institutional sources (Goodkind et al., 2003).
Institutional level. Formal institutions play a significant role in the lives of poor women who are homeless or experiencing housing problems and can play a key role in the stability and safety of those experiencing domestic violence (Bybee & Sullivan, 2005). Institutional support is generally structured by public policy at local and national levels and these policies can further help or hinder women’s future success (Baker et al., 2010; Riger & Krieglstein, 2000). In particular, research has shown that community, public policy, and cultural factors affect the level of violence and mental health problems in women’s lives, which can either complicate or facilitate long-term housing stability (Heise, 1998; Hendryx & Ahern, 1997; Pascall, Lee, Morley, & Parker, 2001; Vostanis, et al, 2001).

Informal support often helps women find and fully utilize formal supports (Goodman et al, 1999; Liang et al, 2005). Because domestic violence can result in a variety of physical and mental health problems as well as financial, employment, and housing needs, it can be difficult to resolve problems and completely escape abuse without formal outside support (Lown et al, 2006). Organizations are a vital part of providing support to domestic violence victims, and a key area of focus when looking to improve women’s success (Allen, et al. 2007). Women in domestic violence situations engage in a variety of help-seeking activities as they try to address housing, education, employment, and legal issues, thereby indicating a need for individualized support and a variety of available services (Allen et al, 2004). When women leave their abuser, they may also put distance between themselves and their friends and family, leading them to rely more on formal support than they would if they were closer to home (Bostock, Plumpton, & Pratt, 2009). Women seek help when they recognize that domestic violence is a problem, and one that is not going to be solved without outside intervention, and they then select a source of help.
based on the options available, prior experience, and sociocultural influences such as culture and social class (Liang et al., 2005). When providers such as the police or welfare case workers respond inadequately or negatively, women are at greater risk for housing problems and homelessness (Baker et al., 2003).

Most cities have resources that focus on providing services for women experiencing domestic violence. Services specific to domestic violence include hotlines, counseling, legal advocacy, emergency shelters, and transitional housing. Overall, these services have been found to be effective in helping women escape abuse and improve their living situation and wellbeing (Bennett, Riger, Schewe, Howard, & Wasco, 2004). However, although these services may be beneficial, many women do not use them because of cultural or language barriers, lack of access (as in rural communities), or lack of information (Goodkind, Sullivan, & Bybee, 2004). Also, some are perceived as less helpful than others by their clientele due to other barriers related to sexual orientation or disability (e.g., shelter staff and other residents may not be supportive of lesbian women; some shelters do not have the facilities to accept women with specific types of disability); or due to limits of the program such as funding and space (Baker, Niolon, & Oliphant, 2009; Baker et al., 2010; Roberts & Lewis, 2000; Senturia, Sullivan, Ciske, & Shiu-Thornton, 2000).

In addition to direct services for abused women, many service providers also have prevention activities and outreach services and some may have batterer intervention programs. Community-based programs with a multi-level focus are designed to address the interaction of domestic violence and related problems at different ecological levels (Trickett, 2009). Advocate services within these programs can provide a great deal of
support for women navigating the legal system and can help women with their individual needs while also maintaining their safety (Allen, et al, 2004; Bybee & Sullivan, 2005). These different kinds of domestic violence-specific organizations often work together to share information, improve their coordination, and engage in joint community outreach, education, and lobbying. This kind of coordination can be an effective and important part of the community response to domestic violence (Allen, Watt, & Hess, 2008).

Welfare services. Other forms of institutional support directed at addressing poverty have also been found to improve the lives of abuse survivors. Women who have left an abusive relationship have a better quality of life if they are receiving public assistance (Ham-Rowbottom, Gordon, Jarvis, & Novaco, 2005). Welfare is an important support for women who have been in violent intimate relationships, as they are overrepresented in the population of women receiving welfare; and partner violence leads low-income women to seek out welfare services (Kimerling & Baumrind, 2004; Yoshihama et al, 2006). Because evidence suggests that welfare is important for women experiencing domestic violence and that abusers frequently disrupt women’s ability to go to work and school, many states have instituted a Family Violence Option to their welfare rules. This option temporarily exempts women from some of the requirements of receiving assistance. Welfare rules requiring work or school activities can be difficult for abused women to follow, as these activities may provoke the abuser. Also, without financial support of some kind, women can be further marginalized and at increased risk for housing instability (Riger et al, 2004; Roschelle, 2008).
Criminal justice system services. In addition to welfare services, police and the criminal justice system are key service providers in addressing domestic violence. The criminal justice system can be facilitative to women leaving their partners or a barrier to long term success depending on how women experience their interaction (Fleury-Steiner et al, 2006). However, women who experience psychological abuse only are less likely to use the legal system, and use of the legal system increases with the severity of the abuse (Duterte, Bonomi, Kernic, Schiff, Thompson, & Rivara, 2008). In addition, women who have negative interactions with the police or courts are less likely to look to them for help in later experiences of violence, which can leave women vulnerable (Fleury, Sullivan, Bybee, & Davidson, 1998). In fact, some women minimize their abuse to police—who are often called by a friend or neighbor, not the victim herself (Erez & Belknap, 1998).

A negative experience with the criminal justice system can also leave women feeling revictimized, exacerbating the psychological and emotional effects of the abuse (Epstein, Bell, & Goodman, 2003). Some women are literally revictimized by their batterer while a case against him is pending in court, which can leave women feeling unprotected by the legal system and thus distrustful of it as recourse for their abuse (Goodman, Dutton, & Bennett, 2000; Erez & Belknap, 1998; Fleury-Steiner et al, 2006). Interestingly, women are more likely to have a completed court case when they receive battered women’s services and a protective order, indicating that acquiring different services is helpful and may be necessary for women to achieve long-term safety and stability (Weisz, Tolman, & Bennett, 1998).


**Housing assistance.** Women’s individual histories as well as the specific kind of assistance being sought can affect financial and housing stability (Berger et al, 2008; Deverteuil, 2005). For example, abused, low-income women often rely on public housing programs and funding. However, public housing assistance can be limited; housing supports such as Section 8 often have years-long waiting lists. Women’s credit and criminal histories can also limit TANF and housing support options (Hirst, 2003; Kubiak, Siefert, & Boyd, 2004).

In particular, housing supports can be broken down into those that are designed to meet either immediate, emergency housing needs or those that provide a path toward long-term housing stability. Domestic violence shelters are common across the country and help battered women by maintaining a safe, confidential location and access to other services such as counseling and referrals to other providers. Battered women also use emergency homeless shelters; women in both types of shelter are similar in terms of socioeconomic status and lifetime violence and trauma and have similar post-shelter needs (Stainbrook & Hornik, 2006). Shelters usually serve as short-term support during a crisis and often do not have the funding to provide longer term transitional housing (Roberts & Lewis, 2000). However, women are still at risk for housing instability after exiting a shelter and some may have to stay with friends or family before finding independent housing of their own (Compton, Michael, Krasavage-Hopkins, Schneiderman, & Bickman, 1989).

Transitional housing programs can play an important role in helping women transition from temporary shelter to a permanent living situation away from their abuser. Unlike other kinds of transitional housing programs, those targeted toward domestic
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violence victims provide specific supports for this population, for example, enforcing rules and procedures to protect women from their abusers, and providing therapeutic support for abuse victims (Baker et al., 2009). However, sometimes these rules and procedures are seen as overly intrusive, and women end up leaving (or being asked to leave) the program before obtaining long-term housing.

It is also important to note that there is a connection between the type of housing that women obtain and their risk for domestic violence. Data show that rates of domestic violence are higher in long-term public housing developments compared to other low-income neighborhoods, and public housing may in fact be a risk factor for domestic violence (Raphael, 2001). Also, prior to 2005 violence in the home jeopardized housing support, since housing policy for public housing developments required eviction when a crime was committed in publicly funded housing (Renzetti, 2001). The 2005 re-authorization of the Violence Against Women Act changed these rules to protect women from abuse and helped them to preserve their housing. Other provisions from this re-authorization allow women to move at times that would otherwise be prohibited if their safety is threatened. Despite these improved protections, women are still vulnerable to public housing authorities and landlords that may still want to limit women’s access to housing due to the risk posed by a “risky” household with unstable rental, credit, or employment history and a history of violence (Baker et al., 2010). Therefore, while public housing can be beneficial for women leaving abusive relationships, it can also threaten housing stability for women still in violent relationships, especially in cases where there is active stalking.
Community, policy, and cultural level. Different types of violence are interrelated, and community or neighborhood violence is associated with other types of interpersonal violence (James, Johnson, Raghavan, Lemos, Barakett, & Woolis, 2003). In contrast, women who feel supported by their communities are more likely to turn to community resources, such as the legal system, for help with domestic violence (Fleury-Steiner et al., 2006). Community resources are made available often as a result of enacted public policy. While private agencies provide some services for victims of domestic violence, many low income battered women receive a great deal of support from public programs, as discussed in the previous section. The policies that these agencies follow, therefore, are important, and may lead to better or worse outcomes for women. Policies may not only reflect how our society thinks about an issue (and therefore how it responds) (Riger & Krieglstein, 2000; Salazar, Baker, Price, & Carlin, 2003), but also from a practical perspective, whether battered women are able to maintain their benefits despite the complicating factors associated with domestic violence, such as substance abuse (Hirst, 2003; Kubiak et al, 2004; Pascall et al, 2001). When policies actually serve as barriers to receiving support such as housing subsidies or welfare, abused women are more likely to experience negative consequences such as depression, homelessness, and continued violence (Kubiak et al, 2004; Pascall et al, 2001).

The kind of support women seek and receive and its effectiveness is also dependent on the culture of the individuals involved and the dominant culture where they live. However, most battered women show similar reactions and need similar kinds of support regardless of their cultural context (Magnussen, Amundson, & Smith, 2008). Culture may impact the psychological effects of abuse; for example, some women may feel a sense of
shame reflective of collectivist culture (Magnussen, Shoultz, Oneha, Hla, & Brees-Saunders, 2007). More pervasive is the belief in cultures around the world of male dominance over women and a strict view of gender roles, which is predictive of male violence against women (Sugarman & Frankel, 1996).

**The Present Study**

Together, community and societal concerns combined with individual, social and institutional risk and resilience factors reflect the complicated nature of domestic violence and how it can jeopardize women’s safety and housing security. For women whose lives have been made insecure by partner violence, it is important to better understand how to provide stability and improve long term outcomes through the existing services accessed by women seeking help. Using systems thinking and an ecological approach, this study will investigate how social services support women with domestic violence and housing problems, accounting for individual and social characteristics of the women they serve, as well as organizational-level factors associated with specific service organizations and the service sector as a whole. Because of their importance in the literature, the following client factors will be examined for their impact on women’s housing: having children, employment status, social support, and whether a woman was in an abusive relationship when she accessed formal services (Baker et al, 2003; Sitaker, 2007; Tollman & Wang, 2005; Roll, Toro, & Ortola, 1999). Important organizational-level variables included whether programs had rules for program entry and participation, how well agencies work with other social service providers, and the number and types of services and referrals provided (Baker et al, 2010; Bennett et al, 2003; Kimmerling & Baumrind, 2004).
Therefore, this study will examine the available services for domestic violence victims, focusing on those aimed at increasing housing stability, by interviewing service providers in order to explore women’s trajectories through the social service system. Providers from two types of social services will be interviewed, those addressing domestic violence (e.g., shelters or advocacy programs) and those addressing housing problems (e.g., homeless shelters or transitional housing programs). A beneficial outcome for victims includes movement into safe, long-term housing.

**Method**

**Participant and Agency Characteristics**

Data were collected through phone interviews with 64 service providers whose clientele included battered women or women who were homeless or at risk for homelessness. Providers were recruited from agencies across the United States (sampling procedures are described below). The final sample included nineteen agencies that provided services for homeless women and 45 that provided domestic violence services. Providers at these agencies were asked to participate in the survey if they worked with adult female clients who were seeking either homeless or domestic violence services, and provided case management services. Their total experience averaged 12.7 years (with a range of 3 months to 37 years) and the amount of time at their current jobs averaged 6.3 years (with a range of 1 month to 20 years). Participants’ ages were roughly equally distributed across age groups (see Figure 1 for participant age groups). Participants’ education ranged from high school diploma to graduate education (see Figure 2 for participant education level).
Figure 1. Participants by Age Group.

![Age Group Pie Chart]

Figure 2. Participants by Education Level.

![Education Level Bar Chart]

The participants had a variety of job titles, though most currently worked directly with clients, providing case management or other types of client services (even executives
and managers who participated worked with clients in some capacity). See Figure 3 for a description of participants’ positions.

Figure 3. Participants by Job Category.

Agencies were distributed geographically and reflected both urban and rural areas. About 70% (46) of the responding agencies were in more highly populated areas, the remaining 18 were in more rural areas, as determined by the 2010 census (participants were asked their state and county; U.S. Census, 2010). Agencies were fairly evenly distributed across the country, with the exception of fewer agencies from the Northeast (Figure 4 shows the geographic distribution of participating agencies).

![Figure 3: Participants by Job Category](image-url)
Agencies also varied in size from small shelters housing a few women and their children, to large multi-site agencies providing diverse types of services. Figure 5 shows agency size by typical caseload, number of direct service staff, and number of volunteers. Agencies had a somewhat large capacity, with about two-thirds (67.2%) holding more than 20 cases at a time. On the other hand, they also had small numbers of staff (note that these do not include administrative staff or other staff who do not directly serve clients); the majority of agencies (79.7%) had 10 or fewer staff members working with clients. The staff to client ratio was about 1:4; the mean number of staff is 10.4 and the mean caseload is 41.5. Volunteers varied widely from none up to 200, though most agencies relied on volunteers for things like day-to-day work or fundraising activities. The mean number of

---

2 Caseloads were defined by the respondent; some agencies handled a family as one case, some handled each family member as a case.
volunteers is 19, but the median is 5, indicating that most agencies relied on a handful of volunteers.

Figure 5. Agency Size: Caseload, Staff, and Volunteers

![Bar Chart]

**Measures**

The service provider survey for the current study was developed by adapting the survey used by Campbell (1998), in which rape victim advocates were interviewed in order to answer similar questions about victim interaction with social services. In addition to basic information about the service provider respondents and agency characteristics described above, the survey covered parts of each ecological layer as it pertained to domestic violence services, housing services, and outcomes for women.

After collecting demographic information about the service provider respondent, a description of the program was collected, including program type, region, and size. Participants were asked about the quality of relationships with other social service
agencies, about their policies for admitting new clients, and rules for client participation. The final section asked participants to describe the case of the most recently discharged client. Individual client information included demographics, the quality of social support, services provided, referrals made, and housing outcomes. Several open-ended questions were included in the survey to gather more in-depth information about the clients, as well as the agency’s procedures for working with clients. In particular, questions examined the characteristics of a typical client and agency procedures for discharging a client. See Appendix A for the full survey instrument.

A detailed description of the specific variables included for each layer of the ecological model examined in the present study, and how these variables were calculated is provided below. Note that three variables are composite variables combining the responses of more than one question. These variables are: the number of services and referrals provided, domestic violence and mental health services and referrals provided, and housing and economic services and referrals provided.

**Individual-level variables.** Individual-level client characteristics were measured by asking providers to respond to single-item questions that examined the client’s number of children (Question 30), her highest level of education (Question 27), her employment status at discharge (Question 58), whether she had tangible support from friends or others (Question 35), whether she had emotional support from friends or others (Question 37), and whether she was in an abusive relationship at intake (Question 44). Variables were recoded to be categorical; for example number of children was recoded to reflect 0 = none or adult children and 1 = 1 or more children. Employment status was coded as 0 =
unemployed and 1 = employed. Tangible and emotional support were recoded as 0 = none and 1 = some. Finally, whether the client was in an abusive relationship was coded as 0 = no and 1 = yes.

**Organizational-level variables.** Organizational-level variables were also measured by asking providers single-item questions about their agency’s rules for program entry and participation, and how well their agency collaborated with others agencies in the community. Specifically, providers were asked the following: What sort of screening do you do for client participation in your program? (Question 19); After clients are accepted into your program what are the rules and requirements for continued participation? (Question 20); How well do different kinds of agencies work together in your area? (Question 16); and What type of agency or program do you work for? (Question 2). Responses were recoded into categorical variables; for example, Question 19 was recoded as no screening = 0 and any screening = 1. Question 20 was recoded as no rules = 0 and any rules = 1. Question 16 was recoded as not well = 0 and well (included pretty well and well) = 1. Question 2 was recoded as 0 = homeless service agency and 1 = domestic violence agency.

In addition, three composite variables were created for the number and type of services and referrals provided. The number of services and referrals was a continuous variable that was computed by summing all “yes” responses to the following questions: Did you provide services for this client related to housing (Question 40); Did you provide services to this client for domestic violence (Question 45). In addition, two other questions were used to compute number of types services and referrals: Other than housing and
domestic violence services you described as being provided by your agency what other types of services did you provide while she was in your program (Question 50); and Did you provide other kinds of referrals to clients? (Question 51). Variables representing Type of Services and Referrals (Domestic Violence/Mental Health and Housing/Economic) were also created from these questions. A new categorical variable was created to reflect any housing or economic services and referrals provided to the client (e.g., cash assistance, housing assistance, employment assistance, etc. were coded as 1 for this variable). A separate categorical variable was created to represent any domestic violence or mental health services and referrals provided to the client.

**Procedures**

Qualifying agencies were compiled from national and state databases (such as National and State Coalitions Against Domestic Violence). For example, each state has a coalition against domestic violence. The websites for these coalitions include a list of agencies throughout the state. Agencies were then listed in a spreadsheet. Homeless agencies were found in a similar manner, as most states have homeless coalitions as well. After the spreadsheet with all agencies in each state was compiled, the list was randomized using the Excel formula “=Rand()” that generates a random number between 0 and 1. The random numbers were then sorted in order, and the top 300 agencies were used as the initial sample, with the subsequent 300 later included as more respondents were needed. The list of agencies to contact was limited to 300 at a time because of the need to share this spreadsheet in a digitally secure way—Google spreadsheets were limited to around 300 rows at the time of data collection.
While this approach provided a random sample of the population of agencies from information available online, sampling was directed more deliberately from this pool in order to ensure that the participating agencies were evenly distributed across regions and agency types. Therefore, agencies were sorted by region and type (homeless or domestic violence), and the first agency of each type in each state was contacted, and then subsequent ones down the list. Agencies were contacted by phone or email, provided with a brief description of the study, and asked if the director or a staff member who works directly with clients was available for an interview. Although in the beginning agencies were contacted to ensure a fairly even distribution of agencies across the country and samples of both homeless and domestic violence agencies, over time, agencies were contacted more deliberately to fill gaps in region or agency type.

In total, 4,607 agencies were compiled; 663 agencies were randomly selected to be contacted. Of those, 411 were omitted as ineligible (e.g., served only men or youth, or the agency contact information was inaccurate and could not be found) or because that agency type in that state had already completed an interview. Although more than one agency of the same type in the same state was interviewed, steps were taken to avoid an overrepresentation of agencies in one state and over time the preferred method was to contact agencies in states that had not been contacted previously. Of the remaining 252 agencies, about two-thirds were contacted initially via email and the remaining third were contacted initially by phone (unfortunately, tracking of the method of contact was not consistent throughout the project). Many agencies ignored e-mail contacts and some did not follow through after their initial response. Attempts were made to follow-up e-mails with phone calls, though many of these calls also went unreturned. Ultimately, 64 service
providers participated in the study (19 from homeless agencies and 45 from domestic violence agencies). Data collection began in July of 2011 and ended in October of 2013 (due to an illness, no data collection occurred from April of 2012 to April of 2013).

For two semesters, undergraduate students were recruited (for course credit) to help collect data. One student worked for two semesters (Fall, 2011 and Spring, 2012), and one student for one semester (Spring, 2012). Students collected 19 (about 30%) of the total surveys. Students were trained by first reading the project proposal, and related IRB documents. I then modeled an interview with them by showing how to ask each question to ensure they understood the intent of the question. Then, they practiced the interview by interviewing me over the phone. I provided sample scripts for emails and phone calls in order to help them contact providers. Using password-protected Google documents, we shared a spreadsheet to track contacts and completed surveys.

Structured interviews with service providers were conducted by phone and generally lasted about 30-45 minutes. Interviews consisted of both closed- and open-ended responses focused primarily on providers’ most recently discharged adult female case in order to assess that particular client’s path through the social service system. Surveys were confidential, and interview responses were typed into an online survey instrument that was password protected. Respondents were given a $10 gift certificate to Amazon.com for participating in the survey (8 participants refused the gift). Informed consent was obtained verbally prior to the interview, with written copies of the agreement available to participants upon request.
Data security was maintained by password protecting information. Spreadsheets tracking the sample of service providers and contacts made were kept secure using Google Documents (only I and the two student researchers had access to this information; students’ access was revoked when they were no longer participating). Responses were kept in an online survey instrument (SurveyMethods.com); only I had access to the password. Responses were then downloaded and maintained on my password-protected computer. Results were analyzed using SPSS and Excel.

**Data Analysis Plan**

Initially, chi-square analyses were conducted to examine differences in client and organizational-level characteristics between homeless and domestic violence agencies. Additional chi-square analyses were conducted to examine the different variables that might be related to the woman’s housing status at program exit. From these analyses, logistic regression models were developed, using an ecological framework, to consider the associations with client characteristics and organizational-level characteristics separately. Because of the small sample size a comprehensive model that included both sets of characteristics could not be conducted in the early stages of the analyses.

The first logistic regression model included client characteristics that were found to be important both in the initial chi-square analyses as well as in the literature (e.g., number of children, employment status, education, received social support). The second regression included organizational-level characteristics such as agency rules and requirements for entry into the program and program participation. The third regression considered the number and types of services that women received. Using the results of
these regression analyses, a comprehensive model was built that included the variables found to be significant in these earlier models, as well as variables that were shown to be theoretically important in the literature. In this way, individual, social, and organizational-level characteristics could be examined in a more focused analysis. This approach of building up to a comprehensive model was necessary because of the study’s small sample size, and therefore, limited power to test a comprehensive model with a large number of independent variables. Also, due to limited power, significance was considered at the $p < .10$ level. Given that much of the recent housing literature (e.g., Baker, 2010) is focused on permanent housing solutions for women rather than transitional options that may create instability in the future, the current study’s dependent variable is permanent housing at exit compared to all other types of housing (i.e., shelter, transitional housing programs). The outcome variable is derived from Survey Question 59, “What was her housing status when she left your program?”

It should also be noted that there were missing data on several survey questions. Providers did not always know the answers to survey questions. In particular, “don’t know” responses are found most in client data, especially questions related to client outcomes at discharge. The client variables with missing responses are client education (5 missing), employment status at discharge (3 missing), and whether the client was in an abusive relationship at discharge (13 missing). The only organizational-level variable with missing responses was how well agencies work with different social services (4 missing). Finally, the dependent variable used in the regression models was whether a client found permanent housing at discharge; 3 responses were missing in this variable, as providers did not know where these clients went after leaving the program.
In addition to the quantitative analyses, three open-ended questions were analyzed. Respondents were asked to describe a typical client at their agency, and whether the client they had just discussed was typical. Respondents were also asked to describe their procedures for dismissing a client from the program. Finally, providers were asked to describe the ideal path through their program to successful completion Data analysis followed the procedures outlined by Corbin and Strauss (2008). First, responses to these questions were typed into a word document. Then, open coding was used to organize data into initial categories. Next, axial coding was used to organize categories into higher-level (thematic) concepts.

Results

Client Characteristics

Table 1 summarizes the demographic characteristics of the female clients described by service providers. Women were generally young, with a median age of 32. The majority (63.5%) did not have education beyond high school. A little over half (54.7%) were White, and most of the remaining (29.7% of the total) were African American. Only one client was an immigrant. Most (57.8%) had two or more children, and another 25% had one child. Almost all of the clients (84.4%) were unemployed at intake and about half (53.2%) were homeless.
Table 1. Client Characteristics.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 or younger</td>
<td>12</td>
<td>18.8</td>
</tr>
<tr>
<td>25-34</td>
<td>26</td>
<td>40.6</td>
</tr>
<tr>
<td>35-44</td>
<td>15</td>
<td>23.4</td>
</tr>
<tr>
<td>45-54</td>
<td>9</td>
<td>14.1</td>
</tr>
<tr>
<td>55 or older</td>
<td>2</td>
<td>3.1</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>single/divorced/separated</td>
<td>34</td>
<td>53.1</td>
</tr>
<tr>
<td>married/cohabiting</td>
<td>28</td>
<td>43.8</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Some high school</td>
<td>11</td>
<td>17.5</td>
</tr>
<tr>
<td>High school diploma</td>
<td>29</td>
<td>46.0</td>
</tr>
<tr>
<td>Some college</td>
<td>10</td>
<td>15.9</td>
</tr>
<tr>
<td>2 year degree</td>
<td>3</td>
<td>4.8</td>
</tr>
<tr>
<td>4 year degree</td>
<td>6</td>
<td>9.5</td>
</tr>
<tr>
<td>Other/Don’t know</td>
<td>4</td>
<td>6.3</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>35</td>
<td>54.7</td>
</tr>
<tr>
<td>African American</td>
<td>19</td>
<td>29.7</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>15.6</td>
</tr>
</tbody>
</table>
### Client Characteristics

<table>
<thead>
<tr>
<th>Immigration status</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>US citizen</td>
<td>63</td>
<td>98.4</td>
</tr>
<tr>
<td>Non-citizen</td>
<td>1</td>
<td>1.6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of children</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>none or adult</td>
<td>11</td>
<td>17.2</td>
</tr>
<tr>
<td>1 child</td>
<td>16</td>
<td>25.0</td>
</tr>
<tr>
<td>2 or more</td>
<td>37</td>
<td>57.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment status</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>unemployed</td>
<td>54</td>
<td>84.4</td>
</tr>
<tr>
<td>employed</td>
<td>10</td>
<td>15.6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Housing status</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>homeless</td>
<td>33</td>
<td>53.2</td>
</tr>
<tr>
<td>temporarily housed</td>
<td>13</td>
<td>21.0</td>
</tr>
<tr>
<td>permanently housed</td>
<td>16</td>
<td>25.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abusive relationship</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>no</td>
<td>8</td>
<td>13.6</td>
</tr>
<tr>
<td>yes</td>
<td>51</td>
<td>86.4</td>
</tr>
</tbody>
</table>

Client characteristics were then compared by agency type to determine whether there were any differences in the clients that accessed homeless vs. domestic violence service agencies. Table 2 summarizes the significant differences between clients of each agency type. Generally, there were few significant differences, except on some expected characteristics of the client populations, such as the requirement that a client be homeless prior to admission to a homeless shelter or that a client be the victim of domestic violence.
prior to admission to a domestic violence shelter. Therefore, the clients of homeless agencies were significantly more likely to be homeless at entry ($\chi^2 = 17.45, p < .001$). Clients of domestic violence agencies were significantly more likely to be married or cohabiting at program entry ($\chi^2 = 11.87, p < .001$), and significantly more likely to be in an abusive relationship at program entry ($\chi^2 = 22.87, p < .001$). Housing status at discharge was not significantly different between the two agency types, indicating that clients from both types of agencies were able to find housing ($\chi^2 = 0.8, p < .67$). Who the client lived with at discharge, however, was significant at the $p < .10$ level, with more clients from domestic violence agencies finding independent housing ($\chi^2 = 3.47, p = .06$).

Table 2. Comparisons of Client Characteristics by Agency Type

<table>
<thead>
<tr>
<th>Number of children</th>
<th>Homeless</th>
<th></th>
<th>Domestic Violence</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>None or adult children</td>
<td>4</td>
<td>21.1</td>
<td>7</td>
<td>15.6</td>
<td>11</td>
<td>17.2</td>
</tr>
<tr>
<td>1 or more children</td>
<td>15</td>
<td>78.9</td>
<td>38</td>
<td>84.4</td>
<td>53</td>
<td>82.8</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>100.0</td>
<td>45</td>
<td>100.0</td>
<td>64</td>
<td>100.0</td>
</tr>
</tbody>
</table>

$\chi^2$ 0.284  
$df$ 1  
$p$ 0.594

<table>
<thead>
<tr>
<th>Education level</th>
<th>Homeless</th>
<th></th>
<th>Domestic Violence</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>High school or less</td>
<td>11</td>
<td>61.1</td>
<td>29</td>
<td>70.7</td>
<td>40</td>
<td>67.8</td>
</tr>
<tr>
<td>More than high school</td>
<td>7</td>
<td>38.9</td>
<td>12</td>
<td>29.3</td>
<td>19</td>
<td>32.2</td>
</tr>
<tr>
<td>Total</td>
<td>18</td>
<td>100.0</td>
<td>41</td>
<td>100.0</td>
<td>59</td>
<td>100.0</td>
</tr>
</tbody>
</table>

$\chi^2$ 0.53  
$df$ 1  
$p$ 0.466
### Marital status at entry

<table>
<thead>
<tr>
<th></th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Married / cohabiting</td>
<td>2</td>
<td>11.1</td>
<td>26</td>
</tr>
<tr>
<td>Single</td>
<td>16</td>
<td>88.9</td>
<td>18</td>
</tr>
<tr>
<td>Total</td>
<td>18</td>
<td>100.0</td>
<td>44</td>
</tr>
</tbody>
</table>

χ² = 11.874  
*df* = 1  
*p* = 0.001

### Marital status at discharge

<table>
<thead>
<tr>
<th></th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Married / cohabiting</td>
<td>2</td>
<td>11.8</td>
<td>9</td>
</tr>
<tr>
<td>Single</td>
<td>15</td>
<td>88.2</td>
<td>31</td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>100.0</td>
<td>40</td>
</tr>
</tbody>
</table>

χ² = 0.883  
*df* = 1  
*p* = 0.347

### Abusive relationship at entry

<table>
<thead>
<tr>
<th></th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>No</td>
<td>8</td>
<td>47.1</td>
<td>0</td>
</tr>
<tr>
<td>Yes</td>
<td>9</td>
<td>52.9</td>
<td>42</td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>100.0</td>
<td>42</td>
</tr>
</tbody>
</table>

χ² = 22.865  
*df* = 1  
*p* = 0.00

### Abusive relationship at discharge

<table>
<thead>
<tr>
<th></th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>No</td>
<td>9</td>
<td>81.8</td>
<td>34</td>
</tr>
<tr>
<td>Yes</td>
<td>2</td>
<td>18.2</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>11</td>
<td>100.0</td>
<td>40</td>
</tr>
</tbody>
</table>

χ² = 0.066  
*df* = 1  
*p* = 0.797
### Housing status at entry

<table>
<thead>
<tr>
<th>Housing status at entry</th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Homeless</td>
<td>17</td>
<td>94.4</td>
<td>16</td>
</tr>
<tr>
<td>Temporarily housed</td>
<td>0</td>
<td>0</td>
<td>13</td>
</tr>
<tr>
<td>Permanently housed</td>
<td>1</td>
<td>5.6</td>
<td>15</td>
</tr>
<tr>
<td>Total</td>
<td>18</td>
<td>100.0</td>
<td>44</td>
</tr>
</tbody>
</table>

\[\chi^2 = 17.445\]
\[df = 2\]
\[p = 0.00\]

### Housing status at discharge

<table>
<thead>
<tr>
<th>Housing status at discharge</th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Homeless</td>
<td>2</td>
<td>12.5</td>
<td>3</td>
</tr>
<tr>
<td>Temporarily housed</td>
<td>3</td>
<td>18.8</td>
<td>12</td>
</tr>
<tr>
<td>Permanently housed</td>
<td>11</td>
<td>68.8</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>16</td>
<td>100.0</td>
<td>45</td>
</tr>
</tbody>
</table>

\[\chi^2 = 0.798\]
\[df = 2\]
\[p = 0.671\]

### Live independently at discharge

<table>
<thead>
<tr>
<th>Live independently at discharge</th>
<th>Homeless</th>
<th>Domestic Violence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Not independent</td>
<td>12</td>
<td>63.2</td>
<td>17</td>
</tr>
<tr>
<td>Independent</td>
<td>7</td>
<td>36.8</td>
<td>28</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>100.0</td>
<td>45</td>
</tr>
</tbody>
</table>

\[\chi^2 = 3.473\]
\[df = 1\]
\[p = 0.062\]
Examining client characteristics and permanent housing. A logistic regression was conducted to examine the effects of client characteristics on permanent housing at exit. The following independent variables were included in the regression: number of children (0 vs. 1 or more), education level (high school or less vs. more than high school), employment at discharge (employed vs. unemployed), tangible support (none vs. some), emotional support (none vs. some), and whether the client was in an abusive relationship (yes/no). Note that these variables were all coded as 0 being no or none, and 1 being yes or more than one. Only number of children was significantly related to permanent housing at exit (see Table 3). Results indicated that women with children are almost 12 times more likely to find permanent housing at program exit.
Table 3. Logistic Regression of Client Characteristics and Permanent Housing

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE</th>
<th>OR</th>
<th>95% CI</th>
<th>Wald</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client has children</td>
<td>2.45</td>
<td>1.10</td>
<td>11.53</td>
<td>[1.58, 84.13]</td>
<td>5.81</td>
<td>.01</td>
</tr>
<tr>
<td>High school education</td>
<td>.42</td>
<td>.88</td>
<td>1.53</td>
<td>[.27, 8.56]</td>
<td>.23</td>
<td>.45</td>
</tr>
<tr>
<td>Employment at discharge</td>
<td>-5.23</td>
<td>.87</td>
<td>.59</td>
<td>[.11, 3.27]</td>
<td>.36</td>
<td>.17</td>
</tr>
<tr>
<td>Tangible support</td>
<td>-0.975</td>
<td>1.90</td>
<td>2.65</td>
<td>[.06, 109.70]</td>
<td>.26</td>
<td>.97</td>
</tr>
<tr>
<td>Emotional support</td>
<td>-0.713</td>
<td>1.97</td>
<td>.49</td>
<td>[.01, 23.40]</td>
<td>.13</td>
<td>.24</td>
</tr>
<tr>
<td>Abusive relationship at discharge</td>
<td>-0.158</td>
<td>1.23</td>
<td>1.17</td>
<td>[.11, 12.92]</td>
<td>.02</td>
<td>.60</td>
</tr>
</tbody>
</table>

Organizational Characteristics

As with client characteristics, chi-square analyses were used to determine whether there were any organizational-level differences between agencies providing domestic violence services compared to those providing homeless services (see Table 4, for the results of these analyses). Generally, the relationships between agency type and community-level characteristics like region or urban vs. rural, were not significant. Rather, organizational-level policies and procedures were significantly different between the two types of agencies, both for admitting new clients and requirements for client participation. Exclusionary criteria for admitting new clients were significantly related to agency type, with homeless service agencies more likely to have criteria than domestic violence agencies ($\chi^2 = 15.13, p < 0.001$). Exclusions included not admitting potential clients with substance abuse problems or mental illness, for example. Rules for ongoing participation were also significantly different between homeless and domestic violence agencies ($\chi^2 = 5.61, p < 0.01$). In this case, domestic violence agencies were significantly more likely to have no requirements for participation beyond some basic interaction with staff, usually in
the form of periodic discussions with an advocate or case manager, and following house
rules; whereas, homeless agencies were more likely to have additional rules for
participation including that clients must seek employment or participate in program
activities such as therapeutic services.

Table 4. Comparisons of Community- and Organizational-Level Characteristics by Agency
Type

<table>
<thead>
<tr>
<th>Region</th>
<th>Homeless</th>
<th></th>
<th>Domestic Violence</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Northeast</td>
<td>2</td>
<td>10.5</td>
<td>6</td>
<td>13.3</td>
<td>8</td>
<td>12.5</td>
</tr>
<tr>
<td>South</td>
<td>7</td>
<td>36.8</td>
<td>10</td>
<td>22.2</td>
<td>17</td>
<td>26.6</td>
</tr>
<tr>
<td>Midwest</td>
<td>6</td>
<td>31.6</td>
<td>15</td>
<td>33.3</td>
<td>21</td>
<td>32.8</td>
</tr>
<tr>
<td>West</td>
<td>4</td>
<td>21.1</td>
<td>14</td>
<td>31.1</td>
<td>18</td>
<td>28.1</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>100</td>
<td>45</td>
<td>100</td>
<td>64</td>
<td>100</td>
</tr>
</tbody>
</table>

$\chi^2$ 1.652  
$df$ 3  
$p$ 0.648

<table>
<thead>
<tr>
<th>Urban/Rural</th>
<th>Homeless</th>
<th></th>
<th>Domestic Violence</th>
<th></th>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>&gt;50% Urban</td>
<td>13</td>
<td>64.4</td>
<td>33</td>
<td>73.3</td>
<td>46</td>
<td>71.9</td>
</tr>
<tr>
<td>&lt;50% Urban</td>
<td>6</td>
<td>31.6</td>
<td>12</td>
<td>26.7</td>
<td>18</td>
<td>28.1</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
<td>100</td>
<td>45</td>
<td>100</td>
<td>64</td>
<td>100</td>
</tr>
</tbody>
</table>

$\chi^2$ 0.159  
$df$ 1  
$p$ 0.69
Examining organizational-level characteristics and permanent housing.

Organizational-level characteristics were investigated in order to determine their effect on permanent housing. Two logistic regressions were conducted: the first, with agency rules and requirements; and the second, with number and type of services/referrals provided.
Table 5 shows the results of the first logistic regression. This regression shows the number of types of screening rules (none vs. one or more), the number of rules for participation (none vs. one or more), how well agencies work with other social services (not very well vs. very well), and agency type (homeless vs. domestic violence). With these variables, “none”, “not very well”, and “homeless” were all coded as 0. In this model, a significant predictor of permanent housing was the number of participation rules the agency has (none vs. one or more). Participation rules varied across agencies from a client-driven model that had no strict guidelines (beyond some safety-related issues) to those that had a host of requirements for therapeutic or other programming. How well agencies work with other social service agencies (very well vs. not very well) was also significant ($p = .078$). Number of screening rules (none vs. one or more), and agency type were not significant predictors.

Table 5. Logistic Regression of Organizational-Level Characteristics and Permanent Housing

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE</th>
<th>OR</th>
<th>95% CI</th>
<th>Wald</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of screening rules</td>
<td>.47</td>
<td>.76</td>
<td>1.59</td>
<td>[.36, 7.11]</td>
<td>.37</td>
<td>.542</td>
</tr>
<tr>
<td>Number of participation rules</td>
<td>1.78</td>
<td>.80</td>
<td>5.92</td>
<td>[1.23, 28.52]</td>
<td>4.91</td>
<td>.027</td>
</tr>
<tr>
<td>Agency works well with others</td>
<td>1.31</td>
<td>.74</td>
<td>3.69</td>
<td>[.86, 15.75]</td>
<td>3.11</td>
<td>.078</td>
</tr>
<tr>
<td>Agency type</td>
<td>1.14</td>
<td>.88</td>
<td>3.13</td>
<td>[.55, 17.65]</td>
<td>1.67</td>
<td>.197</td>
</tr>
</tbody>
</table>

The second logistic regression was conducted to examine the type and number of services and referrals for services. The variable measuring the number of services/referrals

---

3 Note that participation rules that were considered "house rules" like cleaning the living space and prohibiting fighting and violence were not considered in this analysis, rather policies such as attending programming or being active in job seeking and other programming-related rules were included.
reflects the number of types of services/referrals and is a continuous variable. This is a gauge of the amount of work that agencies did to help the client, but does not reflect whether many referrals of one type (e.g., several referrals for mental health care) were made. The variable, domestic violence/mental health services and referrals, indicates whether this type of service or referral was provided to the client (0 = no; 1 = yes). This variable includes any service or referrals to address emotional wellbeing, such as substance abuse treatment and group counseling. Similarly, housing services and referrals measures any services or referrals related to housing, such as subsidized housing and classes on how to be a good rental tenant. Again, agency type indicates whether it was a homeless or domestic violence agency. Table 6 shows the results of this model, and indicates that none of the service-related variables were significant predictors of permanent housing for women.

Table 6. Logistic Regression of Agency Services and Referrals and Permanent Housing

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE</th>
<th>OR</th>
<th>95% CI</th>
<th>Wald</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of services and referrals</td>
<td>.20</td>
<td>.13</td>
<td>1.22</td>
<td>[.94, 1.59]</td>
<td>2.34</td>
<td>.13</td>
</tr>
<tr>
<td>DV &amp; MH services and referrals</td>
<td>.16</td>
<td>1.13</td>
<td>1.18</td>
<td>[.13, 10.71]</td>
<td>0.02</td>
<td>.89</td>
</tr>
<tr>
<td>Housing services and referrals</td>
<td>.42</td>
<td>.76</td>
<td>1.52</td>
<td>[.35, 6.75]</td>
<td>0.31</td>
<td>.58</td>
</tr>
<tr>
<td>Agency type</td>
<td>-.53</td>
<td>.88</td>
<td>0.59</td>
<td>[.10, 3.30]</td>
<td>0.37</td>
<td>.54</td>
</tr>
</tbody>
</table>

**Comprehensive Model of Predictors of Permanent Housing**

A comprehensive model was developed to examine variables found to be significant from the separate regression models as well as those that would be expected to be important theoretically (e.g., emotional support, number of services and referrals provided). These variables represent the different ecological levels, and allow an
exploration of those levels that are most important in helping clients find permanent housing at program exit. Table 7 shows the correlations of each of the variables in this model.

Table 7. Correlation of Variables in the Comprehensive Model

<table>
<thead>
<tr>
<th>Measure</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Client has children</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Client is employed at discharge</td>
<td>.23</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Client has emotional support</td>
<td>.03</td>
<td>-.27</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Number of services/referrals</td>
<td>.12</td>
<td>-.68**</td>
<td>.33</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Agency has participation rules</td>
<td>.32</td>
<td>-.22</td>
<td>.23*</td>
<td>.05</td>
<td>--</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Agency works well with others</td>
<td>.17</td>
<td>-.37</td>
<td>.26</td>
<td>.27</td>
<td>.42</td>
<td>--</td>
<td></td>
</tr>
<tr>
<td>7. Agency type</td>
<td>-.08</td>
<td>.33</td>
<td>.01</td>
<td>-.41</td>
<td>.36*</td>
<td>.13</td>
<td>--</td>
</tr>
</tbody>
</table>

**p < .01 *p < .05

Table 8 shows the results of the comprehensive model. This model includes client individual and social characteristics, organizational characteristics, and the quality of interagency relationships. Results show that clients with children were 15 times more likely to obtain permanent housing at exit. Interestingly, clients who are employed at discharge are only one third as likely to attain permanent housing. Agencies that provide more services and referrals as well as having more participation rules are more likely to have clients who find permanent housing at exit. Finally, clients benefit from agencies that work well with other social service agencies as they are more likely to find permanent housing at exit in these contexts.
Table 8. Logistic Regression of the Comprehensive Model on Permanent Housing

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE</th>
<th>OR</th>
<th>95% CI</th>
<th>Wald</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client has children</td>
<td>2.73</td>
<td>1.16</td>
<td>15.27</td>
<td>[1.58, 148.00]</td>
<td>5.54</td>
<td>.019</td>
</tr>
<tr>
<td>Client employed at discharge</td>
<td>-2.42</td>
<td>1.16</td>
<td>0.09</td>
<td>[.01, .87]</td>
<td>4.31</td>
<td>.038</td>
</tr>
<tr>
<td>Client has emotional support</td>
<td>0.09</td>
<td>1.13</td>
<td>1.10</td>
<td>[.12, 10.09]</td>
<td>0.01</td>
<td>.935</td>
</tr>
<tr>
<td>Number of services/referrals</td>
<td>0.34</td>
<td>0.18</td>
<td>1.41</td>
<td>[.99, 2.01]</td>
<td>3.65</td>
<td>.056</td>
</tr>
<tr>
<td>Agency participation rules</td>
<td>2.00</td>
<td>1.00</td>
<td>7.38</td>
<td>[1.04, 52.60]</td>
<td>3.98</td>
<td>.046</td>
</tr>
<tr>
<td>Agency works well with others</td>
<td>1.59</td>
<td>0.89</td>
<td>4.91</td>
<td>[.86, 27.96]</td>
<td>3.21</td>
<td>.073</td>
</tr>
<tr>
<td>Agency type</td>
<td>-0.30</td>
<td>1.04</td>
<td>0.74</td>
<td>[.10, 5.74]</td>
<td>0.08</td>
<td>.774</td>
</tr>
</tbody>
</table>

**Qualitative Findings**

In the survey three open-ended questions were asked of providers. Providers were asked whether the client they described was typical of their agency and then they were asked to describe a typical client for their agency. Another open-ended question pertained to the criteria used for discharging a client. The first question referred to client characteristics, and the second question related to an organizational-level characteristic, namely, the procedures that agencies have for discharging a client from services. The final qualitative question asked providers to describe the ideal path through their program to successful completion.

**Client characteristics.** When asked to describe a typical client, and whether the client they had just described fit that label, provider responses were categorized according to the following themes: 1) mental health issues; 2) socioeconomic issues; 3) issues of safety and protection; 4) program completion; and 5) lack of social support.
These categories are described in more detail below, and serve to supplement the quantitative findings.

First, twelve respondents mentioned either mental health issues, substance abuse, or both as common problems their clients encounter. One of these respondents said her client was typical because, like many of their clients, she had a dual diagnosis (substance abuse and mental health problems). Another mentioned that it is not unusual for clients to have substance abuse issues, particularly with pills, that make treatment progress more slowly. A third said her client was unusual because the magnitude of her client mental health problems made treatment difficult.

Ten respondents mentioned socioeconomic issues regarding their typical clients. One client was described as typical because she was a single parent with SSI as her only source of income. Another said that it was common for clients to find housing after discharge, but that mothers with children often had a hard time finding employment.

Seven respondents, primarily domestic violence agencies, described safety and protection issues as a common theme. Generally, these were descriptions of the magnitude of the abuse, for example, one client was described as atypical because she had cut off all contact with her abuser. Another was described as atypical because she did not have a repeated history of abusive relationships.

Seven respondents mentioned issues related to program completion. One client was described as fairly typical because she entered and exited the shelter in about a day and the provider said it was not unusual for some clients to do that. Another client was
described as somewhat atypical because she was similar to a quarter of the agency’s clients who were resistant to engaging with the program.

Finally, six respondents mentioned support, both formal and informal as common problems for their clients. A respondent said the client she described was typical because she cycled through relationships and had little social or emotional support. Another client was described as very typical because she was trying to “get back on track” with family. A different client was described as atypical because she was receiving support for domestic violence and homelessness, and the respondent thought having the support for both needs was beneficial for the client.

**Agency policies for discharging clients.** There were three common themes in providers’ answers to the question, “What do you do when clients break the rules?” The majority of respondents \( (n = 31) \) essentially said it depends on the severity of the violation or that they take rule violations on a case-by-case basis. Many described somewhat structured ways they handled each case, using verbal or written warnings as a tool for a conversation about the rule-breaking. Many said that there were certain violations that would result in immediate dismissal, such as violence, disclosing the confidential location of a domestic violence shelter, or presenting a safety risk to other clients. Otherwise, this group of respondents said they would have conversations and work with the client to improve their adherence.

The second theme was that of a formal warning system. Many described a “strike” system, where each subsequent rule violation would lead to some kind of warning followed by dismissal. One respondent said that they had a warning system, leading to dismissal, but
they would try to make a referral rather than just evict the client. Another said clients were allowed three strikes and then were given a consequence and eventually the client would be asked to leave. Another flatly said that clients were allowed three warnings and then they were asked to leave.

The final theme that arose from six responses was somewhat vague in that the respondent just said that the client would be asked to leave. For example, one participant said that clients would be asked to leave if they were not “working the program.” Another said that if the client relapsed, she would be asked to leave, but did not discuss other rules. A few just said the client would be asked to leave with no further description. These types of responses were in the minority and most providers had a system, whether structured or not, for dealing with individual client’s issues with compliance and described handling house rules or other minor violations from the perspective that these violations were solvable issues and dismissal was usually reserved for only the most serious problems.

**Ideal path to completion.** Three themes arouse in the responses to the interview question asking about the ideal path through the program. Thirty-seven respondents said that ideally clients would participate in the program and exit into a secure and stable living situation. Some of these also included client’s ability to self-manage. For example, one respondent discussed a successful client’s ability to perform independent living skills and knowing how to ask for help in a crisis. Others discussed, in a similar vein, their desire to facilitate clients becoming empowered to use their strengths to find housing and establish stability. Another simply described clients meeting their goals and transitioning to
independent housing. Some respondents also included safety; one respondent said that the ideal path included safety planning and obtaining a safe place to stay.

The next theme was almost equally common, with 34 respondents mentioning program activities more than outcomes. This group described their ideal as client participation in their program. One respondent said that clients ideally would enter the program, work with their case manager and build good relationships with the agency in order to get support when they need it. Another described client activities like looking for a job, attending agency classes, and completing the program. Another mentioned that ideally a client would work with the legal system to resolve issues like divorce and child custody, get housing, and find employment, using the services that are there to help her.

Nine respondents simply said that a successful client is one who has accomplished her goals, whatever they are. These responses did not describe client goals, but rather said that if the client accomplished her personal goals, then she was successful. Others were a bit more critical, stating that it was up to the client to be successful, and that each client chooses her own path and plans.

**Discussion**

The goal of this study was to examine the effects of different ecological layers on housing outcomes for women who access either homeless or domestic violence service agencies. Based on the literature regarding the needs of women who use domestic violence and homeless services, several factors were explored at the individual, social, and organizational level. This study shows few significant differences between the clients of homeless shelters and the clients of domestic violence shelters. Factors at both the
individual and organizational-level predict successful housing outcomes. Some of those factors are related to the way agencies operate and their relationships to the larger community, and some are related to the client characteristics and the number of services available to her.

This study contributes to the literature in three important ways. First, while there is substantial research about women who are victims of domestic violence, and on homeless women and families, there is less research that examines how characteristics at multiple levels of the ecological model impacts women’s housing outcomes. The literature acknowledges that women who use both types of services have a great deal in common in terms of demographic characteristics, and this study helped shed light on those commonalities and illuminated some potential contradictions in terms of determining the best organizational-level policies and procedures (e.g., can services be both client-centered and successful for client outcomes?) for clients. Second, this study revealed some issues that may be important to consider in service provision. For example, the finding that women with children are more likely to find permanent housing, may indicate a gap in housing services nationally for single women without children that needs to be filled.

Finally, the results show that agencies working in isolation may not be as successful in helping clients attain permanent housing. This is also consistent with the literature, highlighting the need for a coordinated response to social problems, such as domestic violence and homelessness. Additional work is needed to determine methods for fostering collaboration between these two separate service systems. There is cause for optimism in
this area, as domestic violence and homeless providers are already engaged in these discussions (DeCandia, Beach, & Clervil, 2013).

**Summary of Important Findings**

**Client characteristics.** The clients described in this study were mostly success stories (73% were reported to have successfully completed the program they were in). Even with this largely successful group, many experienced a host of problems beyond their primary reason for services (homelessness or domestic violence), including unemployment, a lack of social support, and the need for additional services. Despite all of these concerns, two client factors were found to predict the attainment of permanent housing. First, women with children had a greater likelihood of finding permanent housing. This is likely because more services are available for women with children (Roll et al., 1999). Anecdotally, some providers mentioned in the interview that women received child support or SSI (social security disability insurance) for their children. While it was not a focus of this study, children may actually lead to additional family income that can be beneficial in being able to afford housing (Milburn & D’Ercole, 1991). Women with children are also eligible for TANF benefits, which may help in transitioning to permanent housing. In fact, providers from both types of agencies had had similar responses regarding their clients’ access to income, as provided in response to open-ended questions, indicating that it was not unusual for women to rely heavily on state and federal benefits.

Interestingly, women who were employed at exit had only one in ten odds of finding permanent housing. At face value, this finding seems contradictory; however, it is likely that unemployed women may have more access to supplemental support such as rental
Domestic violence and housing

assistance and TANF benefits. This is not to say that women who receive these services are well off by any means but the access to additional services may provide women with the help they need as they transition to self-sufficiency. Participants also described the difficulties their clients had with finding jobs, indicating that it was typical for them to be able to find housing but not employment. Thus, this study provides further evidence of a gap in services for some women who face housing problems and have both insufficient income and inadequate supplemental income and services.

There is support for these findings in the literature. In comparisons of homeless single women and women with children, single women had more instances of stressful life events such as assault, mental health problems, and incarceration, among other destabilizing experiences (Burt & Cohen, 1989; Roll et al, 1999; Zugazaga, 2004). These stressful life events can negatively impact mental health and employment (Hobson, Delunas, & Kesic, 2001; Kimerling et al., 2007; Swanberg et al., 2005), which in turn may affect single women’s ability to find and keep stable housing. Therefore, although the finding that women without children and who are employed are not as likely to find permanent housing may seem counterintuitive, when considering the service system as a whole as well as existing policies for service provision, it may be that this finding actually makes sense as services that help with housing and other economic factors may not be as available to single women and women who are employed, albeit in jobs that may be unlikely to pay them enough to afford housing as they struggle with all other household costs.
Other client factors that did not predict housing success in this study may still be important, such as social support. The variables representing social support were skewed with very few women receiving emotional and tangible support from family and friends. With limited variability in these questions, their contribution to permanent housing may have been obscured. Further, social support was measured by single-item questions at one time point (and retrospectively reported by providers) and thus, the nuances of women’s social support may not have been captured adequately. It may also be that social support is indirectly related to housing outcomes through its effect on other factors like mental health (Belknap, Melton, Denney, Fleury-Steiner, & Sullivan, 2009). Clearly, more research is needed to understand the role of social support on women’s ability to attain permanent housing.

**Organizational-level characteristics.** Several organizational-level characteristics were found to be important predictors of clients’ housing success. One key factor was having rules for client participation. It is important to note that participation rules were significantly different between homeless and domestic violence agencies. As noted in Table 4, homeless agencies had more rules for admitting clients and more rules for ongoing client participation than domestic violence agencies. It might be that a highly structured program, with requirements for participation beyond basic case management and house rules, helps clients make progress and holds them accountable for meeting case management goals. One participant mentioned that her agency was moving from having rules for participation to a model that is more client-driven without set requirements.
Based on the results from the current study, this approach might not be beneficial for some clients who are looking to move toward permanent housing. For example, this model may be beneficial only for women who are already in a position to respond to the rules and requirements. For others (such as women with substance abuse or mental health issues) such a model may be counterproductive in that these women may either be screened out of services, leave the program prematurely, or be asked to leave before reaching their goals. Studies have shown that single women, compared to women with children, have more life disruptions, and these women may also have a hard time responding to a structured program (Roll et all, 1999).

Also, studies have shown that clients prefer not to have too many rules, and may end up leaving programs that require a relatively strict level of oversight (Baker et al, 2009; Melbin & Sullivan, 2003). Striking a balance that is beneficial to clients and also provides a comfortable respite for women in crisis is important to ensure successful outcomes including housing and other indicators of wellbeing. The need for a balance is illustrated by providers’ accounts that some clients are not successful in shelters because they do not engage with, or are even resistant to, program requirements. Therefore, additional work is necessary to establish agency procedures that align client needs with provider expectations.

It is also important to note, when looking at agency policies and procedures, that domestic violence and homeless agencies have different missions, and therefore, different expectations for their clients. While, they might have similar goals for their clients in terms of wanting them to attain economic stability, each agency type is set up to handle different client-related issues, and therefore may have different procedures for dealing with these
issues. A domestic violence agency is specifically designed to deal with domestic violence and, therefore, is focused on providing an environment that is emotionally supportive because all clients have recently been through a traumatic incident. Although, homeless agencies may have clients with a history of victimization, they are designed to focus more on economic wellbeing than emotional wellbeing. Thus, agency structure and culture is going to be different by design, which translates into different types of services being provided and different expectations for the clients they serve.

That said, given the overlap in the types of issues that clients accessing domestic violence and homeless service agencies are dealing with, collaboration between these two social service systems is critical. While it was beyond the scope of this study to fully engage all ecological levels, there is evidence that a collaborative social service system is beneficial to clients in that the coordination between shelters and other social service agencies predicted successful housing outcomes. It is important for advocacy to be comprehensive and individualized, and with this in mind the need for collaboration among different agencies is clear (Allen et al., 2004). As described by Allen et al. (2009), social service collaboration can improve outcomes for domestic violence victims. Also, homeless families interacting with social services express frustration when services are not coordinated well or communicated clearly (Tischler, Karim, Rustall, Gregory, & Vostanis, 2004). Thus, the results from the current study extend these earlier findings, and suggest that it is important to look beyond individual and social-level characteristics in understanding the predictors of successful housing outcomes for women.
Implications

This study examined the state of services across the country and the effects of a variety of factors on housing outcomes for women who access domestic violence and homeless services. One organizational-level implication is that agencies that have participation rules, provide many services and referrals, and have good working relationships with other programs in the community have some success in helping their clients attain permanent housing. This success may be linked to serving clients with specific characteristics (e.g., clients with children or those who are higher functioning and in a better position to follow strict participation rules). Agencies may need to revisit their policies and procedures to ensure that women who are at a more vulnerable stage in their lives are also provided with needed services to be successful in finding permanent housing.

It is important to note that a new requirement that came with the reauthorization of the Violence Against Women Act in 2005 (VAWA) stipulated that providers receiving funding under the law were not allowed to have many rules and requirements (National Network to End Domestic Violence, 2013). Therefore, almost all domestic violence programs will be, if they have not already, moving toward a more open structure in terms of who can be admitted and what they must do in order to stay in the program. The effects of this change remain to be seen, as it will be some time before evaluations of this change can occur. Evaluations should certainly consider whether these changes are beneficial to client outcomes, and if there are any differences in the benefits for women depending on what outcome is being investigated (e.g., mental health, housing outcomes, unemployment).
Additionally, there is some indication of a service gap for women whose experiences do not necessarily conform to the existing service structure. In these cases, it may be that the agency is not necessarily failing to provide services to these women; but it may, in fact, be due to the nature of the available services. In this way, there are implications for change at the inter-agency and policy levels, in that the patchwork of federal and local support for vulnerable women and their families may need to be changed to accommodate the range of clients who need services (i.e., clients who are working, but still have housing instability).

Future Research

Based on these findings, future studies should continue investigating the different factors that affect housing for women who are of low socioeconomic status, have experienced domestic violence, and have housing problems. For example, this research clearly shows that clients in this sample who accessed different agencies (homeless vs. domestic violence) are actually similar in many ways. This finding is consistent with prior research showing that a large percentage of female clients who access homeless agencies are victims of domestic violence in their current relationship (Wenzel et. al., 2006). This overlap continues to be important, and research should be conducted with the goal of highlighting policies and procedures that are successful in helping women with both sets of experiences find permanent housing.

Other distinguishing factors such as clients’ motivation and engagement with services could be very important to understand. The interaction between client engagement and agency policies could significantly affect client success. It is possible that agency
policies make it easier or harder for clients depending on the program structure and client factors such as motivation level and social skills. Research shows that it can be normal for clients to resist treatment (Newman, 1999). However, the literature has not explored this dynamic for women seeking shelter services.

Additionally, non-employment income might provide an important stabilizing influence on client’s housing outcomes and future research could look more closely at the role of all sources of income that women receive. For example, one client described in this study relied in large part on income received through her child’s SSI (social security disability). Also, families qualify for increased benefits such as food stamps, TANF, and other benefits. Generally, there is a dearth of literature that focuses on the relationship between client characteristics and how these impact financial stability, access to social services, and ability to attain permanent housing.

Additionally, future research should explore organizational-level characteristics in more detail, such as an agency’s rationale for providing specific services, and how these services may be different depending on the type of agency and the organizational climate within that agency. For example, there are likely reasons why agencies that have rules for participation achieve positive outcomes for some clients. These rules may simply weed out women who have a more difficult time engaging in services, such as women with mental health problems or poor social skills, thus leading to higher-functioning clients in the program, which may be the underlying predictor of success. Or perhaps it is a result of the need for agencies to institute these rules in order to receive state and federal funding. It could also be related to the culture of the agency, whereby there is a belief that clients
should not be given services without some sort of commitment. Interestingly, Baker et al. (2009) found that often these rules were simply a function of past practices that were never questioned or revisited by new staff. Thus, further study of organizational policies and practices in terms of how programs are structured and how that structure impacts client success would be beneficial. Also, there could be further investigation into social service networks and how they can be successful in serving a greater number of clients as well as clients with diverse needs. Assessing social service agency interactions would be an important way to improve organizational impact, including increasing service capacity.

**Limitations**

A major limitation is that there are likely differences between agencies that participated and agencies that did not participate. Therefore, it could be that the sample is skewed because agencies with a higher percentage of successful clients were more likely to want to talk with a researcher about their program. It could also be that agencies where staff was the most busy (due to an overwhelming number of clients, or lack of funding, for example) did not participate because they did not have the time to spare. There could also be differences in the organizational culture between agencies that wanted to contribute to this study and those that did not. Differences in agency leadership could also affect the kinds of agencies who participated. I often talked or emailed with agency directors initially, even if they ultimately asked another staff member to participate. Thus, there may have been differences in agencies whose directors were more open to having me speak to their staff.
A second limitation relates to the decision to ask providers about a recently completed case as this approach may have led to a biased portrait of the client population. Since the majority of clients were in the program for a fairly long time (mean length of stay is 26.7 weeks and the median is 12 weeks) and most (76%) were considered to have successfully completed their programs, it is unlikely that this is a true depiction of the breath of clients who use homeless and domestic violence services. This is clearly indicated by the interview question asking whether the client described is typical of their program. Since many respondents felt that their client population was diverse and that there is not a typical client, this somewhat homogenous group of clients is likely not to be representative.

Further, providers may have also had a tendency to select clients who were successful in order to present themselves and their agency in a positive light. Receiving attention from a researcher could have been seen as an opportunity for image management or showing a positive depiction of the field. In fact, responses were positive overall including client descriptions, agency characteristics, and agency interactions with other programs in the area. On the other hand, it may be that providers were describing the clients in their programs accurately, but that those admitted were not necessarily representative of the general population of women accessing homeless and domestic violence services. That is, the selection bias is not from the provider but related to agency rules for admitting clients. Clients who are not likely to be successful in a structured program or leave programs early are not then part of the sampling frame for providers to choose from.

Another important limitation is sample size; while it was adequate for drawing some preliminary conclusions, it is not sufficient for a more nuanced understanding of
factors related to attaining permanent housing given the lack of statistical power. Also, the survey questions themselves yielded some responses that were unclear and difficult to interpret. For example, when asked about agency rules for participation, respondents would say that they do not require many things, but then list a variety of programming and activities that are “strongly encouraged” or required after an initial grace period.

A final limitation relates to the participants in this study. Although service providers offered valuable information in understanding the different characteristics that were associated with permanent housing, it will be important to interview women directly. There are many things that clients may not share with shelter staff. Respondents sometimes alluded to the fact that clients could be (understandably) guarded and reluctant to reveal all of their lives to shelter staff. Therefore, it cannot be assumed that the client data provided by agency staff members are complete or thorough due to a lack of disclosure on the client’s part. In this way, it is likely that clients would have responded differently to survey questions. For example, variables related to social support were not significant, perhaps in part because of the respondent. Social support has been found to be important in much of the previous literature so it may be that if I would have asked clients directly about social support the findings for the current study may have been different. As it is, the survey questions were only single-item questions and providers were asked to respond retrospectively for their clients. Such indirect measures leave the door open for inaccuracies and an incomplete picture of this particular construct.
Conclusion

In conclusion, this study provided some insight into factors at multiple levels that affect housing outcomes for female clients who access homeless and domestic violence services. Using a geographically diverse sample, results show that these agencies are helping their clients obtain permanent housing and also illuminate some gaps and areas for improvement and future research. Due to the similarities of their clients, homeless and domestic violence service agencies can play a key role in helping to ensure safe, permanent housing for vulnerable women and their families. The findings contributed to ecological theory, demonstrating that factors at different levels contribute to housing outcomes. While more research is needed to understand these complex issues, this study highlights the importance of considering the constellation of risk in women’s lives. That single women without children, and women who were employed at exit, were not the most successful in finding permanent housing seems counterintuitive, but it complements the body of research showing that the challenges faced by vulnerable women are highly complex and that these intersecting experiences may result in continued housing instability, as there are limited services for some groups of women.

This study also shows that agencies can affect housing outcomes in unique ways. Providing rules for participation is helpful for some clients, though agencies may need to be more cognizant of the way they handle the decision of whether case management is entirely client driven or more structured, and how this decision relates to housing outcomes. Also, it is not surprising that having good working relationships with other social service agencies is important. This study highlights the need for collaborative networks of social
services that can work together to ensure long-term success for female clients who are victims of domestic violence and who are also at risk for homelessness.
References


Domestic violence and housing


Domestic violence and housing


Appendix A: Consent and Survey Instrument

Women, Violence, and Housing

1. This research project is being conducted as a component of a dissertation for a doctoral degree. The purpose of the project is to learn about how services are provided for women with a history of domestic violence, housing problems, or both.

Participation in the project will consist of a phone interview lasting about 30-45 minutes. You will be asked to provide some information on yourself, the agency you work for, and the clients you serve. No personally identifying information will be collected. Interview questions will focus on the female clients you serve, how your program works, and how your program fits with the larger community. Data from the interview will be summarized and aggregated for statistical analysis. No personally identifying information on you, your agency, or your clients will be included with the research results. Approximately 100 people will participate in the study.

The investigator believes there is little or no risk to participating in this research project. However, there may be a small risk that you will experience psychological discomfort when discussing your work and your clients.

Participating in this research may be of no direct benefit to you. It is believed, however, the results from this project will contribute to the understanding of how service providers can best provide for their clients and what factors might contribute to improving the lives of women who receive social services for domestic violence or housing problems.

As compensation for time spent participating in the research project, you will receive a $10 gift certificate to Amazon.com. Information you provide in order to receive your gift certificate, which will be sent via email, will be kept separately from your interview responses.

Research data will be confidential to the extent allowed by law. Agencies with research oversight, such as the UH Committee on Human Studies, have the authority to review research data. All survey responses (including some transcription of what you say) will be stored in digitally on a secured website or stored and encrypted on a computer. Results will be kept at least until the end of the 2012. Individual records will be removed from the secured website at this time, and aggregated data in the form of spreadsheets may be kept in an encrypted digital file until the end of 2013 in order for additional analyses to be performed. At that time, the spreadsheets will be deleted and erased from the secured hardware.
Participation in this research project is completely voluntary. You are free to stop participating at any time during the interview with no penalty, or loss of benefit to which you would otherwise be entitled.

If you have any questions or would like information about the study's results, you can reach me, Natalie Mills, at (304) 634-9858 or at ncrespo@hawaii.edu.

If you have any questions regarding your rights as a research participant, please contact the UH Committee on Human Studies at (808) 956-5007, or uhirb@hawaii.edu.

Yes - Consent

No - Deny consent

Additional Comments

___________________________________

**Part 2: Responder Information**

2. What type of agency or program do you work for?

11 Domestic violence advocacy

12 Domestic violence shelter

13 Domestic violence transitional housing

14 Domestic violence other

21 Homeless advocacy

22 Homeless outreach

23 Homeless shelter

24 Homeless transitional housing

25 Homeless other

Other ________________________________
3. What state is your agency in?

___________________________________

4. What county is your agency in?

___________________________________

5. What is your role in the agency?

___________________________________

___________________________________

6. When did you start your current position?

___________________________________

7. When did you start doing this kind of work?

___________________________________

8. How old are you?

24 or younger

25 - 34

35 - 44

45 - 54

55 or older

no answer
9. What is your highest level of education?

1 Some high school
2 High school diploma
3 Some college
4 Two-year college degree / Associate's
5 Four-year college degree / Bachelor's
6 Some graduate school
7 Master’s Degree
8 Doctorate (PhD, PsyD, EdD)
Other _________________________________

Part 3: Agency Characteristics

10. What is the typical caseload in your agency?
___________________________________

11. How many direct service staff do you have?
___________________________________

12. How many volunteer staff do you have?
___________________________________

13. Typically, how full is your agency?
1 Usually full client load
2 Usually full with a waiting list
3 Usually some empty spaces
9 Don’t know
Other _____________________________

14. Are there other agencies in your area that provide the same types of services as yours?
2 No
1 Yes (How many?)
___________________________________

15. How well do agencies similar to yours in your area work together?
1 Very well
2 Pretty well
3 Not very well
4 Not well at all
9 Don’t know
Other _____________________________

16. How well do different kinds of agencies (e.g., TANF offices or child care referral agencies, ones that provide services for different problems) work together in your area?
1 Very well
2 Pretty well
3 Not very well
4 Not well at all
9 Don’t know
Other _____________________________
17. Does your agency have formal agreements with other programs or agencies in your area?

1 Yes

2 No

Other ________________________________

18. What types of services do they provide? Do you subcontract with any? If so, for what services?

_______________________________

_______________________________

19. What sort of screening do you do for client participation in your program (the program you primarily work for)?

1 Exclude mental health

2 Exclude drug abuse

3 Exclude alcohol abuse

4 Exclude partner

5 Exclude all children

6 Exclude some children due to age or gender

7 None

Other, please describe ________________________________

20. After clients are accepted into your program what are the rules and requirements for continued participation?
1 Participation in individual therapy/counseling
2 Participation in group therapy/counseling
3 No contact with abuser
4 No drug use
5 No alcohol use
6 No guests, babysitters
7 Other child-related rules
8 Employment- or school-related rules
9 Other, please describe
___________________________________
___________________________________

21. What happens if clients break these rules?
___________________________________
___________________________________

22. Describe the ideal path through your program, after a client enters, what is required for successful completion?
___________________________________
___________________________________

Part 4: Client Intake Information
I’m going to ask you about your most recent experience with the last adult woman who was discharged, or whose case was closed.

23. How did the client come to your agency?

1 Self-referral

2 Internal referral

3 Other agency referral

4 Don’t know

If other, please specify

___________________________________

___________________________________

24. Has this client received services from your program before?

2 No

1 Yes (how many times?)

___________________________________

25. What was your client’s age at (her most recent) intake?

___________________________________

26. What was this client’s marital status at intake?

1 Married

2 Cohabiting with partner

3 Divorced

4 Separated/Legally separated

5 Single
9 Don’t know
Other ____________________________

27. What was her highest level of education?
1 Some high school
2 High school diploma
3 Some college
4 Two-year college degree / Associate's
5 Four-year college degree / Bachelor's
6 Some graduate school
7 Master’s Degree
8 Doctorate (PhD, PsyD, EdD)
9 Don’t know
Other ____________________________

28. What is her race or ethnicity?
1 Mixed Race
2 African American
3 Arctic (Siberian, Eskimo)
4 Caucasian (European)
5 Caucasian (Indian)
6 Caucasian (Middle East)
7 Caucasian (North African, Other)
8 Indigenous Australian
9 Native American
10 North East Asian (Mongol, Tibetan, Korean Japanese, etc)
11 Pacific (Polynesian, Micronesian, etc)
12 South East Asian (Chinese, Thai, Malay, Filipino, etc)
13 West African
99 Don’t know
Other ____________________________

29. What is her immigration status?
1 US citizen
2 Naturalized citizen - immigrated as a child
3 Naturalized citizen - immigrated as an adult
4 Non-citizen - immigrated as a child
5 Non-citizen - immigrated as an adult
9 Don’t know
Other ____________________________

30. How many children did she have?
0
1
2
3
4
5 or more
99 Don’t know
Other ___________________________

31. Did she have custody of her children?
1 Yes, full custody
2 Yes, joint custody
3 No, but visitation rights
4 No custody
5 N/A
9 Don’t know
Other ___________________________

32. What was her employment status upon program entry?
1 Employed full-time
2 Employed part-time
3 Student full-time
4 Student part-time
5 Unemployed and looking for work
6 Unemployed and not looking for work
9 Don’t know
Other ___________________________

33. Is this client from your local community?
1 Yes, from nearby
2 Somewhat nearby (e.g., next town over)
3 No, from far away
9 Don’t know
Please explain ________________________________

34. Did this client have support from family?
1 She had a lot of support
2 She had a little bit of support
3 No, she had little or no support
9 Don’t know
Other _________________________________

35. Did she have tangible support (e.g., money, clothing, household items, transportation) from friends or others?
1 She had a lot of support
2 She had a little bit of support
3 No, she had little or no support
9 Don’t know
If other, please specify
______________________________

36. Any additional description of the client’s informal, tangible support system while she was in your program:
37. Did she have emotional support from friends or others?
1 She had a lot of support
2 She had a little bit of support
3 No, she had little or no support
9 Don’t know
Other ________________________________

38. Any additional description of the client’s informal, emotional support system while she was in your program:

_________________________________________________________________________

_________________________________________________________________________

39. Describe the client’s housing situation at program entry.
1 Homeless
2 Temporary housing shelter or program
3 Temporary housing informal (friends or family)
4 Permanent, independent housing
9 Don’t know

40. Did you provide services for this client relating to housing?
1 Yes - direct services
2 Yes - referral
3 No
Other ________________________________

41. What kind of housing service or referral?
   ____________________________________
   ____________________________________

42. Did the housing referral result in additional services for the client?
   1 Yes
   2 No
   3 N/A
   9 Don’t know
   Other ________________________________

43. If so, what kind of additional services?
   ____________________________________
   ____________________________________

44. Was the client in an abusive intimate partner relationship when she entered your program?
   1 Yes
   2 No
   9 Don’t know
   Other ________________________________
45. Did you provide services to this client for domestic violence?

1 Yes - direct services
2 Yes - referral
3 No

46. What kind of domestic violence services or referrals did you provide?
___________________________________
___________________________________
___________________________________
___________________________________

47. Did the referrals result in additional services for the client?

1 Yes
2 No
3 N/A
9 Don’t know
Other ________________________________

48. If so, what kind of additional services?
___________________________________
___________________________________
___________________________________

Part 5. Client Services
49. Not counting the services you just described as being provided by your agency, when the client first entered your program was she already receiving any of the following services?

1 Cash assistance (TANF, food stamps, WIC)
2 Counseling or other mental health
3 Substance abuse
4 Domestic violence services
5 Housing assistance (subsidies, if so what kind?)
6 Legal services
7 Employment services
8 Don’t know
9 Don’t know
Other

50. Other than the housing and domestic violence services you described previously as being provided by your agency what other types of services did you provide while she was in your program?

1 Individual counseling
2 Group counseling
3 Career counseling/job training or counseling
4 Advocacy
5 Cash assistance
6 Other mental health services
7 Medical services
8 Legal services
9 Referrals (for what types of services)
Other/Referrals
___________________________________
___________________________________

51. Did you provide other kinds of referrals for this client?
1 Mental health
2 Poverty
3 Education
4 Employment
5 Alcohol abuse
6 Drug abuse
Other ________________________________

52. Did any of these referrals result in additional services for the client?
1 Mental health
2 Poverty
3 Education
4 Employment
5 Drug use/abuse
6 Alcohol use/abuse
7 No
9 Don’t know
Other ________________________________
53. How long did this client receive services at your program?

____________________________________

54. How well did the client comply with your program?
1 Very compliant
2 Somewhat compliant
3 Somewhat resistant
4 Very resistant

55. Were there any barriers to her participation in your program?
1 Employment
2 Children or child care
3 Transportation
4 School
5 Mental health problems
6 Substance abuse
7 Participation in other programs/services
9 Don’t know
Other ________________________________

56. Would you say that these barriers related to...?
1 the client’s time constraints
2 the client’s personal reasons
3 policies of your program
4 policies of another program
Other ____________________________

**Part 6. Client Discharge**

57. What was the client’s marital status at discharge?

1 Married
2 Cohabiting with partner
3 Divorced
4 Separated/Legally separated
5 Single
9 Don’t know
Other ____________________________

58. What was her employment status when she was discharged from your program?

1 Employed full-time
2 Employed part-time
3 Student full-time
4 Student part-time
5 Unemployed and looking for work
6 Unemployed and not looking for work
9 Don’t know
Other ____________________________

59. What was her housing status when she left your program?
1. Who did she live with when she left your program?

1 Partner, spouse
2 Parents or other family
3 Friends or other informal
4 Institutional
9 Don’t know
Other ________________________________

60. Who did she live with when she left your program?

1 Partner, spouse
2 Parents or other family
3 Friends or other informal
4 Institutional
9 Don’t know
Other ________________________________

61. If client was in an abusive relationship at intake did she go back this partner at discharge?

1 Yes
2 No
3 Client was not in abusive relationship at intake
9 Don’t know
Other ________________________________

62. Did the client continue to have problems with any of the following at discharge?

1 Homeless
2 Temporary housing shelter or program
3 Temporary housing informal (friends or family)
4 Permanent, independent housing
9 Don’t know
Other/additional information: ____________________________________
1 Mental Health Issues
2 Drug abuse
3 Alcohol abuse
4 Employment problems
5 Housing instability
6 Domestic violence
9 Don’t know
Other
___________________________________
___________________________________

63. Did this client successfully complete your program?
1 Yes
2 No, but she left for positive reasons
3 No
Other ______________________________________

64. If no, why didn’t she complete the program?
___________________________________
___________________________________
___________________________________
___________________________________
___________________________________

65. Was this client normal or typical for your program?
1 Very typical
2 Somewhat typical
3 Somewhat atypical
4 Very atypical
9 Don’t know
Describe why
___________________________________
___________________________________

66. Thank you for your participation. Do you have any additional comments?
If you would like to participate in the thank you gift of a $10 Amazon gift card, please stay on the line and I will record your name and email address in a separate form.
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