Adult and Family Services

JULY 2025 REPORT

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DELAWARE AND CHESTER
COUNTIES





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EXECUTIVE SUMMARY

The Voice and Vision, Inc. team is pleased to share the Adult and Family Services 2025 Survey results. It is our privilege to provide the data, a summary of findings, and recommendations representing the Voice of the individuals who took part in the survey. We appreciate all involved, especially the participants who took the time to share their feedback, the providers who accommodated our interview needs, and the Delaware County Adult and Family Services.

Purpose and Target Population:

This project aimed to gather feedback from Delaware County residents who are currently unhoused. The focus was on identifying the barriers unhoused individuals face when accessing healthcare, employment, benefits, and housing and to develop recommendations to reduce or eliminate these barriers. A total of 57 in-person interviews were conducted between April and June 2025.







DETAILED REPORT

The following report provides the results of all the interviews conducted with participants of Community Care Behavior Health (CCBH) and county-funded program services. A 'signal' reporting style is used for ease of interpretation where appropriate. This style quickly shows, by color, the measurement of an

Strength -- indicates a positive response to a question



Indicates a median response to a question (i.e., somewhat, sometimes neutral)



Opportunity for Change – indicates a negative response

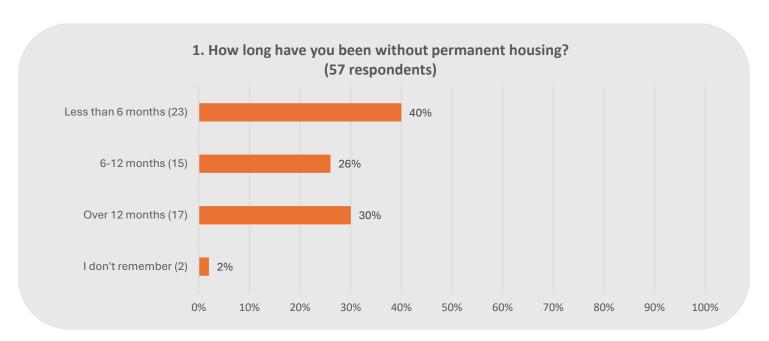
Survey Results

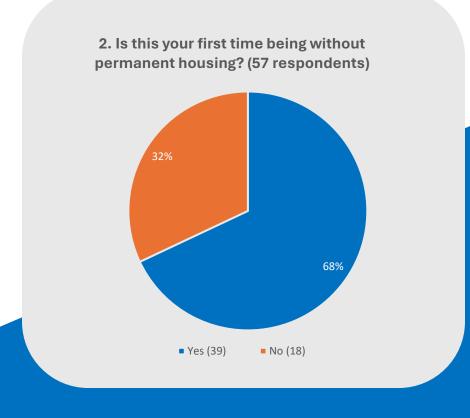
Results in this report indicate individual attitudes and experiences with CCBH and county-funded program services. It is important to note that participant experience is only one input to a comprehensive quality management program.

Please note:

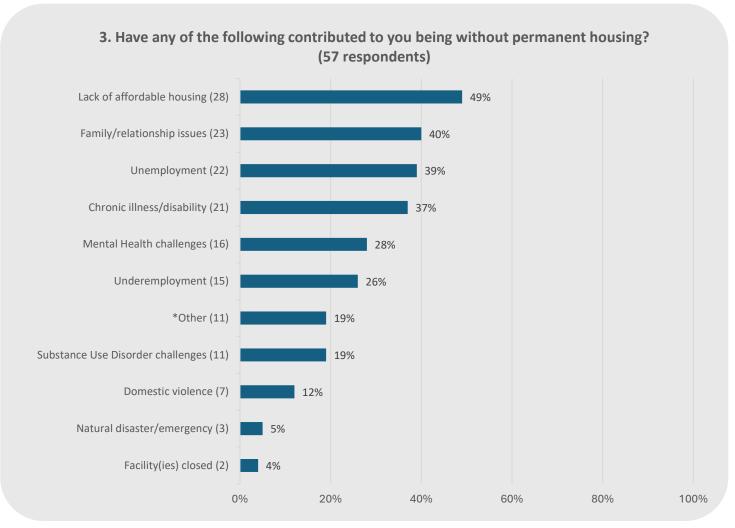
- Q = Question in the detailed report.
- N = Population size
- Total percentages may add up to 99% or 101%, or a small category response may equal 0% due to rounding.
- For questions where multiple responses were allowed, the number of respondents may be less than the actual number of answers provided
- The N/A (not applicable) responses are considered null in the data charts and are not included in percentages unless indicated.

SURVEY RESULTS

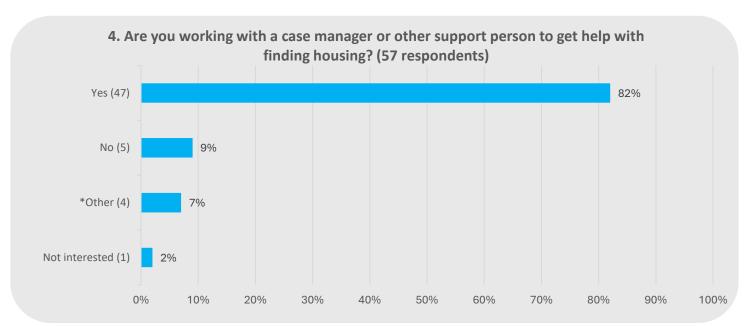








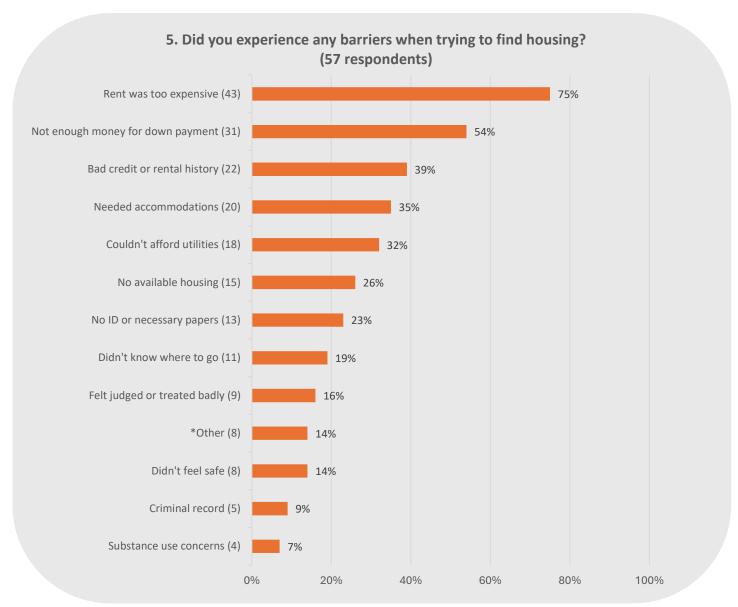
^{*}Other responses (11): Family passed (2); Lack of family; House sold; COVID-19; Lost house voucher; Prison; Lost car; Non-resident.



^{*}Other responses (4): Not sure (2); In intake; Participant did not specify.

Housing

The following questions regard your experience with finding housing after becoming unhoused



^{*}Other responses (8): Unemployed (2); Livable wage; Lost voucher; No credit; No jobs accommodate for childcare; Wait list; Wants to be close to family.

6. Additional comments from Q5: (*10 Respondents)

- 1) The participant explained that they felt like people are ignoring their housing applications because of their skin color and age.
- 2) Participant felt they were being looked down on by family and others for not being housed and having mental health problems.
- 3) The stepfamily unrightly took the house, and now the participant's social security benefits cannot support them.
- 4) Participant worries about qualifications for housing.
- 5) The participant has chronic pain due to a genetic defect. They are also experiencing difficulties with their IDs.
- 6) Challenge trying to find housing. Job hours vary and the participant is in between jobs right now.
- 7) Age is an issue sometimes; the participant has a weariness about age with things like steps, etc.
- 8) The participant gained custody of their child, and their job interfered with childcare. Participant can only work select hours due to being a single parent.

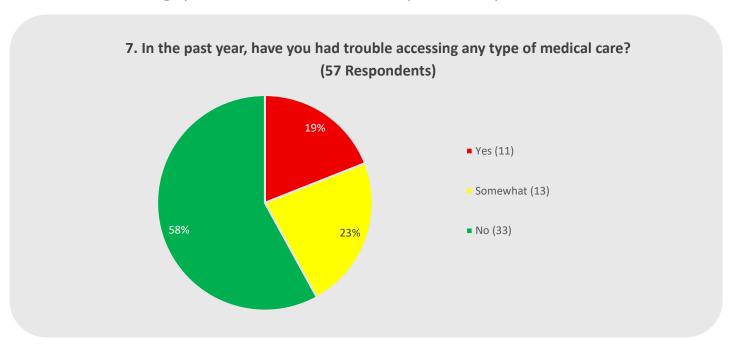
"I think it is a skin color thing. I felt judged."

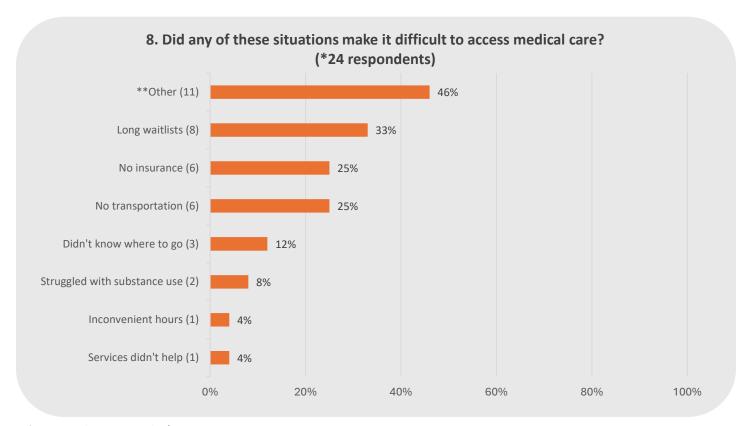
Stigma is an issue, and people are not being considerate about mental health and being unhoused.

^{*49} respondents have no additional comments.

Healthcare

The following questions have to do with your ability to access healthcare





^{*33} respondents reported N/A.

^{**}Other responses (11): Participant is too busy; Facilities are closing; Crozer closing; Medication is not affordable; Has not reached out for help.

9. Additional comments from Q8: (*12 Respondents)

- 1) With Crozer shutting down, participant needs to quickly find another doctor.
- 2) Psych medications are not treating the medical problems.
- 3) Could not keep up with appointments because they have been busy dealing with being unhoused.
- 4) Crozer closing will create problems for future medical care.
- 5) Crozer shut down.
- 6) Housing issues. They only get 12 one-way trips a year at the shelter for a doctor, which is not enough for the chronically ill. Participant is in between PCPs.
- 7) When participant went to rehab, they cut off their medical benefits. Their doctor is in a different county.
- 8) Crozer shut down, now participant needs to find a new doctor.
- 9) Has not gotten a psych evaluation yet has been waiting for four months. Would like a counselor or therapist to help with anger issues and emotional support.
- 10) No ID.

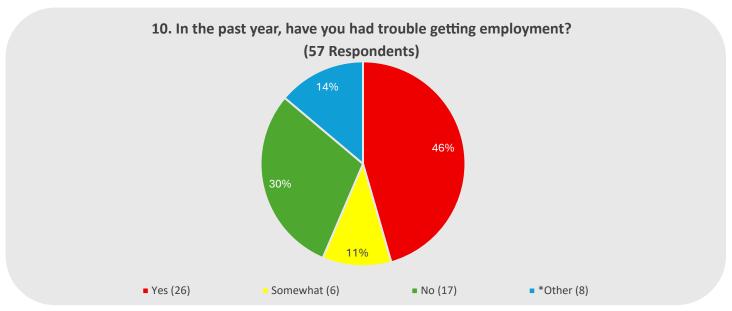
Crozer closing will create problems for future medical care.

Transportation, anxiety, and health problems make it hard to get to appointments.

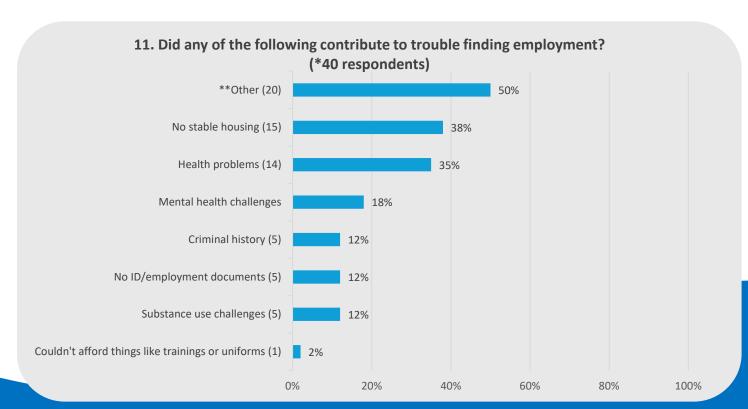
^{* 45} respondents had no addition comments.

Jobs

The following questions regard your experience with finding employment



^{*}Other responses (8): Has disability preventing work (4); Retired; Not getting/keeping employment; Stay at home mom; Senior citizen.



^{*17} respondents reported N/A.

^{**}Other responses (20): Disability/injury preventing work (4); Transportation (3); No recent work history; Issues maintaining hygiene; Ageism; Overqualified; Looking for work; Needs resume and cover letter training; Underemployment.

12. Additional comments from Q11: (*14 Respondents)

- 1) Probation is a barrier. Participant feels overwhelmed. Lack of references and resources. Does not know where to turn, anxiety disorder deters them.
- 2) Worked until they developed a chronic illness.
- 3) Speech issues from a stroke.
- 4) Participant is in a wheelchair. Before their injury, they were able to find plenty of work. Has been in plenty of interviews that they know they are qualified for, but they don't get them. They believe they are not getting jobs because of their injury and disability.
- 5) Works at a car wash under the table.
- 6) Could not continue job working with the elderly because they don't want to get them sick.
- 7) Got into an accident that shattered their skull, and participant has epilepsy.
- 8) Needs flexibility with a part-time job due to mental health issues.
- 9) Job schedules conflict with childcare.
- 10) No issue getting employment, the problem is keeping employment due to a sick child.
- 11) Can only find part-time jobs with little pay and no job stability.
- 12) Applying for jobs, but no one has responded.

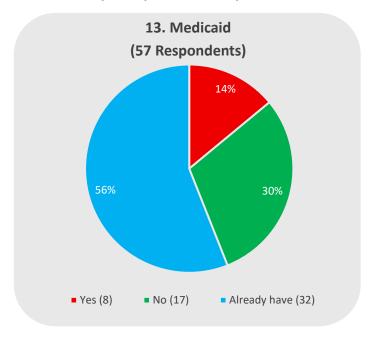
Public transit being cut back will cause problems. "I live off the bus lines."

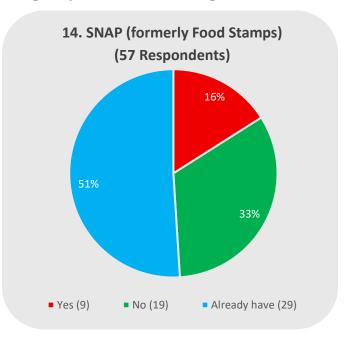
"Nobody is going to hire a deaf old man."

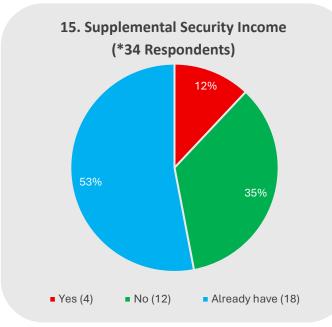
^{*43} respondents had no additional comments.

Benefits

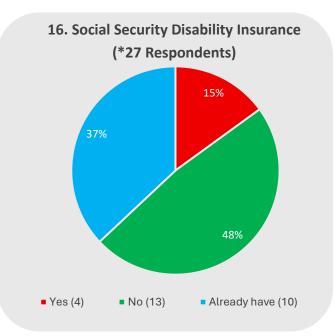
In the past year, have you had trouble getting any of the following benefits...



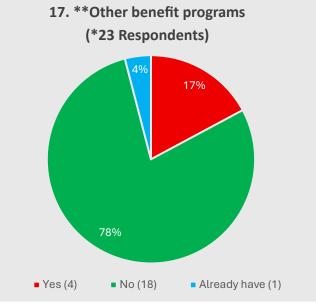








^{*30} respondents reported N/A.





18. Additional Comments from Q13-17:

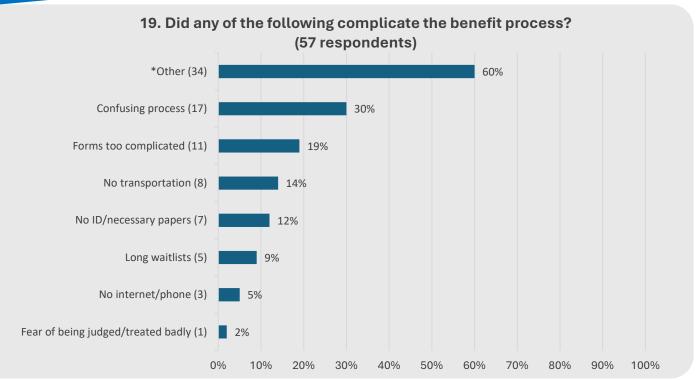
(*11 Respondents)

- 1) Four respondents reported being ineligible for SSDI.
- 2) Two respondents reported being too young to receive SSI.
- 3) Two respondents reported being in the process of applying for SSDI with no issues.
- 4) They keep getting denied for food stamps. The participant states the reason is because they have a savings account over the limit because of SSDI. But now they are wasting their savings on food.
- 5) Lack of medical records.
- 6) Based on participant's SSI statement, they cut Medicare and SNAP benefits. Their savings from selling things shows they have money in the bank.
- 7) Changes Medicaid coverage frequently for the participant's two daughters; information in the computer is inaccurate.
- 8) Gets less than regular SNAP benefits. Participant views this as unfair.
- 9) Applied, but may have completed it incorrectly.
- 10) As a senior citizen with no medical problems, the participant wants to be taken care of now. They do not use their age to get anything or get priority for healthcare and benefits.
- 11) Receiving unemployment; SNAP benefits were cut to \$23 a month.

^{*34} responded N/A.

^{**}Other responses: Reusable bus pass.

^{* 46} respondents did not have additional comments.



^{*}Other responses (34): Mailing problems (2); Denied benefits; Lack of medical records; Never used credit; Proof of residence was hard to get; Benefits not enough; Doesn't know where to go; Online applications are confusing; Getting out of prison made it harder to get connected to resources; Took a while to get child onto benefit plan; Currently contacting previous employers.

20. Additional Comments from Q19:

(*12 Respondents)

- 1) Never used credit, so they have no credit score.
- 2) SSDI payments are too high to meet the standards to get SNAP benefits.
- 3) Proof of residence was hard to obtain but eventually was able to get benefits.
- 4) Needs to get a new rep payee for SSDI.
- 5) Did not initially have a problem until now.
- 6) Does not know where to go; benefits are not enough.
- 7) Needs to do it in person; online is too confusing and they do not answer the phone.
- 8) Getting out of prison made it harder to get connected to resources.
- 9) Since 2019, the participant returned from CA to PA to finalize a divorce. The participant stated that they forced into a shelter since they were a non-resident. They needed 6 letters from shelters to prove PA residency. The judge told them that was the only way the law could modify the residence books from state to state.
- 10) It took a while to transition their child on the participant's benefit plans after gaining custody; it was denied.
- 11) Having to contact previous employers is difficult.
- 12) Mail sent to the wrong address.

^{*45} respondents had no additional comments.

Other Challenges

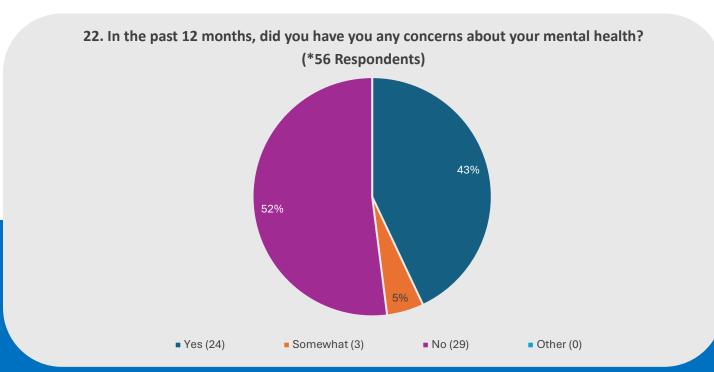
21. Were there any more difficulties or barriers that you faced that we did not cover? (*13 Respondents)

- 1) The paperwork needed for housing needs to be communicated from the very beginning, so they know the expectations. Vouchers don't cover a place that is ADA accessible. "Those apartments cost more. Why would I need documentation to prove that I am in a wheelchair? It's like the housing authority wants us to do the work."
- 2) Places refused participant's medical support animal.
- 3) More affordable training programs are needed; participant wants to work in a doctor's office.
- 4) Having to be around people is a challenge. They like to be alone.
- 5) Hard time managing responsibilities with a disability and rules in the shelter.
- 6) Participant wants to have a higher-up or funder come in and go through the process undercover to really see the treatment of people. Participant did not want to say anything else in fear of losing housing.
- 7) Needs medication for major health problems. They have not been treated; hopes the case manager helps.
- 8) Lack of motivation. Hard to sleep at the shelter because of noise, cars, others talking, and lights on at night.
- 9) Section 8 is a barrier. They fail to communicate about rent increases, failed to be accommodating with court dates related to ADA issues, and provided incorrect dates to submit required documentation Section 8 needs. Eventually led to eviction.
- 10) The second barrier is the landlords: they do not upkeep the maintenance of the apartment. Even though all the rent was paid, the participant could not get verified for timely payments—resulted in eviction.
- 11) Participant is on SSDI, but it is not enough for rent, and there is no more funding. Many people on disability end up in shelters for longer periods of time. Many have medical concerns or health issues. Sleeping on mats, eating leftovers, exposed to sickness, increased exposure to trauma in the shelters—it is very stressful for mental health.
- 12) History of eviction from 2010; the landlord took participant to court after they requested repairs to be made to the home. They lost everything.
- 13) Unable to interact with family.

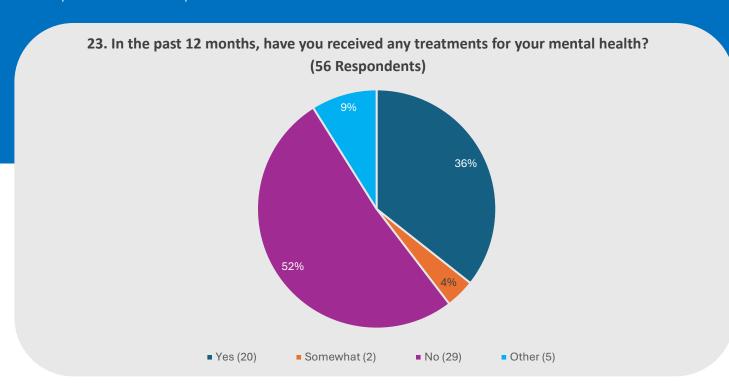
^{*44} respondents had no additional comments.

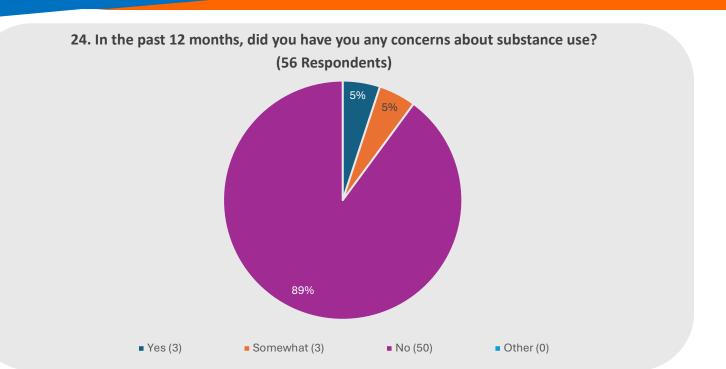
Mental Health and Substance Use

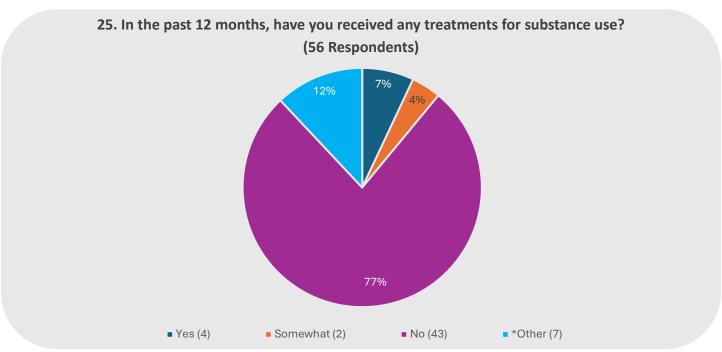
The following questions regard any mental health and/or substance use concerns in the last 12 months



^{*1} Respondent did not answer questions 22-32.







^{*}Other responses (7): Referred to a recovery facility, and has been unable to start because the participant lacks the necessary ID. The participant recently had a stroke and had trouble remembering certain details.



26. What recommendations do you have to improve Adult and Family Services? (*35 Respondents)

- 1) Convert unused buildings into shelters.
- 2) Have family counseling available for more people.
- 3) Keep the process moving. Sometimes things just stop; the waiting period takes a toll on mental health.
- 4) Improve medical care.
- 5) Need more programs for people like jump start programs, help with unemployment, and shelters that allow pets.
- 6) Only gets \$1,000 a month—cannot live off that. Not letting people in who are under the influence, and room checks for drugs.
- 7) "Adult and Family Services are pretty good."
- 8) More housing and other services for seniors.
- 9) Better communication about Adult and Family Services.
- 10) Better communication, more housing options, and shorter wait lists.
- 11) Reduce wait times and provide more programs. Too many hoops to go through. Needs childcare.
- 12) Make computer systems more user-friendly.
- 13) Participant is still going through [the process]. Funding isn't being spent properly regarding housing shelters. Less photo-ops with politicians.
- 14) More visits to the shelters from the funders to see what it is really like there.
- 15) Shelters need to let people stay during the day. Participant couldn't stay during the day after their surgery.

 More allotted bathroom time. Do not kick people out. More options for transgender people—allow them to feel more comfortable.
- 16) Keep everything running smoothly, cooperate between systems. Lead people to the right resources. Don't play the blame game on people.
- 17) People should get stipends for the chores they do to keep the shelters clean.
- 18) Education on how to get housing—i.e., waitlists—and more open communication about resources (e.g., where to get socks and toiletries).
- 19) Reduce stigma of getting help from the government.
- 20) Streamline the process to make it easier to get in and out. Provide more resources to help people understand their housing rights.
- 21) The people who come in need more help than they admit. Learn to recognize that. Some people use this because they have nowhere else to go. "They do not want help, and it's terrible." Also, the participant would like help finding housing with a single floor, because they are worried about their sibling falling downstairs.
- 22) Should not throw a non-resident in a shelter. Should provide better accommodations like a hotel.
- 23) Better oversight over shelters and administrative services. Clearer pathways to clarify policies and procedures with any state or federal agencies. Respond to all emails and calls on a real basis.

Continued page 19

26. What recommendations do you have to improve Adult and Family Services? Cont. (*36 Respondents)

- 25) Rotations to different shelters to determine the best fit and culture.
- 26) SSI needs to be raised to accommodate the increased cost of living. There need to be more shelters or more transitional living options. Separate men and women in shelters. Improve healthy food access and enforce shower and bathroom rules.
- 27) It should be easier to verify people's situations and aid them in what they are going through.
- 28) More help understanding the Social Security and disability process.
- 29) Being properly treated with respect. "I feel that I am a burden in society."
- 30) Faster processing of documents.
- 31) "Just stick together."
- 32) Better communication.
- 33) "They're pretty good."
- 34) Make the benefits process less confusing.
- 35) Better oversight over shelters and administrative services. Clearer pathways to clarify policies and procedures with any state or federal agencies and respond to all emails and calls on a real basis.

More psychiatric services available.

More counseling support and services.

Financial literacy and budget support for people in shelters. More funding for programs for subsidized housing.

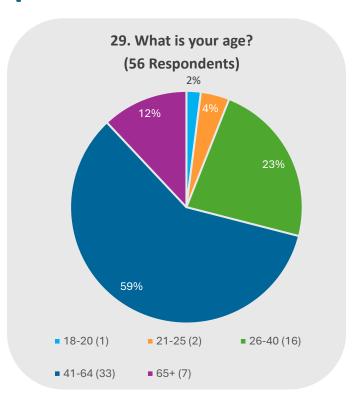
Improve food at shelters.

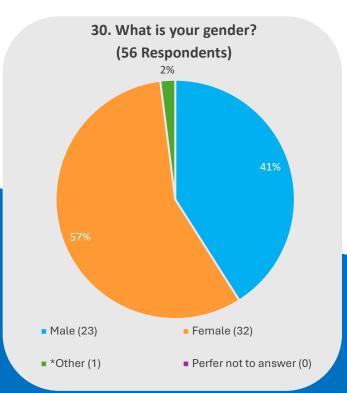
A better understanding of how participants qualify for various programs.

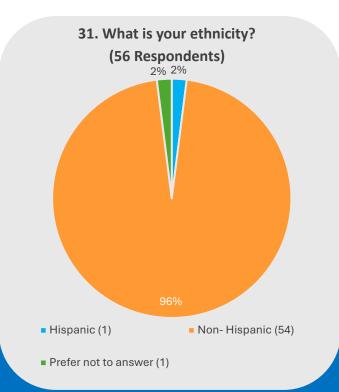
^{*20} respondents did not have any recommendations

Demographics



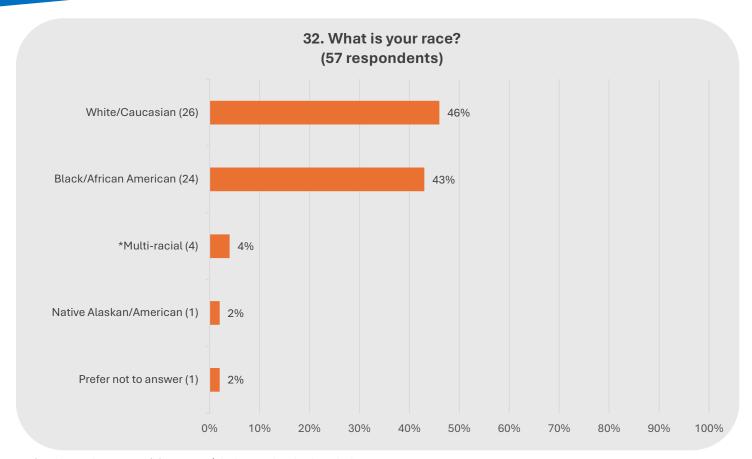






Question 28 was excluded because it asked if they wanted to be on the Voice and Vision Inc. mailing list.

^{*}Other response: Transgender.



^{*}Multi-racial responses (4): Hispanic/Black; Mixed with a lot; Black American.



KEY FINDINGS

Research shows that the top three reasons individuals experience homelessness are:

- Loss of Income or Employment
- Lack of Affordable Housing
- Mental Health and Substance Use Disorders

Source: U.S. Department of Housing and Urban Development (HUD), 2023 Annual Homeless Assessment Report (AHAR).

Approximately 25% of unhoused individuals have a serious mental illness About 34% report chronic substance use

Participant Survey Insights

When asked what factors contributed to their experience of being without permanent housing, respondents' answers reflected national trends but also highlighted additional challenges:

- Lack of affordable housing 49%
- Unemployment or loss of income 39%
- Mental health challenges 28%
- Family and relationship issues 40%
- Chronic illness or disabilities 37%

RECOMMENDATIONS

1. Improve Communication and Outreach

 Provide clear, consistent updates on housing availability and application processes. Use multiple communication methods (e.g., text, phone, in-person) to reach unhoused individuals.

2. Expand Housing Education and Rights Awareness

- Develop and promote educational programs on tenant rights and housing navigation.
- Provide materials in multiple languages and reading levels to ensure accessibility.

3. Supportive Services to Address Barriers

 Subsidized childcare for unhoused individuals, especially those seeking employment or services.

4. Address Family and Relationship Factors

- o Conflict mediation and family reunification support where appropriate.
- o Services tailored for individuals fleeing domestic violence or family breakdown.

5. Enhance Cross-System Collaboration

 Advocate for expanded eligibility in housing and employment programs for people with disabilities or behavioral health needs.

Additional Comments: (*10 Respondents)

- 1) "They treat me good here. They are good people, and they have good hearts."
- 2) Due to the limited speech caused by the stroke, some of the questions needed to be answered nonverbally and by pointing to response options.
- 3) HUD needs to do better with the vetting process. There is a lot of favoritism. There is housing available but not for the participant.
- 4) They want the standard of shelter improved. Homeless people need to be treated better with better conditions and quality of things, i.e. food. Some people are sleeping on bedding.
- 5) Referred by a friend 1 year after house foreclosed and currently at the shelter.
- 6) Communication is word of mouth. The doctor stated that there has not been a formal communication process in place over the past 45 years.
- 7) Heard about the services through a friend. Communication is by word of mouth. No formal communication process for 45 years.
- 8) Age is a problem trying to find housing, and participant must advocate for themselves regarding medication. She does not pursue a job that someone younger than her can do. they know what to expect and are not looking for special help.

"This is the first time seeing how people act when they find out you are homeless. They are afraid to work with you and do not trust you. There is stigma, and you are put into a category. It has nothing to do with how much money you get, just the label. They assume drugs or sometimes to label you with a problem. They always assume you are lying and categorize everyone in the same position unfairly."

"The life center are life savers."

^{*46} respondents had no additional comments.