

Refereed Article

Doorway to Hope: Past Participant Perspectives on an Exemplary Transitional Housing Program for the Homeless

Donald Joseph Yarosz

Abstract

The purpose of the study is to discover what made a homeless program, deemed exemplary by outside evaluators, such a model program from participants' perspectives. Participants' perspectives are presented and summarized. Suggestions for further research and for program implementation and improvement are also presented.

In 1989 many homeless families on welfare were housed in motels. In Mercer County, New Jersey, alone, this characterization represented 400 families where the overwhelming majority of the heads of household were single women. Although there were training, job placement, and education programs available to women, their dependency on welfare was seldom broken. Therefore, Transitional Housing Demonstration Projects were funded in the early 1990s and implemented on a state-by-state level.

State-contracted evaluators identified four exemplary transitional housing, education, and training programs for homeless single women and their children in the state of New Jersey. One of these exemplary programs was Doorway to Hope. Evaluators used traditional outcome measures, such as the women finding permanent housing and permanent jobs, achieving their GEDs, pursuing various adult education program options, and expressing satisfaction with the program, to reach this conclusion (Center for Urban Policy Research, 1998).

Donald Joseph Yarosz is Assistant Research Professor at Rutgers (The State University of New Jersey), New Brunswick, NJ.

Background

Doorway to Hope is unique among the Transitional Housing Demonstration Projects funded in New Jersey throughout the 1990s. The program adopted a philosophy of employing local community members with leadership reputations as staff members. The staff counselors were paraprofessionals who came from the same socio-economic background and the same neighborhood, yet they had comprehensive knowledge of the barriers to access and the social services available and were skilled at negotiating the system.

Purpose, Statement of the Problem, and Need for the Study

Internal quantitative and external evaluations have lauded the Doorway to Hope's effectiveness in moving homeless women and their children out of the welfare system into independence. Many adult education principles are integrated into the educational components of the program. However, how past successful participants viewed the program was not a formal part of the external evaluation for Doorway to Hope. Given the fact that this program was serving adults and was run by those who were indigenous to the area rather than by middle-class social workers, a further understanding of the mechanisms of its success was desired.

While "giving voice" to the homeless has been called for in the literature (Camardese & Youngman, 1996; Dixon, Krauss, & Lehman, 1994; Salzer, 1997), rarely have participants' perspectives been sought. This shortcoming is due, in part, to the assumption held by both the public and providers that the homeless do not know what they want or what they need (Glasser, 1998). Also, could it be perhaps that, because the homeless are "liminal" (Turner, 1957, p. 95) or betwixt and between common cultural categories (living at the margins in a structured society), they are culturally or socially invisible? For whatever the reason, there are few examples in the extant literature of homeless clients evaluating the effectiveness of transitional housing facilities, either for the purpose of program improvement or so that the successful aspects of the program could be transferred to other existing or contemplated programs. Further, other adult educators working with the homeless might learn by seeing through the eyes of others, an outcome that is often the stated purpose of naturalistic inquiry. Therefore, the purpose of this study is to present an in-depth analysis of Doorway to Hope from the point of view of the participants:

How did program participants experience the staff members at Doorway to Hope? What other factors in the Doorway to Hope milieu affected participants' experiences in the program?

Methodology

An investigative team consisting of the on-site supervising psychologist and a graduate student conducted structured interviews with six informants who were experienced participants in Doorway to Hope program. These six informants were selected by using purposeful sampling (Patton, 1990), a process that yielded a maximal variation sample. The basis of the selection criteria was that, while candidates all needed to have the common experience of successful program completion, these informants had exited Doorway to Hope at different times, represented ages ranging from younger to older, and presented different family patterns (for example, having differing numbers of children and living with and without boyfriends). All were single, homeless mothers during their time at Doorway to Hope. The nature of the study was first explained to the participants, and participants granted consent for study participation.

Each informant who was contacted agreed to be interviewed. The use of an unbiased person to conduct interviews was deemed critical to the project. Although the interviews were structured with regard to asking the participants about their experiences at Doorway to Hope, as well as their experiences with the "peer leadership," the participants were also asked to discuss any other issues they felt were important. In other words, there was an open-ended component to the interviews. The interviews were recorded and later transcribed. In order to answer the research questions, past participants were interviewed using emergent design during the interview stage, and the constant comparison method was used during the analysis stage.

Data collection and analysis occurred simultaneously. As the analyses revealed additional areas for investigation, alterations of the interview protocol were made as appropriate. This approach to protocol refinement is referred to in the literature on naturalistic inquiry as an "emergent" design. After the collection of all data, a final analysis was conducted and themes emerged.

The constant comparative method "combines inductive category coding with a simultaneous comparison of all social incidents observed" (Goetz & LeCompte, 1981, p. 58). A cross-case method was used for cross-

classification coding (Patton, 1990). In other words, after the interviews were transcribed, all of the interviews first were read and then categories emerged. Separate categories for each of the six individuals were not created; rather, categories emerged from the transcriptions of the total group, a process described by the term, “cross-classification method.” A constant comparative method was used throughout the process and even upon completion. Indeed, according to Goetz and LeCompte (1981), “As events are constantly compared with previous events, new typological dimensions, as well as new relationships, may be discovered” (p. 58).

Findings

Analysis of the data revealed that the participants’ own attitudes and behaviors had differential impact on their success in the program and the perceived failure of others. Further, there were five “community resources” that contributed to participants’ success. Finally, there were difficulties encountered with the program. These and other findings are presented below, including direct quotations that best exemplify the various themes.

Attitudes and Behaviors

There are three basic attitudes and behaviors that were essential for success at Doorway to Hope:

1. A willingness to work hard to accept responsibility for oneself and one’s children.
 - “Being successful at Doorway to Hope definitely comes from hard work and dedication. The sacrificing is unbelievable. There isn’t any way that I could maintain any of this alone if I didn’t sacrifice many, many things, but I do what I gotta do. I chose to bring my children here, so I gotta do what I gotta do to take care of them until they are grown and leave.”
 - “I do what I have to do now [since leaving Doorway to Hope]. I’ll come home and see that something has to be done; I do it.”
 - “That’s what I’m trying to say. What I am doing is not in vain. I am striving, and I am doing it for my kids. I do things that benefit my children.”

2. A recognition on the part of the participants that they had control over both the daily decisions and the important life choices that they had to make.
 - “Doorway to Hope just opened my eyes more about myself. It showed me that I could be anything that I wanted to be. They stress that there, too—that you can make your life at Doorway to Hope good or a living hell. It’s your choice.”
3. A willingness to sacrifice short-term rewards for longer-term goal achievement.
 - “Doorway to Hope helped me with my goals as far as getting motivated to get out of there and do what you gotta do—and to sacrifice to achieve whatever for the goals that you have to achieve. You know, if you really don’t have that in mind or have strong motivation to do anything in your life, you are going to fold.”

There were two basic attitudes and behaviors that led to the failure of some to complete the program at the Doorway to Hope successfully:

1. Unresolved drug or alcohol addiction or abuse.
 - “There were other people in the program who had abuse problems, and they had a hard time with the program. I say they didn’t want to change. It’s like, once you are used to doing things your own way, it is hard. You have to be disciplined. They didn’t want to hear that. They wanted to do what they wanted to do.”
2. Failing to take seriously the boundaries represented by the rules.
 - “Some girls got evicted, but it was because they weren’t really into the rules. They were abusing the rules, and they probably took some of the rules for granted. Probably they took the people who initiated the rules for granted. So sometimes, when you have a person thinking like that, of course, they are going to challenge you.”

Community Resources That Contributed to Success

There were five community resources at Doorway to Hope that contributed to the participants' success:

1. The participants were supportive and helpful to one another.
 - “You see, Doorway to Hope is like a little community. When you live there, you can always knock on someone’s door, and they will be there. Now that I have left Doorway to Hope, I find that I miss that. I get lonely.”
 - “The girls were very supportive when my aunt died. You can get a bunch of girls at Doorway to Hope who really work well together.”
 - “We were like one big family. We had a group that worked really well together—I mean, no arguments or fights.”
2. Overall the staff was supportive and helpful.
 - “When I went into Doorway to Hope, she welcomed me with open arms.”
 - “Christmas Day we all got together. We all brought something and contributed. People at Doorway to Hope had faith, and you need faith. You have to believe that someone will help you.”
 - “The staff was willing to go above and beyond working hours to help if they had to. If they saw that a person was really trying hard to bring themselves up out of whatever they were in, to help in the right direction. My motivation increased tremendously. I mean, I felt the get up and go like somebody kicked me in the butt!”
 - “They definitely were there to work. When it was work hours, it was work hours.”
 - “I’d be willing to help people there now. I would do it because I would give back something to the community that helped me.”
3. The overwhelming majority of the participants experienced the paraprofessional counseling staff members (FSCs) as being cheerful and upbeat with a sense of humor, open to listening to

their problems, informative, and willing to help. Both were “strong” women who were role models with whom the participants could identify.

- “Every time you see C., she has a smile on her face. She brings cheer into you. . . . R. is cool, too. She is really nice. She wasn’t my FSC, but I would go talk to her. She jokes, laughs, and has fun. You know, they are individuals, too. I could talk to her about my problems.”
 - “It is the best program that anyone can go to. They have a staff of all women, . . . [and] the women can really sit down and relate to the other women, better than they can with a man. . . . Your FSC should be your best friend.”
 - “I guess the thing that I liked best is being able to talk to them and knowing that someone cares and they’re willing to give me a chance.”
 - “My FSC was very informative and very professional. She certainly knows her job. Whatever she could do to help, she was willing to do. She was very helpful.”
 - “C., she cares about you, and she makes sure that the things you need to do, you do it. She keeps things in perspective. She like helps you keep your sanity and try to teach you how to do things the right way. She’s a good role model.”
 - “My FSC is a very strong figure. When you look at her, you know that she is someone you can’t just push over. I know she’s probably gone through a lot of changes in her life. Of course, like us all, but she gives you the impression that she is very strong. She is a very strong individual as well as a caring one.”
 - “These two women are strong, and I get the impression that it isn’t only when they’re at Doorway to Hope. They are strong women—period.”
4. The program director was available, supportive, and helpful to the participants.
- “Sometimes I would get a hug from B., and that would feel good.”

- “If I needed help, I would definitely call B. because I feel in my heart that she would try or definitely find someone to assist me. I really believe that.”
 - “B. showed compassion as well as being understanding, loving, caring. It is just how she is. . . . She is just very caring toward people. I got a lot of motivation from her.”
5. The psychologist, although he was there on a part-time basis primarily for staff training and development, was supportive and a good listener.
- “He was a lot of fun. He would plan trips, and we would mostly do our thing with Bill over the summer.”
 - “Dr. B. is the kind of a person you can go to talk about *anythin!* I mean, if you think the sky is falling, you can go talk to Dr. B. He’ll sit there and listen to you. I got depressed at Doorway to Hope. I got tired of coming home, cooking, cleaning up, and I just got depressed. I talked to Dr. B. for about 2 hours. After I talked to him, I felt better. My spirit felt better. It was like, dag, I really had someone to talk to, and I felt better.”

Most Difficult Aspects of the Program

Program participants found several aspects of the program to be very difficult:

1. Many had trouble with program boundaries represented by the rules.
 - “Curfew was the rule that was most broken. You’re so used to just coming and going, having your freedom and being an adult—just going when you felt like it. . . . Then, all of a sudden, you are in a situation, and that can no longer happen.”
 - “You know, it’s kinda like an animal being caged, a wild animal, so to speak, being caged. You know, just imagine that.”
 - “I didn’t think it was any of their damn business where my kids were if they stayed with family overnight. You know, it wasn’t any of their damn business. They didn’t even care, really.”

2. Although one participant was moving toward independence and responsibility for problem solving, she did not realize that these were goals of the program.
 - “She didn’t do nothin’ at all. All she did was fill out my papers for Section 8. Anything else, I did it on my own.”
3. Two participants did not like the way their FSCs helped them.
 - “I just don’t like the way she goes about doing things, but if you go to get help from her, she’ll see that you get it. She just goes about it the wrong way sometimes.”
 - “She checks up on you, but she’s just nosy, and, shit, she wants to be the boss. That’s all that is.”
4. Although participants had difficulties with their FSCs, they did feel free to go the other staff for help.
 - “I was supposed to move out of here in April, but my FSC didn’t do something to make that happen. When I came in, she was all nice and said, ‘You’re not moving today.’ It took Dr. B. and [the other FSC] to talk to me because I woulda been thrown out that day on the street! I was gonna whup her ass, that’s how bad I didn’t wanna be there!”

It was through the willingness of program participants to share their views that positive change was brought about on the part of the security guard situation at Doorway to Hope. The interview comments of the participants helped identify problems with the male security guards, and, as a result, the selection and supervision of these protective service workers was improved.

- “I guess they do their job, but some of those guys, to be honest with you, they are not right.”
- “There were three guards. One was very responsible. The other one was the type of guy that, if he could get his way, he would get it. And the other guy was, well, I guess he had his problems. You see, I would notice those things.”
- “I saw one of them drinking, but it was late at night, and I wasn’t sure what it was. I had to go use the phone, and I asked him, and he said that I could use the phone. He was a younger guy. I think he is out.”

- “I never saw any drugs, but you would hear things. I would hear about people having sex, too, but I never saw anyone.”
- “I think someone got caught. If a woman is going to approach a man like that, then she is in trouble, but he might be in trouble, too. It wouldn’t be fair to get rid of one and not the other.”

Summary and Conclusions

A willingness to work hard to accept responsibility for oneself and one’s children and to sacrifice short-term rewards for longer term goal achievement, as well as recognition on the part of the participants that they had control over both the daily and the important life choices facing them, were the attitudes and behaviors that the participants thought were successful in the Doorway to Hope program. On the other hand, unresolved drug or alcohol addiction (or abuse) and failing to take seriously the boundaries represented by the rules were two basic reasons that participants thought led to failure for those who were not successful in completing the program. The participants attributed being supportive and helpful to one another, along with staff support and help, as the factors that contributed to their success in the program. In particular, they found that the paraprofessional counseling staff members were cheerful and upbeat and had a sense of humor. Both were open to listening to their problems, informative, willing to help, and “strong” women who were role models with whom they could identify.

The most obvious difficulties for the participants were the strict boundaries of the program, a circumstance that led to failure for some. For a few who were eventually successful, these boundary issues were reflected in difficulties in relating to their assigned FSC; however, these participants felt free to go to other staff for help when necessary. Identified as obvious failures in the program were those who had trouble with drug and alcohol addiction and abuse. Finally, the interview comments of the participants helped identify problems with the male security guards; as a result, the processes for selecting and supervising these protective service workers were subsequently improved.

Recommendations for Those Working with the Homeless

Many recommendations can be derived from the participants’ comments. It seems that many participants were well served by the program. It should be noted that many of the principles of adult education were

integrated into the program. While no definitive list of adult education principles exists in the literature, there is a great deal of consensus about what constitutes good practice in adult education. These principles, which appear in a number of well-known sources (Brookfield, 1986; Draper, 1992; Draves, 1997; Grissom, 1992; Imel, 1999; Knowles, 1992; Vella, 1994), were synthesized by Imel (1998). The ways that these common principles were implemented at Doorway to Hope and the activities that are recommended to others working with homeless adult women with children are noted below:

Principles for program implementation:

- Involve learners in planning and implementing learning activities.
- Draw upon learners' experience as a resource.
- Cultivate self-direction in learners.
- Create a climate that encourages and supports learning.
- Foster a spirit of collaboration in the learning setting.
- Use small groups so that program participants can share their experiences with one another (Imel, 1998).

Principles for program staffing:

- Do not rule out using community members as staff.
- Use empathetic, strong, positive role models.
- Cultivate a respect for everybody's boundaries.

Principles for program improvement:

- Conduct ongoing evaluation with past program participants for program improvement.
- Conduct ongoing staff continuing education and training.
- Realize that drug addiction and abuse are serious problems that often overwhelm other efforts.
- Incorporate special referral mechanisms to deal with these very serious issues.

References

- Brookfield, S. D. (1986). *Understanding and facilitating adult learning*. San Francisco: Jossey-Bass.
- Camardese, M. B., & Youngman, D. (1996). H.O.P.E.: Education, employment, and people who are homeless and mentally ill. *Psychiatric Rehabilitation Journal*, 19(4), 46-56.
- Center for Urban Policy Research, Rutgers—The State University. (1998). *New Jersey transitional housing demonstration program evaluation* (CUPR Policy Report No. 18). New Brunswick, NJ: Author.
- Dixon, L., Krauss, N., & Lehman, A. (1994). Consumers as service providers: The promise and challenge. *Community Mental Health Journal*, 30, 615-625.
- Draper, J. A. (1992). The dynamic mandala of adult education. *Convergence*, 25(4), 73-81.
- Draves, W. A. (1997). *How to teach adults* (2nd ed.). Manhattan, KS: Learning Resources Network.
- Goetz, J. P., & LeCompte, M. D. (1981). Ethnographic research and the problem of data reduction. *Anthropology and Education Quarterly*, 12, 51-70.
- Grissom, B. M. (1992). Fostering adult learning principles for your staff: One administrator's perspective of the value of conferences. *Adult Learning*, 4(1), 15-18.
- Imel, S. (1998). *Using adult learning principles in adult basic and literacy education*. Columbus, OH: The Ohio State University, Center on Education and Training for Employment. (ERIC Document Reproduction Service No. ED425336)
- Imel, S. (1999). Using groups in adult learning: Theory and practice. *The Journal of Continuing Education in the Health Professions*, 19, 54-61.
- Knowles, M. S. (1992). Applying principles of adult learning in conference presentations. *Adult Learning*, 4(2), 11-14.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods* (2nd ed.). Newbury Park, CA: Sage.
- Salzer, M. S. (1997). Consumer empowerment in mental health organizations: Concept, benefit, and impediments. *Administration and Policy in Mental Health*, 24, 425-434.
- Turner, V. (1967). *The forest of symbols: Aspects of Ndembu ritual*. Ithaca, NY: Cornell University Press.
- Vella, J. (1994). *Learning to listen, learning to teach*. San Francisco: Jossey-Bass.