CJANALYSIS

**Project LIFE Analysis Report**

OVC Project Title:
Specialized Services for
Male and LGBTQ Victims
of Human Trafficking
(Award Number 2015-VT-BX-K026-SVS)

March 26, 2019

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*As of January 6, 2020*

# Introduction

The following report is an analysis summary conducted by the Applied Research Division (ARD) of the San Diego Association of Governments (SANDAG) for North County Lifeline's (NCL) **Project LIFE (Living in Freedom from Exploitation)**, Office of Victims of Crime (OVC) grant. SANDAG served in an advisory role in the implementation of NCL's evaluation of its project and then analyzed the data gathered by NCL upon completion of the grant (Award Number 2015-VT-BX-K026-SVS).

Project LIFE was a three-year grant from October 1, 2015, to September 30, 2018. NCL partnered with the North County LGBTQ Resource Center and The HOPE Project to identify, engage, and provide culturally appropriate and gender-specific support for male and LGBTQ trafficking victims. Support and services were provided to clients at three primary levels: Outreach and Engagement (OES), Short-Term Intervention (STI), and Intensive Case Management (ICM). The results described in this report are split into sections based on process and outcome research questions and service group (OES, STI, and ICM).

# Brief Program Description

Project LIFE offers the only comprehensive, trauma-informed supportive case management and trauma counseling for victims within a 30-mile radius in the northern region of San Diego County, and it is the only program countywide offering specialized services for LGBTQ and male trafficking victims.

Client engagement with Project LIFE can occur in multiple stages (OES, STI, and ICM) with increased interventions and contacts occurring at each level. OES is the first point of contact and consists of outreach to potential clients through a collaborative effort by staff from NCL, the North Country LGBTQ Resource Center, and The HOPE Project, with additional assistance from the YMCA. This stage is crucial in developing a trusting relationship and building rapport with individuals in the target population. The OES group includes the outreach and engagement of men, boys, and LGBTQ youth and adults in the community and institutional systems. Beyond the general outreach procedures, engagement for this group involved screening and one-on-one contact with information about services.[1] If a client does not progress in services past this initial outreach and contact phase, they are considered to be part of the OES group.

Clients who choose to engage further than OES, are connected with a case manager and a partnering agency (e.g., North County LGBTQ, Resource Center, NCL) that best fits their individual needs. These needs are determined using the Project LIFE Matrix assessment (described later in this summary) and through service plan development with the case manager. The degree to which each client wants to participate in services determines whether they receive STI or ICM. Specifically, clients who receive one to five case management contacts in under or participate around 30 days from intake are considered in the STI group. These clients receive a service package from NCL that is focused on provision of basic needs, crisis management, safety planning, and resources and referrals with follow-up. STI clients who engage in case management contacts longer than 30 days are considered to be a part of the ICM group. ICM clients are focused on achieving self-sufficiency and improving safety and overall well-being, as measured by the Project LIFE Matrix.

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[1] For the purposes of this analysis, this OES group is reflective of individual-level contact by the program and is distinct from the overall outreach and engagement efforts conducted as part of the grant.

# Methodology

The analysis included both process and outcome data. The process data provided information on client characteristics (e.g., demographics, needs, risk behaviors) and services received for each client group (OES, STI, and ICM). The outcome data consisted of one metric (i.e., Project LIFE Matrix) to measure change over time from intake and when the last Project LIFE Matrix was competed for each client.

## Process Research Questions

To understand the characteristics of the clients and services that were provided to them, the following research questions were addressed.

1. What were the number and characteristics of clients who received OES, STI, and/or ICM services?
2. What was the type and level of services received by clients?

## Outcome Research Questions

To understand any changes in client well-being after participating in ICM, the following research question was addressed:

1. Did clients who received ICM services demonstrate improvement in safety, well-being, and/or self-sufficiency as measured by the Project LIFE matrix?

## Analysis

Measures of central tendency, frequencies, and variability were used to describe the population and services received. When possible, paired samples t-test were used to determine significant changes between intake and exit assessments.

## Sample

Participants in this study could belong to one or more of the following three Project LIFE groups; OES, STI, and ICM, which range from lowest to highest level of engagement.

For purposes of analysis, clients who qualified for more than one group were not permitted to have simultaneous group membership. When determining group membership, a hierarchy was applied where ICM > STI > OES. Since the ICM clients received the most intensive program engagement and the OES clients received the least intensive, this hierarchy ensures that each client is categorized in the highest level of care they received. For example, an individual who initially engaged with the program at the OES level, but then began receiving ICM services, is considered in the ICM group only.

**Figure 1: Sample Sub-groups**

209 Total Clients

**49** OES

**122** STI

**38** ICM

During the grant period, NCL reported engagement with 209 clients across the OES, STI, and ICM groups. As Figure 1 shows, there was 49 individuals (23%) in OES, 122 clients (58%) in STI, and 38 clients (18%) in ICM.[2]

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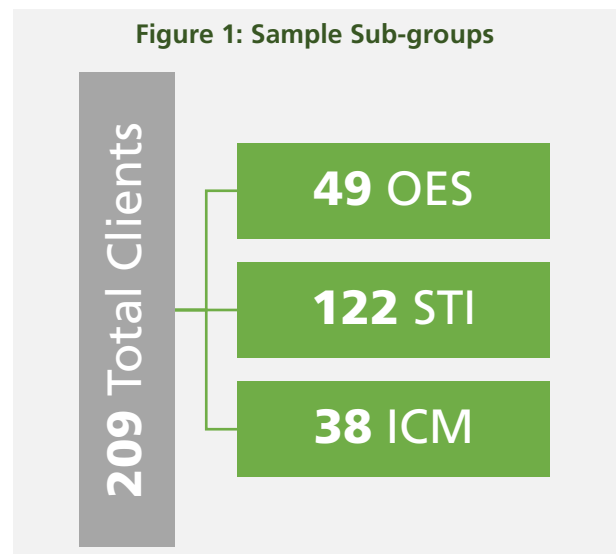
[2] Because clients could enter Project LIFE though different agencies, data were not collected consistently, resulting in missing data. Missing data may be non-random, which might affect generalizability/ reliability of the results.

## Data Collection Instruments

**Tracking Information Management System (TIMS):** In accordance with grant requirements, NCL periodically entered client data into the TIMS system for required OVC reports. Data collected in TIMS included client demographics (i.e., gender, race, country of origin), intake characteristics (i.e., immigrations status, exploitation history, etc.), and services delivered to the client. Copies of these reports were made available to SANDAG by NCL for this evaluation in the form of an Excel download.

**Project LIFE Matrix:** To address the outcome research question and to inform case plan development, the Project LIFE Matrix assessment was administered to ICM clients. The Project LIFE Matrix is a clinical assessment tool used to assist staff in monitoring client progress and measure change over time. The Project LIFE Matrix measures client improvement across multiple domains (e.g., safety, financial stability, educational, etc.) between two periods (Pre and Post). Upon entry into ICM, NCL staff established a baseline measure (Pre) on the Matrix for each client. Client progress was measured by noting improvement over baseline in domains at the last time the client was seen or the last time they were available for the program to assess (Post).[3] Each domain was scored on a scale of 1 to 5 that describes the level of stability a client is experiencing in that domain (1= "*In Crisis*", 2= "*Vulnerable*", 3= "*Stable*", 4= "*Safe/Self Sufficient*", and 5= "*Thriving*"). Therefore, a positive shift in Pre-to-Post scores represented increased stability, while a negative shift represented decreased stability.

# Results

## What were the number and characteristics of clients who received OES, STI, or ICM services?

### OES

During the grant period, NCL reported engagement with 49 clients who only received OES services. Females represented the highest proportion of this group (53%), with 27% identifying as male and 20% identifying as transgender. Clients reporting sexual orientation (n=48) indicated they were bisexual (33%), gay (23%), lesbian (15%), other (23%), or heterosexual (6%). Of clients with a reported ethnicity (n=26), the majority were Caucasian (50%), Hispanic or Latino (19%), or Multi-racial (15%) with the remainder described as another ethnicity (8%), Native American (4%) or Native Hawaiian/Pacific Islander (4%). Most of the clients (92%) reported their country of origin as the United States, with other responses including Mexico (6%) or the Russian Federation (2%).

### STI

NCL delivered short-term interventions to 122 clients during the grant period. The STI group predominately identified as male (56%), followed by female (33%) and transgender (11%). Consistent with the intended target population, the majority of the STI group (81%) identified as part of the Lesbian, Gay, Bisexual, or Queer (LGBQ) community. For clients who described their sexual orientation (n=74), 27 reported as heterosexual, 22% reported as gay, 22% reported as bisexual, 14% reported as lesbian, 9% reported as pansexual, and 7% reported another orientation.[4] Race/ethnicity is not reported because the information was only available for 21 clients.[5] Similar to the OES group, most of the STI clients (98%) reported their country of origin as the United States, with other responses including Mexico (1%) or Unknown (1%).

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[3] Due to the "open door" policy of the program, clients do not necessarily "terminate" program services. Therefore, the final Project LIFE Matrix acquired for each client is considered to be their Post assessment.

[4] Other orientations included asexual, queer, multiple orientations, and other.

[5] The racial/ethnic breakdown of the 21 clients with reporting this information: Caucasian (52%), African American (14%), or Multi-racial (14%), Hispanic or Latino (10%), Asian American (5%), or another ethnicity (5%).

## ICM

The smallest service group was ICM, which included 38 clients. As Figure 2 illustrates, the largest proportion of ICM clients identified as transgender (42%), followed by female (37%) and then male (21%) (Figure 2). Over half (53%) of the ICM clients identified as part of the LGBQ community. For clients who described their sexual orientation (n=36), the most commonly reported orientation was heterosexual (61%), followed by bisexual (31%), then gay (3%), lesbian (3%), and pansexual (3%). The ICM group was racially diverse with Hispanic or Latino representing the largest group (48%), followed by Caucasian (30%), Multi-racial (15%), and African-American (6%) (Figure 3). While the majority of ICM clients cited their country of origin to be the United States (71%), while other countries including Mexico, El Salvador, Guatemala, Bangladesh, Nicaragua, and Cuba were also represented.

Of the ICM clients reporting a country of origin other than the United States (n=11), four were asylees, three had no documentation related to their immigration status, two had temporary work Visas, one had a U Derivative Visa, and the remaining was reported as having an "other" type of immigration status.

Due to the level of rapport built with ICM clients, additional data regarding client trafficking experience was collected by NCL for this group. ICM clients were asked to report on the trafficking type they experienced, as well as the specific type and setting where his/her exploitation occurred. Overall, the most commonly reported trafficking type experienced by ICM clients was sex (89%), followed by labor (6%) or both sex and labor (6%) (Figure 4).

**Figure 2: ICM Gender**

Male 21%
Female 37%
Transgender 42%

Total = 38

**Figure 3: ICM Ethnicity**

African American 6%
Multi-Racial 15%
Hispanic/ Latino 48%
Causcasian 30%

Total = 33
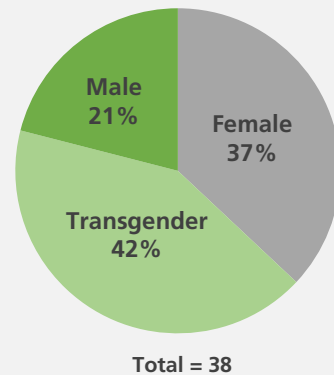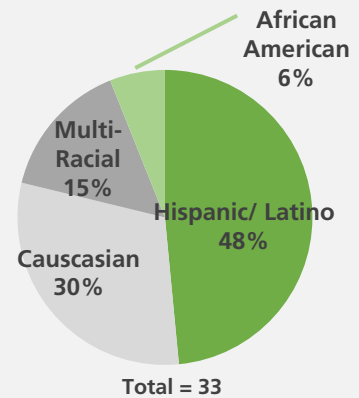
*Note: Cases with missing data not included.*

**Figure 4: Types of trafficking experienced by ICM clients**

**89%** Sex Trafficking

**6%** Labor Trafficking

**6%** Sex and Labor Trafficking

Total = 36
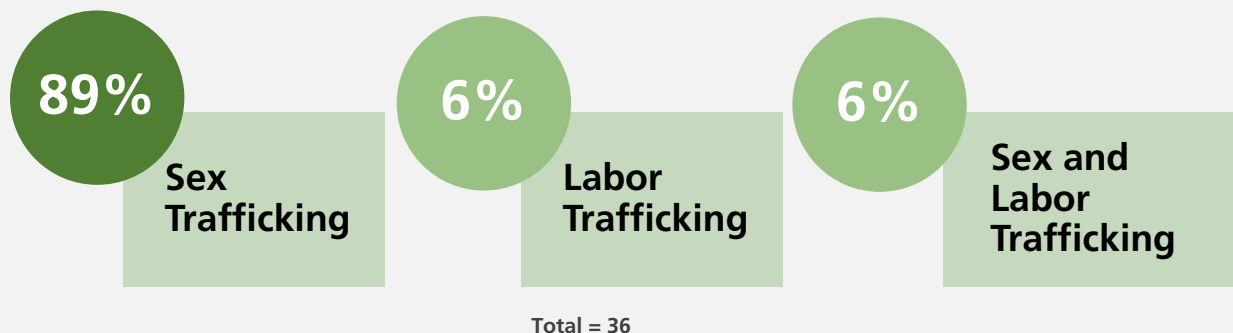
*Note: Percentages do not equal 100 due to rounding. Cases with missing data not included.*

Clients were also asked about the specific exploitation they experienced and in what type of the settings these occurred. Clients could provide information on more than one exploitation type and setting, and the most commonly reported exploitation type was prostitution (76%). Pornography (15%) was the next most frequent type of exploitation, followed by involvement in escort services (9%), domestic servitude, stripping/exotic dancing, or other types (6% each), and 3% each reporting field labor, restaurant/food services, or transportation (Figure 5). Clients who reported they had experienced prostitution indicated doing so an average of 2.3 separate incidents of exploitation (SD=3.21, range 1-15) and those that had been exploited through pornography reported an average of 1.6 separate incidents of exploitation (SD=0.89, range=1-3).[6] When considering exploitation settings experienced by ICM clients, the most commonly reported settings was on the street (42%), in a hotel/motel (30%), or in a private home (27%) (Table 1).

**Figure 5: ICM Type of Exploitation**

| Type | Percent |
|---|---|
| Prostitution | 76% |
| Pornography | 15% |
| Escort Service | 9% |
| Domestic Servitude | 6% |
| Other | 6% |
| Stripping/Exotic Dancing | 6% |
| Field Labor | 3% |
| Restaurant/Food Service | 3% |
| Transportation | 3% |

Total = 33

*Note: Percentages do not equal 100 due to multiple responses per client. Cases with missing data not included.*
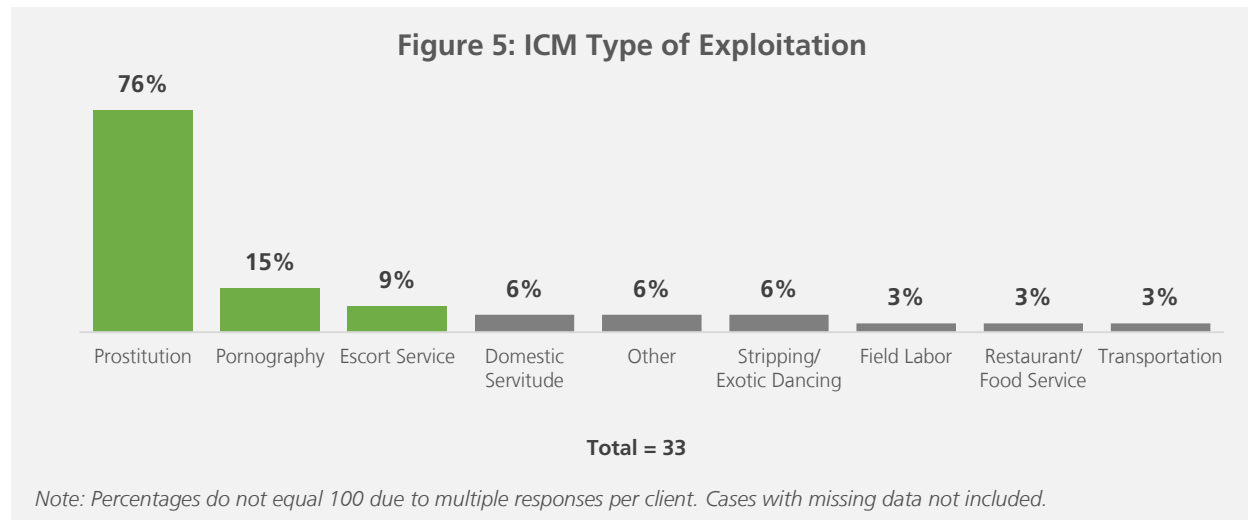
**Table 1: Settings of Exploitation Reported by ICM Clients**

| | Percent of sample |
|---|---|
| Street | **42%** |
| Hotel/ Motel | **30%** |
| Private Home | **27%** |
| Office | 9% |
| Retail | 9% |
| Agricultural | 6% |
| Bar | 6% |
| Bus/ Truck Stop | 6% |
| Construction | 6% |
| Group Home | 6% |
| Parking Lot | 6% |
| Restaurant | 6% |
| Brothel | 3% |
| Casino | 3% |
| Factory | 3% |
| Massage Parlor | 3% |
| Strip Club | 3% |
| **Total = 33** | |

*Note: Percentages are bases on multiple responses. Cases with missing data not included.*

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[6] Only categories with 5 or more unique clients reporting were included in this descriptive analysis.

At intake, a Project LIFE Matrix assessment was conducted with all ICM clients to understand his/her most immediate need and inform the service plan. For purposes of analysis the five levels of need were collapsed into three categories: "*In crisis/Vulnerable*" (reflecting an immediate need), "*Stable*" (no longer urgent, but an area to work on) and "*Safe/Self Sufficient or Thriving*" (the optimum level). At intake, more than half of the ICM clients were assessed as "*In Crisis or Vulnerable*" in 9 of the 10 domains assessed by the Project LIFE Matrix. Around eight out of ten clients fell within this most urgent level in the areas of financial stability, mental health, and/or social and emotional health (84%, 84%, and 77%, respectively). Basic needs (71%), education (68%), transportation (66%), health/medical (63%), and safety (61%) were also assessed as "*In Crisis or Vulnerable*" for more than six out of 10 clients. Domains in which a large proportion assessed as less than "*Stable*" reflect quality of life challenges and illustrate the high level of need for this population (Figure 6).

**Figure 6: Intake Project Life Matrix Summary for ICM Clients**

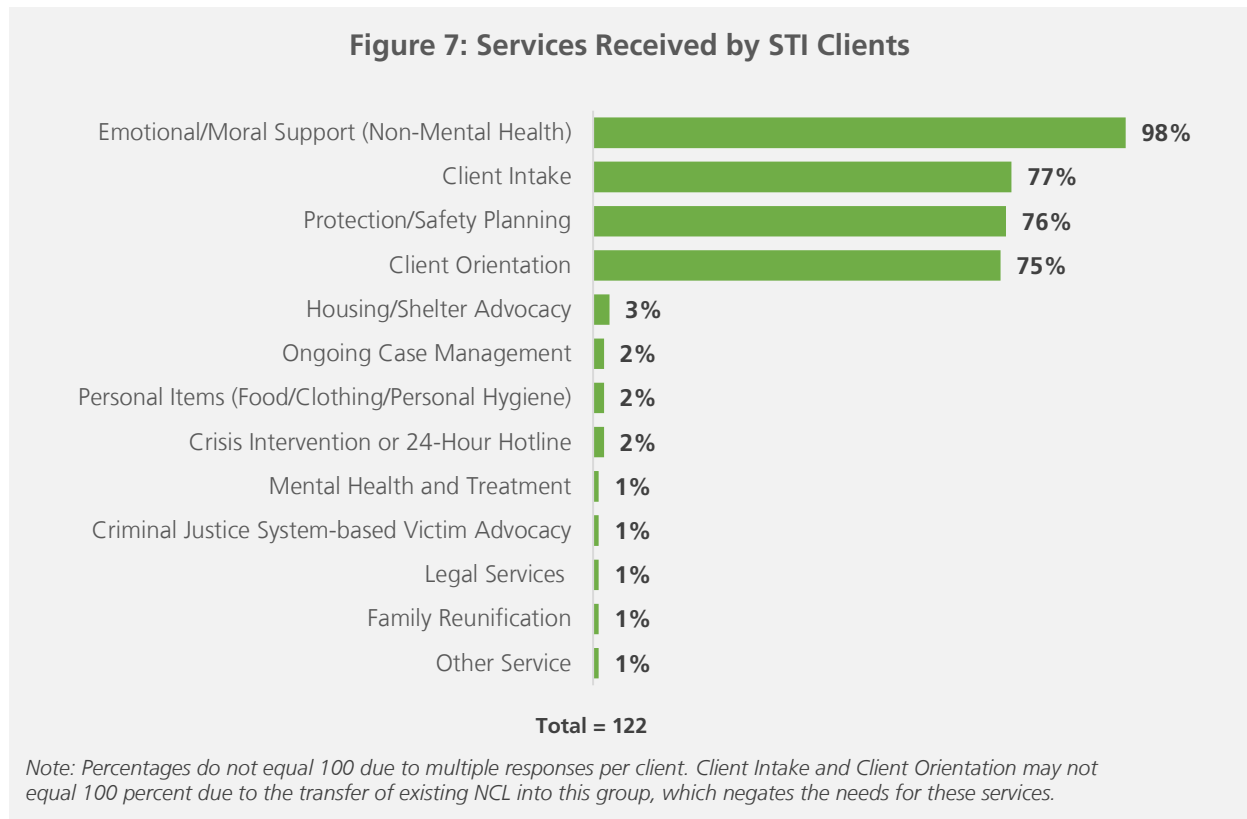| Domain | In Crisis or Vulnerable (1-2) | Stable (3) | Safe/ Self Sufficient or Thriving (4-5) |
|---|---|---|---|
| Immigration/ Legal Services | 45% | 26% | 29% |
| Shelter/ Housing | 58% | 24% | 18% |
| Safety | 61% | 21% | 18% |
| Basic Needs | 71% | 13% | 16% |
| Health/ Medical | 63% | 24% | 13% |
| Transportation | 66% | 21% | 13% |
| Education | 68% | 24% | 8% |
| Social and Emotional Health | 77% | 21% | 3% |
| Mental Health | 84% | 13% | 3% |
| Financial Stability | 84% | 13% | 3% |

**Total = 38**
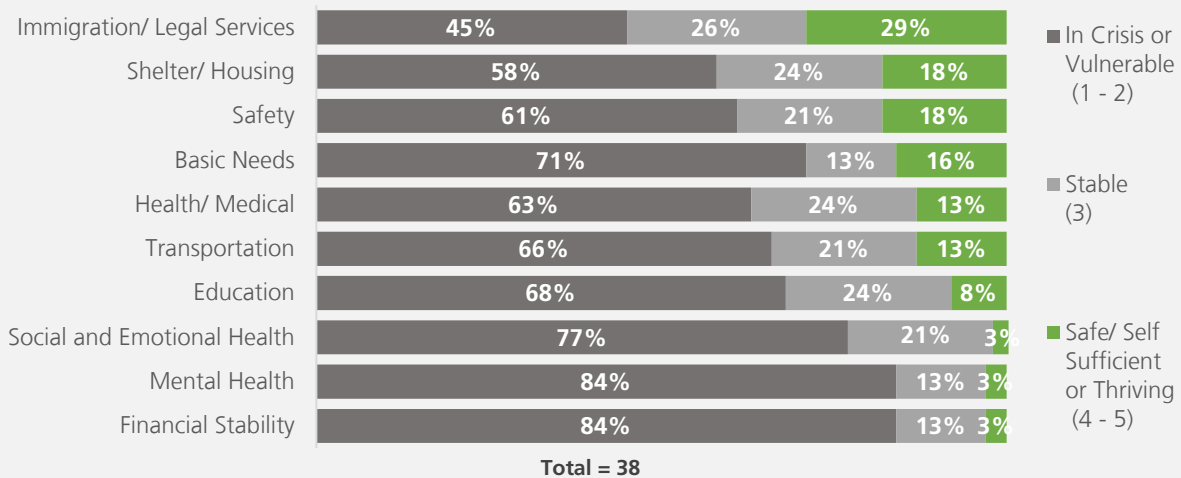
*Note: Percentages may not equal 100 due to rounding.*

## What was the type and level of services received by clients?

*STI*

NCL provided 14 different types of services to 122 STI clients during the grant period and each STI client received at least one type of service. The services most widely received included emotional and moral support (98%), completing a client intake (77%), protection/ safety planning (76%), and client orientation (75%).[7] Figure 7 shows the frequency of services received by the STI clients. Additional services received by STI clients included financial assistance, housing/ shelter advocacy, and other supportive services (see Appendix Table 2 for a complete list of services received by clients).
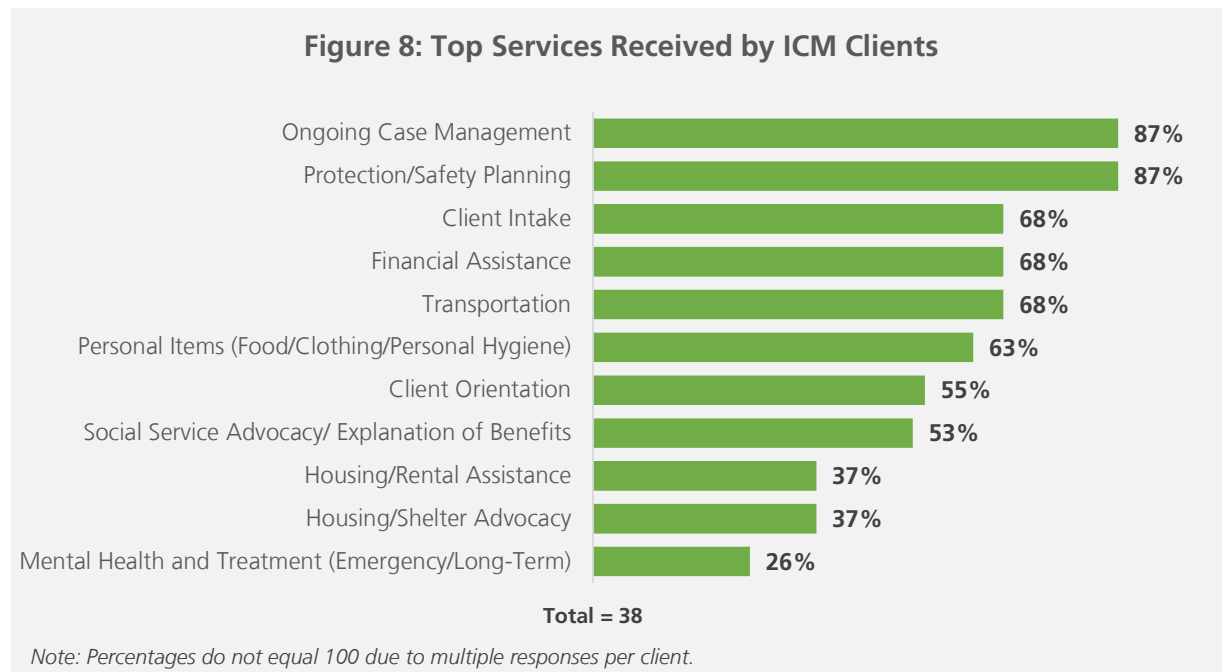
**Figure 7: Services Received by STI Clients**

| Service | Percentage |
|---|---|
| Emotional/Moral Support (Non-Mental Health) | 98% |
| Client Intake | 77% |
| Protection/Safety Planning | 76% |
| Client Orientation | 75% |
| Housing/Shelter Advocacy | 3% |
| Ongoing Case Management | 2% |
| Personal Items (Food/Clothing/Personal Hygiene) | 2% |
| Crisis Intervention or 24-Hour Hotline | 2% |
| Mental Health and Treatment | 1% |
| Criminal Justice System-based Victim Advocacy | 1% |
| Legal Services | 1% |
| Family Reunification | 1% |
| Other Service | 1% |

**Total = 122**

*Note: Percentages do not equal 100 due to multiple responses per client. Client Intake and Client Orientation may not equal 100 percent due to the transfer of existing NCL into this group, which negates the needs for these services.*

*ICM*

ICM clients had access to 24 different types of services, with every ICM client receiving at least one type of service. As with STI clients, the services received by most clients included emotional and moral support (95%), and protection/ safety planning (87%); however, ICM clients also frequently received ongoing case management (87%). Additionally, over half of the ICM clients received services related to client intake (68%), financial assistance (68%), transportation (68%), personal items (food/clothing/personal hygiene) (63%), client orientation (55%), and social service advocacy and/or explanation of benefits/entitlements/availability (53%). Figure 8 shows the most frequently received services for ICM clients (see Appendix Table 3 for full list).

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[7]   Client Intake and Client Orientation may not equal 100 due to the transfer of existing NCL into this group, which negates the needs for these services.

In addition, NCL facilitated immigration support for the few clients (29%) who had a need in this area. For these clients, this advocacy included immigration relief being granted (27%), the acquisition of certifications (10%), visa application being granted (10%), or other actions being granted (18%) (not shown).
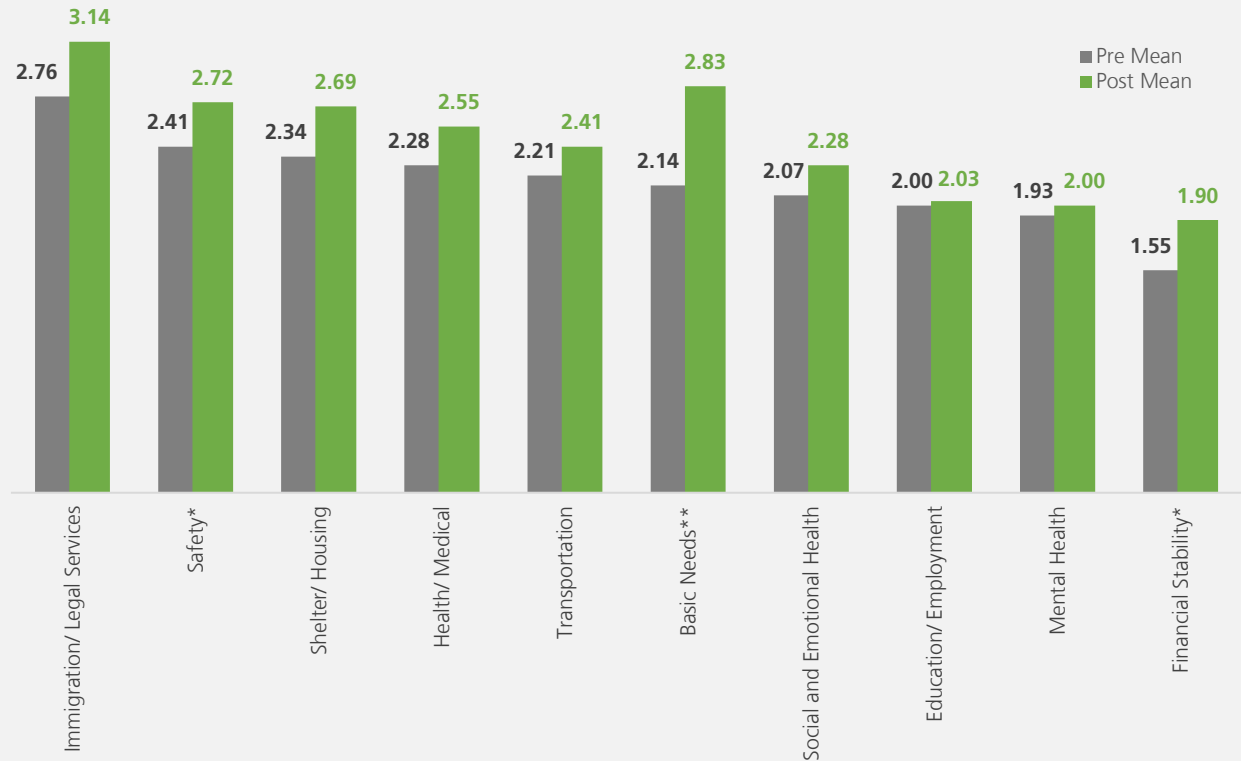
Housing support was also a valuable service provided by NCL for those clients in need of this type of support. Specifically, NCL facilitated the housing placements for 84% of ICM clients. Housing placements included hotel/ motel (28%), living independently (22%), living with friends or family (19%), shelters specifically for men or trafficking victims (6%), or "other" (25%). One in five (21%) ICM clients also received a second housing placement facilitated by NCL, which included shelters specifically for trafficking victims or homeless (63%), living with friends or family (25%), or staying with other victims or clients (13%) (not shown).

**Figure 8: Top Services Received by ICM Clients**

| Service | Percentage |
|---|---|
| Ongoing Case Management | 87% |
| Protection/Safety Planning | 87% |
| Client Intake | 68% |
| Financial Assistance | 68% |
| Transportation | 68% |
| Personal Items (Food/Clothing/Personal Hygiene) | 63% |
| Client Orientation | 55% |
| Social Service Advocacy/ Explanation of Benefits | 53% |
| Housing/Rental Assistance | 37% |
| Housing/Shelter Advocacy | 37% |
| Mental Health and Treatment (Emergency/Long-Term) | 26% |

Total = 38

*Note: Percentages do not equal 100 due to multiple responses per client.*

## Did clients who received ICM services demonstrate improvement in safety, well-being, and/or self-sufficiency as measured by the Project LIFE Matrix?

As noted earlier, the Project LIFE Matrix was the only data source to measure change over time for ICM clients. Only ICM clients who had both a pre- and post-Project LIFE Matrix assessments were included in the change over time analysis (n=29). Analysis of pre- and post-Project LIFE Matrix scores showed positive gains were realized in all domains, with statistically significant gains noted in the safety, basic needs, and financial stability domains. Despite significant gains in the financial stability domain, post-Project LIFE Matrix showed the financial stability (mean=1.90, SD=1.08), mental health (mean=2.00, SD=0.96), and education/ employment (mean=2.03, SD=0.94) domains still had the lowest average scores (indicating a higher level of need). The highest average scored domains (indicating the lower level of need) were immigration/ legal services (mean=3.14, SD=1.36), basic needs (mean= 2.83, SD=0.97) and safety (mean=2.72, SD=1.25) (Figure 9, Appendix Table 4 and 6).

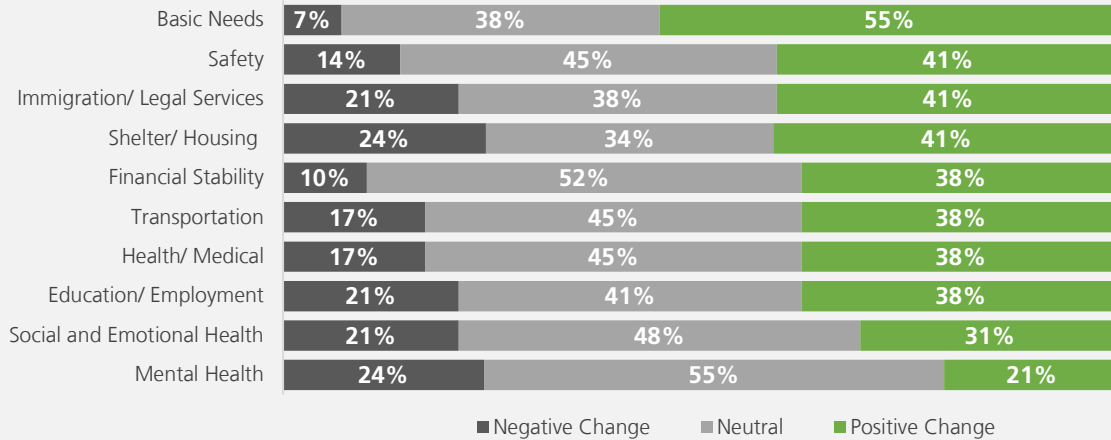**Figure 9: Average Pre- and Post-Project LIFE Matrix scores, by domain**

Legend: ■ Pre Mean ■ Post Mean

| Domain | Pre Mean | Post Mean |
|---|---|---|
| Immigration/ Legal Services | 2.76 | 3.14 |
| Safety* | 2.41 | 2.72 |
| Shelter/ Housing | 2.34 | 2.69 |
| Health/ Medical | 2.28 | 2.55 |
| Transportation | 2.21 | 2.41 |
| Basic Needs** | 2.14 | 2.83 |
| Social and Emotional Health | 2.07 | 2.28 |
| Education/ Employment | 2.00 | 2.03 |
| Mental Health | 1.93 | 2.00 |
| Financial Stability* | 1.55 | 1.90 |

*Significant at the p<0.05 level*
*\*\* Significant at the p<0.01 level*

Examination of the proportion of clients who either increased, had no change, or realized change towards more stability (i.e., positive change), showed the greatest degree of improvement occurring among those with an inability to meet basic needs at intake, with over half (55%) showing improvement after participation in ICM. Additionally, two in every five (41% each) clients also realized positive change in safety, shelter, and immigration/ legal services domains. The provider noted stability in the immigration and legal services domain may in part be attributed to having been referred by a HT-specific legal provider to services with Project LIFE. These changes were also consistent with the services received and aligned with Maslow's hierarchy of needs, where a person's physical and safety needs must be met prior to attending their other needs.[8] Although most of the domains primarily experienced positive or neutral changes, while to a lesser degree there was also movement towards an increased level of need in all domains. The largest proportion was in the mental health domain (24%), which could be a consequence of moving from addressing one's basic needs to dealing with the trauma and underlying factors individuals who are trafficked experience and/or a greater awareness of those needs during participation and development of trusting relationships (Figure 10).

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[8]   Maslow, A., & Lewis, K. J. (1987). *Maslow's hierarchy of needs*. Salenger Incorporated, 14, 987.

**Figure 10: Directionality of Changes in Pre-to-Post LIFE Matrix, by domain**

| Domain | Negative Change | Neutral | Positive Change |
|---|---|---|---|
| Basic Needs | 7% | 38% | 55% |
| Safety | 14% | 45% | 41% |
| Immigration/ Legal Services | 21% | 38% | 41% |
| Shelter/ Housing | 24% | 34% | 41% |
| Financial Stability | 10% | 52% | 38% |
| Transportation | 17% | 45% | 38% |
| Health/ Medical | 17% | 45% | 38% |
| Education/ Employment | 21% | 41% | 38% |
| Social and Emotional Health | 21% | 48% | 31% |
| Mental Health | 24% | 55% | 21% |

■ Negative Change  ■ Neutral  ■ Positive Change

**Total = 29**

# Discussion

This report summarized the analysis SANDAG provided to NCL in support of their evaluation of Project LIFE. The analysis examined the three service groups (OES, STI, and ICM), with the majority of attention focused on ICM, which had the greatest amount of complete data, likely related to the nature of this group having the highest number of client contacts and increased client participation and engagement. STI clients were most likely to male (56%), identify as LGBQ (81%). ICM clients were ethnically diverse and were most likely to be transgender (42%) or female (37%). Each service group included clients identifying across the spectrum of sexual orientation, with bisexual, lesbian, gay, and heterosexual clients represented in all three groups. Additionally, over half (53%) of the ICM clients identified as LGBQ. The nationality of about three in ten was a country other than the United States. Sex trafficking was the largest form of exploitation and most of ICM had experienced being prostituted or participating in pornography.

In terms of service delivery, STI received 14 different types of services and ICM clients received 24. The most widely received service in both groups was in the emotional and moral support category (98% and 95%, respectively). Overall, nine different types of services were each provided to over half of ICM clients.

ICM clients' needs were assessed throughout their program participation using NCL's Project LIFE Matrix. Analysis of the pre- and post-Project LIFE Matrix revealed that an average positive shift across all ten (10) domains. The largest average positive changes were in the basic needs, immigration/ legal services, shelter/ housing, and financial stability domains. Furthermore, the safety, financial stability, and basic needs domains displayed significant positive change between the pre- and post-assessments. The significance found in the basic needs, safety, and financial stability domains is consistent with the high number of individuals reporting to have received protection/safety planning and financial assistance services.

Although all domains displayed an overall average positive trend over time, a number of individual clients reported increased needs as well. For example, the mental health category had the largest proportion of change in the direction of increased need, while also registering the least positive change across all domains on the Project LIFE Matrix.

While more robust data would improve the descriptive abilities of the analysis, the findings from the intake information and the Project LIFE Matrix provide a better understanding of the demographics and needs of this population. Analysis of change over time also indicates NCL and its partners were able to address the basic, safety, and financial needs of this population, which provided an increased level of stability and safety.

# Appendices

**Appendix Table 1: ICM Intake LIFE Matrix Summary**

| LIFE Matrix Domain | Mean | SD |
|---|---|---|
| Immigration/ Legal Services | 2.84 | 1.37 |
| Shelter/ Housing | 2.34 | 1.28 |
| Safety | 2.29 | 1.16 |
| Health/ Medical | 2.24 | 1.00 |
| Transportation | 2.21 | 1.14 |
| Basic Needs | 2.18 | 1.16 |
| Social and Emotional Health | 1.97 | 0.89 |
| Education/ Employment | 1.97 | 1.00 |
| Mental Health | 1.84 | 0.75 |
| Financial Stability | 1.63 | 0.91 |
| **Total = 38** | | |

**Appendix Table 2: STI Service Delivery**

| Service Type | Percentage of Group |
|---|---|
| Emotional/Moral Support (Non-Mental Health) | 98% |
| Client Intake | 77% |
| Protection/Safety Planning | 76% |
| Client Orientation | 75% |
| Housing/Shelter Advocacy | 3% |
| Ongoing Case Management | 2% |
| Personal Items (Food/Clothing/Personal Hygiene) | 2% |
| Crisis Intervention or 24-Hour Hotline | 2% |
| Mental Health and Treatment (Emergency/Long-Term) | 1% |
| Criminal Justice System-based Victim Advocacy | 1% |
| Legal Services (Including Civil and Immigration Advocacy) | 1% |
| Family Reunification | 1% |
| Other Service | 1% |
| **Total = 122** | |

*Note: Percentages do not equal 100 due to multiple responses per client. Client Intake and Client Orientation may not equal 100 due to the transfer of existing NCL into this group, which negates the needs for these services.*

**Appendix Table 3: ICM Service Delivery**

| Service Type | Percentage of Group |
|---|---|
| Emotional/Moral Support (Non-Mental Health) | 95% |
| Ongoing Case Management | 87% |
| Protection/Safety Planning | 87% |
| Client Intake | 68% |
| Financial Assistance | 68% |
| Transportation | 68% |
| Personal Items (Food/Clothing/Personal Hygiene) | 63% |
| Client Orientation | 55% |
| Social Service Advocacy and Explanation of Benefits/Entitlements/Availability | 53% |
| Housing/Rental Assistance | 37% |
| Housing/Shelter Advocacy | 37% |
| Mental Health and Treatment (Emergency/Long-Term) | 26% |
| Criminal Justice System-based Victim Advocacy | 24% |
| Interpreter/Translator | 24% |
| Medical (Emergency/Long-Term) | 24% |
| Crisis Intervention or 24-Hour Hotline | 21% |
| Substance Abuse Treatment | 11% |
| Legal Services (Including Civil and Immigration Advocacy) | 8% |
| Child Care | 5% |
| Education | 5% |
| Employment Assistance | 5% |
| Dental (Emergency/Long-Term) | 3% |
| Family Reunification | 3% |
| Other Service | 3% |
| **Total = 38** | |

*Note: Percentages do not equal 100 due to multiple responses per client. Client Intake and Client Orientation may not equal 100 due to the transfer of existing NCL into this group, which negates the needs for these services.*

**Appendix Table 4: Average Pre- and Post- Project LIFE Matrix scores by domain**

| Domain | Pre | | Post | |
|---|---|---|---|---|
| | **Mean** | **SD** | **Mean** | **SD** |
| Immigration/ Legal Services | **2.76** | 1.185 | **3.14** | 1.356 |
| Safety* | **2.41** | 1.150 | **2.72** | 1.251 |
| Shelter/ Housing | **2.34** | 1.289 | 2.69 | 1.198 |
| Health/ Medical | 2.28 | 0.960 | 2.55 | 0.870 |
| Transportation | 2.21 | 1.048 | 2.41 | 0.946 |
| Basic Needs** | 2.14 | 1.093 | **2.83** | 0.966 |
| Social and Emotional Health | 2.07 | 0.923 | 2.28 | 1.066 |
| Education/ Employment | 2.00 | 1.000 | 2.03 | 0.944 |
| Mental Health | 1.93 | 0.753 | 2.00 | 0.964 |
| Financial Stability* | 1.55 | 0.736 | 1.90 | 1.081 |
| **Total = 29** | | | | |

*\* Significant at the p<0.05 level*

*\*\* Significant at the p<0.01 level*

**Appendix Table 5: Directionality of Pre-to-Post Project LIFE Matrix**

| Domain | Negative Change | Neutral | Positive Change |
|---|---|---|---|
| Safety | 14% | 45% | 41% |
| Financial Stability | 10% | 52% | 38% |
| Social and Emotional Health | 21% | 48% | 31% |
| Shelter/ Housing | 24% | 34% | 41% |
| Health/ Medical | 17% | 45% | 38% |
| Mental Health | 24% | 55% | 21% |
| Immigration/ Legal Services | 21% | 38% | 41% |
| Transportation | 17% | 45% | 38% |
| Basic Needs | 7% | 38% | 55% |
| Education/ Employment | 21% | 41% | 38% |
| **Total = 29** | | | |

**Appendix Table 6: Directionality of Pre-to-Post Project LIFE Matrix**

| Domain | Mean | Std. Deviation | Std. Error Mean | Lower | Upper | t | df | Sig. (2-tailed) |
|---|---|---|---|---|---|---|---|---|
| Safety | .310 | .761 | .141 | .021 | .600 | 2.197 | 28 | **.036** |
| Financial Stability | .345 | .769 | .143 | .052 | .637 | 2.415 | 28 | **.023** |
| Social and Emotional Health | .207 | .902 | .167 | -.136 | .550 | 1.236 | 28 | .227 |
| Shelter/ Housing | .345 | 1.203 | .223 | -.113 | .803 | 1.543 | 28 | .134 |
| Health/ Medical | .276 | .882 | .164 | -.060 | .611 | 1.684 | 28 | .103 |
| Mental Health | .069 | .884 | .164 | -.267 | .405 | .420 | 28 | .677 |
| Immigration/ Legal Services | .379 | 1.237 | .230 | -.091 | .850 | 1.652 | 28 | .110 |
| Transportation | .207 | 1.114 | .207 | -.217 | .631 | 1.000 | 28 | .326 |
| Basic Needs | .690 | 1.004 | .186 | .308 | 1.071 | 3.700 | 28 | **.001** |
| Education/ Employment | .034 | 1.017 | .189 | -.352 | .421 | .183 | 28 | .856 |
| **Total = 29** | | | | | | | | |