

Running Head: EVALUATING THE GAP

# **Evaluating the Policy-Practice Gap in a Transitional Housing Program: An Innovation in Process Evaluation**

Jessica Lauren Perez, Equally Contributing Author  
Master of Arts in Social Ecology  
Ph.D. Candidate, School of Social Ecology  
University of California, Irvine, 300 Social Ecology I, Irvine, CA

Anaid Yerena, Equally Contributing Author  
Ph.D. in Planning, Policy, and Design  
Assistant Professor of Urban Studies  
University of Washington Tacoma, 1900 Commerce St., Tacoma, WA

**Abstract** *In the U.S., in 2013, 610,042 people were estimated homeless in one night. Improving the effectiveness of homeless assistance programs, particularly aligning programs' practices with their goals, is critical to serving this population. Using a theory that predicts homeless exits, this study presents an innovative, low-cost evaluation tool that can be used by a wide range of human service providers to conduct more frequent "in house" process evaluations. The Gap Assessment of Policy and Practice (GAPP) Tool streamlines process evaluations thus improving social programs. To test this tool's effectiveness, we compared the results of a traditional process evaluation and a GAPP Tool evaluation of a homeless assistance program. Both evaluations revealed a consistent disparity between program activities and expressed goals. The GAPP Tool is less time-intensive and provides a useful roadmap for structuring a process evaluation for program providers, thus increasing program impact by encouraging more frequent and efficient self-assessments.*

**Key words:** *process evaluation, homeless, self-assessment tool, qualitative methods*

## EVALUATING THE POLICY-PRACTICE GAP IN A TRANSITIONAL HOUSING PROGRAM: AN INNOVATION IN PROCESS EVALUATION

Evaluation is essential for the development and improvement of human services programs (Crook, Mullis, Cornille, & Mullis, 2005). A program evaluation can determine the mechanisms used to achieve success by disentangling a program's definition of success, program goals, and intended vs. actual outcomes. Our research applies a well-known theory by Zlotnick, Robertson, & Lahiff (1999) "five domain theory" (which explains the factors that contribute to homeless exits), to frame a traditional process evaluation of a transitional housing program (THP). Up to now, the application of this theory has been confined to understanding the homeless condition using quantitative analysis to test related hypotheses (Westerfelt, 1990; Zlotnick, Robertson, & Lahiff, 1999; Zlotnick, Tam, & Robertson, 2003; Thompson, Jun, Bender, Ferguson, & Pollio, 2010). However, we argue that this theory provides a useful framework to structure and evaluate any program that aims to facilitate homeless individuals' exit from homelessness (homeless exits). In doing so, we propose an innovative approach to process evaluation, through the use of a form framed by this theory. We call this form the Gap Assessment of Policy and Practice (GAPP) Tool.

The GAPP Tool is a diagnostic tool that assesses the discrepancy between a program's intended and actual service delivery in each of the theory's five domains. For this paper, our research question was: "How effective is the GAPP Tool at conducting an in-house process evaluation?" To address this question we first used a case study approach to complete a traditional evaluation. Then, we compared the findings from the traditional evaluation to those obtained from an evaluation conducted using the GAPP Tool.

Recent research has underscored the importance of incorporating qualitative data when assessing program guidelines (Gould, 2010). Thus, the tool we propose in this article integrates qualitative data gathering methods (i.e., interviews, document reviews and content analysis) into a process evaluation. Furthermore, research on evaluation use reveals that the likelihood of incorporating evaluation findings into program operations increases when stakeholders are involved in the evaluation process (Fleisher & Christie, 2009). Additionally, research based on program staff interviews indicates that perceived barriers to successful evaluations stem from the program staff's lack of trust of the process and evaluator, including the evaluator's social competence and knowledge of the program (Taut & Alkin, 2003). The GAPP Tool empowers program administrators and staff to conduct their own in-house evaluations, by doing so this tool will increase the likelihood of program improvement and reduce major barriers to program evaluation and monitoring.

This diagnostic tool and the proposed data collection methods will facilitate future process evaluations by streamlining and systematizing this task. The GAPP Tool serves as a road map for providers by clearly identifying what to look for and how to organize the information collected, thus identifying misalignments in intended and actual service delivery. Traditional evaluations require evaluators to create an exhaustive list of all activities and services provided by a program in order to understand how that program functions. The GAPP Tool, on the other hand, includes a comprehensive and broad categorization of areas of focus that have been informed by five domain theory that addresses homeless exits. This tool assumes that providers are already familiar with their own program's functioning, and thus aids them in cataloging all program activities so that they can self-evaluate on a routine basis. These more frequent evaluations will provide timely feedback to providers and serve as intermediate assessments

between professional evaluations. To test the effectiveness of the GAPP Tool, we compared the results of a traditional process evaluation and a GAPP Tool evaluation of a homeless assistance program, both of which yielded similar results.

In this article, we apply the GAPP Tool to a program provided by Shelter Now (pseudonym), an internationally-recognized organization, dedicated to providing services to the homeless. However, we believe the inherent structure of the GAPP Tool can be useful in a variety of human services programs with different populations. The applicability of this tool in a wide range of contexts supports our overarching argument about the importance of process evaluations for human services programs. We assert that process evaluations are an important feedback mechanism that providers should utilize to increase program success by keeping program policies and practices aligned.

The remainder of this article is divided into five sections. The first section describes the theory that guides this research, five domain theory. Applied in this context, this theory is useful because it provides a comprehensive categorization of factors that contribute to homeless exits. The next section presents the program under study and the methods used to conduct a traditional process evaluation. This section is followed by a description of the GAPP Tool and a guide on how to use it. In the findings section, we present a comparison of the results between the traditional process evaluation and the GAPP Tool evaluation. We then discuss lessons learned based on our analytic comparison. Finally, we discuss the implications of these findings including the adoption of the GAPP Tool for periodic in house evaluations.

## **STUDY FRAMEWORK**

In the U.S., an estimated 610,042 people are homeless in any given night (U.S. Department of Housing and Urban Development Office of Community Planning and Development, 2013).

Urban scholars have long since recognized the scarcity of affordable housing as a contributing factor to homelessness (Bassuk, Coupe, & Beach, 2013; Olmstead, 2009; Pauly, Reist, Belle-Isle, & Schactman, 2013). A national survey conducted by the U.S. Department of Housing and Urban Development (HUD) found that 60 percent of homeless people in America are using shelter services (2009). Shelters and attendant programs, such as transitional housing programs (THPs), implement policies intended to address homelessness and its consequences. A THP is a “project that is designed to provide housing and appropriate supportive services to homeless persons to facilitate movement to independent living within 24 months” (U.S. Department of Housing and Urban Development, 2011). Often, these efforts are implemented without the benefit of an evaluative process.

Research on the causes of homelessness emphasizes either structural or individual arguments (Burt, Aron, Lee, & Valente, 2001). Structural causes of homelessness include changes to the job and housing markets. Individual causes, on the other hand, can be anything from personal problems to individual life experiences.

The process evaluation in our study focuses on services that address individual causes of homelessness. We argue that THPs can benefit from five domain theory, when conducting a process evaluation, because this theory groups characteristics of homelessness in an attempt to encourage homeless exits. These five domains speak to a broad categorization of services that any THP can provide. Homeless programs, including THPs, most commonly offer services that target individual causes of homelessness.

The Institute for Research on Poverty published a discussion paper with a model describing the length of time an individual is homeless as a function of four factors or domains (Piliavin, Sosin, & Westerfelt, 1992). Subsequently, these ideas were reinforced and extended

by multiple researchers (Westerfelt, 1990; Zlotnick, Robertson, & Lahiff, 1999; Zlotnick, Tam, & Robertson, 2003) to provide a seemingly exhaustive categorization of the factors that contribute to homeless exits. These domains were later conceptualized as sources of “societal estrangement” experienced by homeless individuals (Thompson et al., 2010). These domains include impaired function, disaffiliation, cultural identification, human capital, and economic resources. Each of these domains is discussed in more detail below.

Impaired function (dysfunction) encompasses any barrier that impedes one’s ability to function in broader society. In the context of homelessness, impaired function can refer to physical disabilities, mental illness, and/or substance abuse, and is often the most cited individual cause of homelessness (Crane, et al., 2005; Rossi, 1990; Scott, 1993; Wood, Valdez, & Hayashi, 1990).

Disaffiliation describes the isolation often experienced by homeless persons who are disconnected from traditional societal institutions and support sources (Zlotnick et al., 2003). The identification of social bonds as a crucial element of societal survival led to the hypothesis that un-replaced, dissolved social ties are characteristic of homeless individuals (Westerfelt, 1990). As such, disaffiliation is usually measured as a lack of social support and social service use (Thompson, Rew, Barczyk, McCoy, Mi-Sedhi, 2009). Many studies have examined support networks for the homeless (Grigsby, Baumann, Gregorich, & Roberst-Gray, 1990; Meadows-Oliver, 2005). While some researchers report no significant difference between the size of the support network for homeless and housed individuals, other studies suggest that the smaller and lower-quality support systems of the homeless precipitate the precariousness of their situation.

Cultural identification can be considered a step beyond disaffiliation, as it connotes an individual’s adoption of street culture. Because it most often occurs after a person becomes

homeless, cultural identity is not a reason for the onset of homelessness, but the perpetuity of it. The notion of cultural identification can also be difficult to measure but has been operationalized as length of time homeless or self-identification as homeless (Zlotnick et al., 1999; Thompson et al., 2010). After years of observation, Wallace (1968) described skid rowers' street socialization in four phases: disaffiliation from traditional society, exposure to a new subculture, regular participation in skid row activities and integration into the community. Snow and Anderson (1987) also observed a type of street socialization in their fieldwork and found the longer an individual remained homeless, the more he or she was likely to accept a street social identity. While these studies were ethnographic in nature, Zlotnick et al. (1999) used regression analysis and found that a lack of cultural identification, operationalized as less than one year homeless, was associated with an exit from homelessness into stable housing.

Human capital refers to the skills an individual has acquired through educational and employment experiences and has been measured by educational attainment and income (Thompson et al., 2009). These skills encourage job stability and career advancement. The homeless are widely acknowledged as having low human capital. A review of risk factors for homelessness finds strong support for the conclusion that high school dropouts have a significantly higher risk of becoming homeless than students who graduate (Susser, Moore & Link, 1993). In a 2009 point-in-time homeless count conducted in California, job loss that led to an inability to pay rent was the most common reason for homelessness (Olmstead, 2009).

Zlotnick et al., (1999) added a fifth domain to understanding homeless exits, economic resources, which includes income, formal sector work, and other government assistance benefits (e.g., subsidized housing). Subsidized housing, in particular, has been identified as an influential factor in long-term exits from homelessness. In California, the lack of affordable housing was

cited as the most common self-reported reason why people enter homelessness (Olmstead, 2009). Martha Burt, a researcher at the Urban Institute, contends that without providing housing to the homeless, “nothing else works” (Burt, 2001, p. 5). Finally, a study comparing subsidized and market rate housing to homeless exits finds that only 15 percent of persons living in subsidized housing had returned to a shelter at some point during a five-year follow-up compared to 43 percent of the individuals without subsidized housing (Shinn, et al., 1998). Zlotnick et al. (1999) confirm these findings and report entitlement benefits, such as welfare and subsidized housing, predict stable homeless exits.

Together, these domains form the five domain theory, a framework that describes a complex and integrated set of factors that perpetuate homelessness. As mentioned earlier, we framed both the traditional process evaluation and the GAPP Tool evaluation around this theory. This theory, we argue, is useful for evaluators and providers during process evaluations. By structuring evaluations around this theory, one can assess whether programs are providing resources and/or support to clients in all of these domains. As argued above, this matters to programs seeking to assist individuals in their transition out of homelessness.

## **STUDY CONTEXT**

Shelter Now operates shelters and other service centers across the country. Shelter Now’s emergency shelter, the Haven, located in California, is the only year-round emergency shelter in its county. In addition to providing emergency shelter for about 36 people a night, the Haven also accommodates two THPs. Our research focuses on one of these THPs known as Integrated Transitions.

The following sections describe two ways of conducting a process evaluation: the traditional method and a simplified version using the GAPP Tool. We present the methodology

for a traditional process evaluation because the results of the traditional process evaluation were compared with the results of the process evaluation conducted using the tool.

## **TRADITIONAL EVALUATION**

### **Logic Model**

Guests using the Haven for emergency shelter who have secured employment are eligible to participate in Integrated Transitions, which provides three to six months of transitional housing. The express purpose of Integrated Transitions is to create opportunities for clients to save money and transition into permanent housing.

(FIGURE 1 ABOUT HERE)

Figure 1 shows a logic model for Integrated Transitions, which provides a visual roadmap of program inputs, outputs, and outcomes. The logic model details how Integrated Transitions operates and provides context for the findings discussed below. This model was constructed based on an understanding of program operations gleaned from observations, interviews with staff, and a review of program policies. The target population for Integrated Transitions usually includes adult men who are sober, employed at least 30 hours a week, and who have displayed a willingness to equip themselves with the tools necessary to live independently. The program excludes individuals convicted of violent crimes or crimes against children.

Investments in the program include staff, volunteers, money (salaries and program operations), time, resources, and equipment/materials. The outputs (program activities) are the provision of shelter and basic needs, case management, support, accountability, structure, and referrals/resources. Outputs also include teaching goal setting, budgeting and finance, time management, and responsibility. The short-term outcomes of Integrated Transitions are that upon graduation, clients have maintained employment for the full length of the program, have

saved at least 25 percent of their net income, have completed 75 percent of their short-term goals, and have obtained more stable transitional housing or permanent housing. This program does not track long-term goals. All program activities were evaluated, with specific attention given to how each of the five domains—impaired functioning, disaffiliation, cultural identification, human capital, and economic resources—were addressed by Integrated Transitions.

## **METHOD**

To complete an evaluation of the Haven’s Integrated Transitions, we used a case study approach, which is considered the traditional method for process evaluations (Yin, 2014). This allowed us “...to retain the holistic and meaningful characteristics of real life events such as organizational and managerial processes” (Yin, 2009, p.4), while evaluating the alignment between program policies and practices. According to Yin (2014), in order to capture a case’s complexity within its context, multiple sources of evidence should be considered and deliberately triangulated. As such, we conducted observations of program operations, interviews with program staff and previous clients, content analysis of client files, and a review of other organizational materials such as program policies. Below we describe each source of evidence and how the concepts used throughout the study were operationalized.

One of the authors was a volunteer case manager at the Haven for ten months prior to this study’s data collection. Volunteer work provided opportunities to gain an understanding of the site and build relationships to facilitate access to the Haven for this study. During the three-month study period, 120 hours of participant observations were completed at the Haven. The authors discussed and organized the study data throughout the data collection period.

Interviews included a predetermined set of questions that addressed program activities, implementation, and their perceived effectiveness. Semi-structured interviews provided the flexibility to pose follow-up questions based on information revealed during the interview (Merriam, 2009). A total of eight semi-structured, face-to-face interviews with knowledgeable staff members and previous clients were completed.

Integrated Transitions is a program operated by a small staff. The program's staff members are: Shelter Now's Director of Social Services as well as its Director of Administration and Social Services, the Haven's Lead Case Manager and Resident Manager. All staff members, with the exclusion of the Lead Case Manager (one of the authors was serving this role at the time of this study), were interviewed.

Interviews were also conducted with previous clients who participated in the evaluated program. Due to Institutional Review Board requirements, our pool of eligible participants was limited to individuals employed at the Haven, working on a volunteer basis, or still using emergency services (e.g., emergency shelters). A total of seven individuals fit these criteria at the time of the study, five of whom agreed to be interviewed. The program participants represented a range of post-program success. One previous client was unemployed and using an emergency shelter, two clients were employed part-time and using emergency shelters, and two clients were employed full-time and living independently. The intent of these interviews was to capture how effectively Integrated Transitions is being implemented from the perspectives of those using its services and resources. All of the interviews took place at the Haven or at the program's administrative offices to ensure the comfort and convenience of the interviewees. Interviews lasted no longer than an hour and were audio recorded and transcribed.

The interview guides for all participants covered three topics. First, we developed questions to collect background information on clients (based on work by Klumper, 2008). Clients were asked about their homeless history prior to program entry, while staff members were asked about their roles at the Haven. Second, we derived questions about program services and delivery from Integrated Transitions' program policies. For example, clients and staff were asked about the case management, recovery support, and spiritual and emotional growth opportunities at Integrated Transitions, as these services were listed in program policies. Third, we developed questions based on previous conceptualizations and operationalizations of the five domains (Westerfelt, 1990; Zlotnick, Robertson, and Lahiff, 1999; Zlotnick, Tam, and Robertson, 2003). These questions asked staff and clients to describe how Integrated Transitions addressed each domain in service delivery and to give examples of the types of services related to these domains.

### **Organizational Documents**

There were a total of 70 client files stored at the Haven's case management offices. These files contain all the information about a client's activities and status while in the program. We reviewed the files as additional sources of information about clients' progress within the program and to corroborate this information with interview responses. Client files report how often clients are seen by case managers and which clients actually participate in any aspect of Integrated Transitions. We also reviewed all written policies for Integrated Transitions to triangulate information provided by staff and clients, and to answer other unaddressed program evaluation questions.

### **Measuring the Five Domains**

As described earlier, there are five domains--impaired function, disaffiliation, cultural identification, human capital, and economic resources. Each domain contains several dimensions, which we have translated as specific areas of focus that THPs can address. Neither the five domains nor the dimensions have been measured qualitatively or consistently across studies (Zlotnick, Robinson & Lahiff, 1999). While previous studies have measured whether individuals were experiencing each domain, this study was interested in how Integrated Transitions addresses each domain in their service delivery. As the goals of this study differ from previous work (service delivery vs. individual experiences), we describe how we operationalized the domains and areas of focus in the following paragraphs, based on our understanding of program activities and consultations with program staff.

*Impaired Function.* To determine whether Integrated Transitions addressed clients' impaired functioning, staff and previous clients were interviewed about the program's efforts to address substance abuse issues and physical or mental health needs.

*Disaffiliation.* Questions for this study assess Integrated Transitions' ability to counteract disaffiliation. Because disaffiliation is measured in the literature as a lack of social support, staff and previous clients were asked about the program's ability to strengthen social networks and support systems.

*Cultural Identification.* As stated above, cultural identification happens when an individual forgoes traditional societal bonds to adopt street culture. For a program to combat the effects of cultural identification, it should focus on helping individuals re-learn traditional responsibilities and bridge broken bonds with mainstream society. Staff and previous clients were thus asked how the program provided life skills training (e.g., budgeting, goal setting, planning ahead, maintaining a household) and exposure to positive role models.

*Human Capital.* To determine if Integrated Transitions addressed low human capital, clients and staff were asked to identify if the program provided opportunities to increase the clients' educational training in ways that could lead to degree attainment and/or job skills.

*Economic Resources.* We reviewed client files and program policies to evaluate the program's capacity to attain entitlement benefits for clients and a formal sector job. Clients and staff were asked how Integrated Transitions helped clients obtain any type of housing (e.g., other transitional shelters, rental apartments, affordable housing). The interviews in this evaluation focused on housing due to evidence suggesting that providing stable housing environments is one of the best ways to secure successful homeless exits (Burt, 2001; Olmstead, 2009; Shinn, et al., 1998). The following table (Table 1) summarizes the five domains, areas of focus and previous operationalizations.

(TABLE 1 ABOUT HERE)

### **Data Coding for Analysis**

First, we performed a content analysis of the program policies and client files to determine how Integrated Transitions addresses the different areas of focus set forth within each of the five domains. From this content analysis, we derived themes related to each area of focus, program activities and services. Second, we completed open coding of interview transcripts. Techniques borrowed from Glaser's (1965) constant comparative method were used to compare the properties of each open code to each other and to collapse and expand codes based on the evaluation questions and the themes identified during content analysis. These collapsed and expanded codes were used to conduct a focused coding of interviews, field notes, and primary documents. All sources of data were analyzed iteratively following the recommendations of

Rossi, Lipsey, and Freeman (2004) for performing process evaluations. The entire process of data coding and analysis took approximately three months.

## **GAPP EVALUATION**

Previously, we discussed how process evaluations are time and resource-intensive. To simplify the process, we developed the following: the Gap Assessment of Policy and Practice (GAPP) Tool. In the subsequent sections we describe how we developed the tool, the aspects of service delivery the tool assesses, how the tool is formatted, and the data gathering methods required to complete a process evaluation using the tool.

### **Gap Assessment of Policy and Practice (GAPP) Tool**

This diagnostic tool assesses the disparity between a program's intent and its current practices and the alignment between resource allocation and priorities. The GAPP Tool was designed with our theoretical framework as a guide and the understanding that a process evaluation involves the comparison of a program's operations to its established program standards. The purpose of the tool is to simplify the technique/steps required to complete a process evaluation and is intended to encourage service providers to carry them out more frequently. As part of this type of *internal* process evaluation, constructing a logic model every time is not necessary because providers are familiar enough with the program to know the progression of steps a participant makes through the program.

The scope of the GAPP Tool is to measure the difference between how the program is supposed to operate and how it actually functions. The tool does this in two ways; first, and most importantly, it compares a program's policies to its practices. Second, it allows program administrators to assess whether their vision of what the program should be focusing on is being implemented through service provision.

## **Description of the GAPP Tool**

The GAPP Tool (Table 2) is divided into four main parts that appear as columns: (1) the five domains and each domain's corresponding areas of focus; (2) program policies; (3) program practices; and (4) the GAPP score. As we argued in the introduction, if a program's ultimate goal is to assist clients to exit homelessness, the program should incorporate each of the five domains in its service delivery. Therefore, the first column of the form contains the five domains and the domain's areas of focus, which provide the structure for the subsequent columns.

Within each domain, the program administrator will determine the priority the program places on addressing each area of focus using his or her personal experience and understanding of the program. The program administrator must assign a number from zero to three to each area of focus (where zero is not a priority and three is high priority). This assigned number is called the domain's priority level. A multitude of factors can be considered when assigning this priority level, including resources allocated to fill each area of focus, the administrator's beliefs about the program's success addressing each area of focus, and whether each area of focus is in keeping with the program administrator's understanding of the program's mission. To complete this assessment, administrators must ask themselves: *"How important is it for this program to address issues of (each area of focus)?"*

(TABLE 2 ABOUT HERE)

The second section of the form pertains to program policies and should also be completed by the program administrator. The "A. Program Policies" column in this section requires the program administrator to list all specific program policies that address the various areas of focus of the five domains. This information can be found in adopted program documents, such as program policies, or in any document describing the program and its goals. While filling out this

column, administrators must ask themselves: “*How would someone, who knows nothing about my program, fill out this section based solely on what is written in the policies?*” Then, the program administrator assigns a score to each area of focus (from zero to three) based on the priority the program policies gives to each one (e.g number of services for each area, how the program policies address each area, etc). In this section, the administrator should provide a justification for each score assignment.

The third section of the form, “B. Program Practices,” should be completed in a similar way as the previous section, but by a program provider (someone delivering the services outlined in the policies). While an administrator may be more knowledgeable about the program’s goals and mission, a provider is more familiar with daily program activities and how services are delivered to clients. To keep the policies section from influencing what the provider will include in the current section, we recommend that the program provider use a blank form or have the administrator fold the policies section back (to cover its contents). In the first column of Section B, the provider lists program activities or services that address each of the five domains’ various areas of focus. The provider then scores the priority of the activity or service in program practices, and describes why each score was assigned. To assess this score, the provider can think about the amount of time program staff dedicates to each activity on a monthly basis. The information needed to fill out this column can be taken from real-time observations of program operations, program paperwork that logs daily services, personal experience, interviews with other staff, and interviews with current clients. These interviews should focus on how successful the program is in addressing each area of focus. For example, one suggested interview question is: *Describe how the program addresses clients’ issues with mental illness.* When filling out this

form, it is important to bear in mind that the more sources of information the provider uses, the more comprehensive the understanding of how the program works will be.

The final section of the form should be filled by both the program administrator and provider. In this section, the priority score of program practices is subtracted from the program policies' priority score to reveal the GAPP score. The GAPP score measures the difference between how the program is supposed to operate and how it actually functions. Finally, a comparison of the priority level, the policy priority score assigned by the administrator, and the practice priority score assigned by program providers, is performed to derive the misalignments between what the program administrator thinks the program should be doing, what the policies dictate the program should do, and what the program actually does. By comparing the magnitude of these three numbers, the program administrator and provider(s) can determine how to resolve the discrepancy between policies and practices (if any) by following the guidelines provided below.

The time devoted to completing a process evaluation using the GAPP Tool is allocated as follows: 1) approximately eight hours (each) are needed for the administrator and service provider to collect the necessary data and fill out their respective portions of the form, 2) the following day should be devoted to program staff sitting down, interpreting the results, and deciding how they are going to address program gaps and misalignments. This final day is crucial, as the form provides a roadmap for the evaluation, but it is up to program staff to determine how to use the results to yield the greatest benefit for their program. To test the GAPP Tool we followed these steps, and the author who had served as a case manager for data collection took on the role of the program provider, while the other author filled out the program administrator's section.

As mentioned above, interpreting the results from the GAPP tool requires both program administrators and providers. The purpose of this joint interpretation is to ensure that the appropriate measures are taken by everyone involved in the program to realign policies and practices where needed. Here we provide an explanation of how to interpret the numbers derived from filling out the tool. The first step is to look at the GAPP score, to identify whether 1) program policies are aligned with program practices ( $Po = Pr$ ), 2) program policies give a higher priority to addressing a need than program practices ( $Po > Pr$ ), or 3) program policies give a lower priority to addressing a need than program practices ( $Po < Pr$ ). In cases in which there are misalignments, policies or practices should be adjusted to correct the gap using the priority level assigned by the administrator as a guide. For example, in a case where  $Po > Pr$ , and where addressing this need is a priority of the program (based on the initial priority level assigned by the administrator), programs can change their practices to reflect their policies. For this same type of misalignment, if the program's priority level is low, programs can consider scaling back their policies. Because program staff have the best understanding of the mission, goals, and impacts of their program, they can use their discretion to make the necessary adjustments. On the other hand, even when the policy and practice priority scores are aligned ( $Po = Pr$ ), program providers and administrators should look to the justifications of each score to determine if the alignment is in harmony with organizational goals.

## **FINDINGS**

The previous section discussed how the GAPP Tool simplifies process evaluations of homeless services and programs. This section contains the key findings derived from the comparison of the traditional and GAPP Tool evaluations of the program. Before presenting the findings, we would like to remind our readers that the purpose of this paper is to introduce the GAPP Tool as a low-

cost evaluation tool that can be used by a wide range of homeless and other human service providers (for more on this refer to the Lessons Learned section below) to conduct more frequent “in house” process evaluations. The findings we report do not therefore derive from the individual evaluations, but from a comparison across evaluation methods. The purpose of presenting the findings of both evaluations as a comparison is to illustrate the differences and similarities between the results of these two evaluation approaches. Through this comparison, we shed light on the tool’s range, scope and limitations.

Both evaluations produced consistent results (see Table 3). The findings of the traditional evaluation are more detailed and analytic than the GAPP Tool’s findings. The GAPP Tool forces the evaluator to list all policies and practices that address each domain’s areas of focus, therefore it exposes general patterns in program operations that are easy to identify and resolve. The examples below highlight the similarities as well as three potential scenarios revealed by the GAPP Tool. The section is organized following these three scenarios: (1) policies and practices give the same priority to addressing an area of focus, thus are aligned ( $P_o = P_r$ ), (2) policies give a higher priority to addressing an area of focus than program providers do in practice ( $P_o > P_r$ ), and (3) policies give a lower priority to addressing an area of focus than program providers do in practice ( $P_o < P_r$ ) (see Table 3).

[TABLE 3 ABOUT HERE]

### **1. Aligned ( $P_o = P_r$ )**

Regarding substance abuse, an area of focus that falls within the *impaired functioning* domain, the evaluation using the GAPP Tool found no gap between the importance given to policies and the importance given to practice in addressing a client’s need for support with substance abuse. However, the justification section of the GAPP Tool noted that the policies

explicitly dictate that clients must undergo screening and attend one recovery meeting per week. In practice, case managers usually refer clients for screening and suggest that they attend meetings. The tool also reported that given the policies, clients have the burden of seeking additional resources to deal with substance abuse. Furthermore, policy enforcement across clients was inconsistent. Some participants with a history of substance abuse reported that they did not receive the support explicitly outlined by the policies. For instance, a client with a long history of substance use reported that supportive services were an “*option*” provided by the program “*if [he] didn't try to work on [his] problems [him]self.*”

The traditional evaluation highlighted examples of recovery and supportive services listed in the program policies. Interviews with staff and previous clients reveal that, in practice, case managers may work with clients who have a history of substance abuse. In these instances, case managers and clients work together to develop a sobriety plan, which can become one of the client’s personal goals while in the program.

As is seen in this scenario, while the GAPP score was zero between the priority given to the program’s policies and practices, the justifications highlighted how a policy is improperly enforced. In this scenario the traditional evaluation and the GAPP Tool can appear to reach different conclusions (see Table 3). However, the justifications from the GAPP Tool are consistent with the findings from the traditional evaluation. This example highlights the importance of considering the provided justifications when deciding which policies and/or practices to modify.

## **2. Policy Higher than Practice (Po >Pr)**

According to the GAPP Tool evaluation, policies are very specific regarding the life skills training participants are to receive. Program policies state that tasks such as budgeting and

goal setting are accomplished during case management and a monthly room and board fee of \$200 is enforced to teach clients about responsible bill-paying behavior. In practice, these policies are followed inconsistently across case managers (i.e., only some case managers devote specific time and resources to helping participants meet their budgeting goals during their weekly meetings).

The traditional evaluation details the same program policies regarding life skills training that were listed in the GAPP Tool. However, the traditional evaluation revealed that life skills training is delivered to clients almost exclusively through case management meetings. This is problematic for two reasons. First, case managers were not required to document the dates of every meeting with a client in their case notes. Therefore, it was impossible to determine whether case managers and clients were meeting consistently. Second, life skills training during case management meetings is highly dependent on the personality and training of the individual case manager. Most of the case managers' training occurs on the job, resulting in slightly different education depending on the types of situations that arise in the workplace. One of the clients interviewed had been enrolled in the Haven's THPs several times over the course of a decade. Having been assigned multiple case managers, he noted that the usefulness of case management was highly dependent on the quality of the case manager, which varies:

*Interviewer: OK, so what makes the difference between [a case manager] being good and not so good?*

*Interviewee: Being not so good is not being an active listener. In order to help others, you have to listen. If you don't listen, you might miss that keyword, and that can be a big difference between being successful or not being successful.*

*Interviewer: OK, so active listening makes a good case manager versus a not so good case manager. Would you say that your case management experience is highly dependent on the actual case manager themselves?*

*Interviewee: Right, an active case manager is efficient, listens, and yeah, that makes a good case manager. That can make a big difference.*

The GAPP Tool, therefore, confirms the results of the traditional evaluation. However, the traditional evaluation additionally identified the systemic issues (lack of documentation, variation in case manager training and personality) that are causing the inconsistent delivery of services during case management. This finding highlights the usefulness of the GAPP Tool as an approximation of, and not a replacement for a traditional evaluation.

### **3. Policy Lower than Practice (Po < Pr)**

The extent to which the program will expose clients to positive role models, an area of focus within the *cultural identification* domain, was found missing from program policies by the GAPP Tool and traditional evaluations. However, during the traditional evaluation, staff and previous clients all agreed that Integrated Transitions offers this service. One example of a role model reported by participants is the Haven's employees who were previous program graduates. In an interview with a Haven employee and previous program graduate about whether he thinks clients are exposed to role models, the employee stated that current clients view him as a "success story":

*I think myself would be a role model for a lot of the people here. [A client] on the work search, she would always say that I was a success story. Basically somebody that came in, got on the program, got a job, moved out, and so – I guess that would be me.*

Other examples of role models given by participants include interns, volunteers, and program leadership. The GAPP Tool yielded the same result, a GAPP score of -2 that resulted from program policies failing to dictate the program's responsibility to provide role models (score of 0), while program practices addressing this area of focus had a medium priority (score of 2) among staff.

Although both methods revealed similar findings, the difference in how the information was compiled and presented affected the interpretation of the results. The GAPP Tool clearly illustrated a trend: Integrated Transitions is exceeding policy recommendations during service delivery, as indicated by more instances of  $P_o < P_r$ . This pattern was difficult to discern from the traditional evaluation, which yielded a vast amount of data that needed to be organized and categorized. This example highlights the usefulness of the GAPP Tool to organize and synthesize data that is then easier to interpret.

## **LESSONS LEARNED**

Comparing the results of the traditional and GAPP Tool evaluations underscores that both methods are in agreement. However, each method provides unique information about the program being evaluated. The GAPP Tool is especially useful in uncovering general trends in the alignment between program policies, or intentions, and program practices. The traditional evaluation provides more detailed data and is more useful for understanding why these trends are occurring. As such, one method should not replace the other. Instead, we advocate for the use of both the traditional and GAPP Tool evaluations--the former whenever economically feasible, or as established by program or funding requirements, and the latter in between traditional evaluations.

The exercise of reviewing program policies and program practices afforded by the GAPP Tool presents practitioners with the opportunity to continually and feasibly gain feedback on their efforts and keep sight of their mission, which will influence program practice in the future. The GAPP Tool also promotes practitioner empowerment by providing them a new skill to add to their wheelhouse: process evaluation. As suggested earlier, taking the time to evaluate a program's process will reduce gaps between policy and practice, and in turn, realign resources to priorities. This exercise, as a whole, will improve program outcomes. Another benefit of conducting process evaluations and updating policies and practices is that training new staff – a practice integral to running a successful program – becomes easier since practices are properly documented in the program's policies. As mentioned earlier, administrators and providers familiar with the program can use the GAPP Tool to conduct more frequent process evaluations, reducing the cost associated with hiring a professional evaluator. When comparing both evaluation methods, the traditional evaluation took 120 hours over the course of three months, while the GAPP Tool took 24 man-hours to complete over the course of two to three days. Furthermore, as noted in the results, both methods have different strengths. The traditional evaluation is better at identifying systemic or structural issues while the GAPP Tool reveals broader misalignments between policies and practices (i.e., resource allocation and program activities).

### **Generalizability**

A benefit of the case study method used in this study is the potential for establishing analytic generalizability, which allows for the extrapolation of principles or theoretical concepts to settings other than the original case (Yin, 2014, p.40). Although the GAPP Tool was tested on one THP, we contend that this tool has analytic generalizability because it is structured using two

broad frameworks. The first is the basic principle of a process evaluation—a comparison between intended program activities and actual program activities—which is used to investigate and assess social interventions or programs (Rossi, Lipsey, Freeman, 2004, p.3). The second framework, five domain theory, sharpens a process evaluation to capture the complexity of the specific social problem of interest, that is, encouraging homeless exits. This recalibration increases the generalizability of the original method of a process evaluation to apply to other homeless assistance programs with similar goals. As such, the GAPP Tool, as presented here, can facilitate a process evaluation of any social intervention or program whose expressed goal is to encourage exits from homelessness.

The GAPP Tool has been constructed to utilize five domain theory, a theory that explains causal domains for homelessness, within the framework of a process evaluation. Because of the inherent structure of the tool, it is possible to replace five domain theory with any applied theory that has clearly outlined and exhaustive categories explaining behavior or social conditions (e.g. substance use, health behavior change). In this case, the first column of the GAPP Tool should be used list the domains of the chosen theory in place of the five domains. As such, the authors believe that, as long as any program in the human services field has identified such a theory, it can evaluate its intervention by using the GAPP Tool. Since the authors have only used this tool within the context of a homeless intervention, one avenue for future research is to confirm the usefulness of the GAPP Tool for conducting process evaluations in other fields.

### **Limitations**

While the study found that the GAPP Tool yielded similar results to the traditional evaluation, we can only report preliminary success in applying the tool. The current study reports on a pilot application of the GAPP Tool in the evaluation of a single THP. As evaluators, we understand

that measure development and validation is a continual process. Future testing of the tool is recommended to validate its effectiveness. A limitation of the GAPP score (the last column of the tool) is that a gap only means that there is a misalignment between the priority given to policies and practices in addressing each area of focus, while a score of 0 does not necessarily indicate that policies are being followed. The GAPP score thus only indicates whether the priority level of policies matches that of practices in each area of focus. To understand how the activities are being carried out, program administrators and staff must refer to the justification section of the tool to identify discrepancies in how the policies are enacted.

## **CONCLUSION**

Research suggests that extended homeless housing programs, such as THPs, are more costly to operate than emergency shelters or permanent supportive housing programs (Spellman, Khadduri, Sokol, & Leopold, 2010). A simplified process evaluation that can be completed in-house systematically and frequently will help program administrators and staff identify problems in a more timely manner than traditional evaluations. To address this need, we developed the GAPP Tool, a form structured around five domain theory. Since this theory applies to all homeless exits, it is useful for any program that hopes to help individuals overcome reasons for homelessness and/or encourage transitions out of homelessness.

Traditional evaluations will continue to be necessary for making programs accountable for how they operate and allocate resources. The GAPP Tool will thus serve as a routine reminder of what a program's priorities are and of the gaps that exist between these priorities and practice. As a result, program administrators will improve functionality by funneling resources solely towards program goals and priorities. This will translate into a broader community impact by using the resources programs already have available to them. Over time, the GAPP Tool will

help programs evolve as their needs change and continue on their path to becoming more efficient and effective.

#### Acknowledgements

I would like to thank my co-author, Anaid Yerena, for her role in shaping this paper from a concept we discussed in her office years ago to a reality and for every lesson she has taught me along the way. I would also like to thank Dara Sorkin for her wisdom, encouragement, and instilling in me a great love of Program Evaluation. To the organization and staff discussed in this manuscript: thank you for opening your doors and hearts to me. Finally, I would like to express my deepest gratitude to the homeless men who shared their experiences with me. Their resilience and perseverance inspires me every day to lend a voice to those not often heard.

## REFERENCES

- Bassuk, E. L., Coupe, N., & Beach, C. A. (2013). Strategies for Ending Homelessness Among Children and Families. In *Child and Family Advocacy* (pp. 73-89). Springer New York.
- Burt, M. (2001). *What Will it Take to End Homelessness?* Washington, D.C.: Urban Institute.
- Burt, M., Aron, L., Lee, E., & Valente, J. (2001). *Helping America's Homeless: Emergency Shelter or Affordable Housing?* The Urban Institute Press.
- Crane, M., Byrne, K., Fu, R., Lipmann, B., Mirabelli, F., Rota-Barelink, A., et al. (2005). The Causes of Homelessness in Later Life: Findings From a 3-Nation Study. *Journal of Gerontology, 60B* (3), 152-159.
- Crook, W.P., Mullis, R.L., Cornille, T.A., and A.K. Mullis. 2005. Outcome measurement in homeless systems of care. *Evaluation and Program Planning, 28* (4): 379-390.
- Fleischer, D. N., & Christie, C. A. (2009). Evaluation use results from a survey of US American evaluation association members. *American Journal of Evaluation, 30*(2), 158-175.
- Glaser, B. G. (1965). The Constant Comparative Method of Qualitative Analysis. *Social Problems, 12*, 436-445.
- Gould, N. (2010). Integrating Qualitative Evidence in Practice Guideline Development Meeting the Challenge of Evidence-based Practice for Social Work. *Qualitative Social Work, 9*(1), 93-109.
- Grigsby, C., Baumann, D., Gregorich, S., & Roberst-Gray, C. (1990). Disaffiliation to Entrenchment: A Model for Understanding Homelessness. *Journal of Social Issues, 46*, 141-156.
- Klumper, L. (2008). *Homeless Women with Children: Characteristics of Women Successfully Completing a Transitional Housing Program*. Walden University, College of Social and Behavioral Sciences. Walden University.
- Meadows-Oliver, M. (2005). Social Support Among Homeless and Housed Mothers: An Integrative Review. *Journal of Psychosocial Nursing and Mental Health Services, 43* (2), 40-47.
- Merriam, S. B. (2009). *Qualitative Research: A Guide to Design and Implementation*. San Francisco: Jossey-Bass.

- Olmstead, Z. (2009). California's 2009 Homeless Count Summary. Retrieved from California State Assembly Democratic Caucus Website: <http://asmdc.org/speaker/images/TRH-CAHomelessCount2009.pdf>
- Pauly, B. B., Reist, D., Belle-Isle, L., & Schactman, C. (2013). Housing and harm reduction: What is the role of harm reduction in addressing homelessness?. *International Journal of Drug Policy*.
- Piliavin, I., Sosin, M., & Westerfelt, H. (1992). Conditions Contributing to Long-Term Homelessness: An Exploratory Study. University of Wisconsin-Madison, Institute for Research on Poverty, Madison.
- Rossi, P. H. (1990). The Old Homeless and the New Homeless in Historical Perspective. *American Psychologist*, 45 (3), 954-959.
- Rossi, P. H., Lipsey, M. W., & Freeman, H. E. (2004). *Evaluation: A systematic Approach* (Vol. 7th Ed.). Thousand Oaks: Sage Publication.
- Scott, J. (1993). Homelessness and Mental Illness. *The British Journal of Psychiatry*, 314-324.
- Shinn, M., Weitzman, C., Stojanovic, D., R., K. J., Jimenez, L., Duchon, L., et al. (1998). Predictors of Homelessness Among Families in New York City: From Shelter Request to Housing Stability. *American Journal of Public Health*, 88 (11), 1651-1657.
- Snow, D., & Anderson, L. (1987). Identity Work Among the Homeless: The Verbal Construction and Avowal of Personal Identities. *American Journal of Sociology*, 92 (6), 1336-1371
- Spellman, B., Khadduri, J., Sokol, B., & J. Leopold. (2010). *Costs associated with first-time homelessness for families and individuals*. Washington, DC: U.S. Dept. of Housing and Urban Development, Office of Policy Development and Research ; Office of Special Needs Assistance Programs.
- Susser, E., Moore, R., & Link, B. (1993). Risk Factors for Homelessness. *American Journal of Epidemiology*, 15 (2), 546-556.
- Taut, S. M., & Alkin, M. C. (2003). Program staff perceptions of barriers to evaluation implementation. *American Journal of Evaluation*, 24(2), 213-226.
- Thompson, S. J., Rew, L., Barczyk, A., McCoy, P., & Mi-Sedhi, A. (2009). Social Estrangement: Factors associated with alcohol or drug dependency among homeless, street-involved young adults. *Journal of Drug Issues* , 39 (4), 905-929.

- Thompson, S., Jun, J., Bender, K., Ferguson, K. M., & Pollio, D. E. (2010). Estrangement factors associated with addiction to alcohol and drugs among homeless youth in three U.S. cities. *Evaluation and Program Planning*, 33, 418-427.
- U.S. Department of Housing and Urban Development. (2009, Dec/Jan). A Clearer National Perspective on Homelessness. Retrieved from HUD User: [www.huduser.org/periodicals/Researchworks/decjan\\_09/RW\\_vol6num1t3.html](http://www.huduser.org/periodicals/Researchworks/decjan_09/RW_vol6num1t3.html)
- U.S. Department of Housing and Urban Development. (2011). Consolidated Plan Regulation as Amended by ESG Interim Rule and Homeless Definition Final Rule. Retrieved from HUD Exchange: [https://www.hudexchange.info/resources/documents/24CFRPart91\\_11.21.11.pdf](https://www.hudexchange.info/resources/documents/24CFRPart91_11.21.11.pdf)
- U.S. Department of Housing and Urban Development Office of Community Planning and Development. (2013). *The 2013 Annual Homeless Assessment Report to Congress*. Washington D.C.: The U.S. Department of Housing and Urban Development Office of Community Planning and Development.
- Wallace, S. E. (1968). The Road to Skid Row. *Social Problems*, 16 (1), 92-105.
- Westerfelt, H. (1990). *The ins and outs of homelessness: Exit Patterns and Predictions*. Doctoral Dissertation, University of Wisconsin-Madison, School of Social Welfare.
- Wood, D., Valdez, B., & Hayashi, T. S. (1990). Homeless and Housed Families in Los Angeles: A study Comparing Demographic, Economic, and Family Function Characteristics. *Journal of Public Health*, 80 (9), 1049-1052.
- Yin, R. K. (2009). *Case study research: Design and methods* (Vol. 5). Sage.
- Yin, R. K. (2014). *Case Study Research: Design and Methods*. Thousand Oaks, California, United States of America: Sage.
- Zlotnick, C., Robertson, M., & Lahiff, M. (1999). Getting off the Streets: Economic Resources and Residential Exits from Homelessness. *Journal of Community Psychology*, 27 (2), 209-224.
- Zlotnick, C., Tam, T., & Robertson, M. (2003). Disaffiliation, Substance Use, and Exiting Homelessness. *Substance Use and Misuse*, 38 (3-6) 577-599.