Research Terms of Reference

Water, Sanitation and Hygiene Rapid needs Assessment for Unhoused Seattlites Seattle WA

April 2020 By Timothy Liptrot – tliptrot@protonmail.com

1. Executive Summary

Country of	United States							
intervention								
Type of Emergency	Χ	Natural disaster		Conflict				
Type of Crisis		Sudden onset	Х	Slow o	nset	X	Protracted	
Overall Research Timeframe (from research design to final outputs / M&E) Research Timeframe		1/2020 to 31/05/2020 art collect data: 05/05/202	20	5	. Preliminary p	resen	tation: 05/015/2020	
Add planned deadlines (for first cycle if more than 1)	Data collected: 25/05/2020 Data analysed: 31/05/2020			7	7. Outputs published: TBD			
Number of assessments	X Single assessment (one cycle)							
		Multi assessment (more	e than o	ne cycle	e)			
Audience Type &	Audience type				Dissemination			
Dissemination Specify who will the assessment inform and how you will disseminate to inform the audience	□ Strategic X Programmatic X Operational □ [Other, Specify]			CC W cl X	onsortium; HCT Cluster Mailing	partici (Educentation	eation, Shelter and on of findings at next	
Detailed dissemination plan required		Yes		х	No			
General Objective To improve evidence base for the COIVD 19 response on the sanitation and hy needs of unhoused people in Seattle. To inform needs prioritization of crisis res								

Specific Objective(s)	1	. Provide timely information	n ar	nd an	alysi	s on the needs	s of th	he unhoused during	
	9	the crisis Identify and assess hum	anita	arian	nrior	ity naads at th	a city	/-wide level	
		 Advise ongoing outreach 			•	•	C Oity	wide level	
			•	•					
Research Questions	1	. What is the extent of kno	owled	dae a	bout	COVID transr	missi	on prevention among	
4		the at-risk population?		.900				on provension annong	
		a. Which informat				,			
		b. Which sources				•			
	2	What hygiene and sanita a. What barriers d				•		g practiced? e behaviors (hygiene	
		a. what barriers d	-	-		to increasing	111056	e benaviors (rrygiene	
	3	8. What is the extent of acc	•	,		owing vital res	ource	es: clean water,	
		bathrooms, showers, co				•			
		a. How has the cr	isis a	affect	ed a	ccess to these	reso	ources	
		b.	:	- ا حال	:£: _				
	4	Are there sub-population	is wi	tn sig	Initic	ant gaps in co	veraç	ge?	
Geographic	City o	of Seattle (CoS)							
Coverage	0.11					2010			
Secondary data	•	of Seattle Homeless Needs							
sources		ensus data, sample calculat nmunity Health Needs Asses				•	v Kai	cor Pormanonto	
		(for census data, sample ca				•	•	sei Feillialleille	
		a'i District Health Office CAS					,	tices)	
				, -		3 ()		,	
Stratification	Х	Geographical #:_ 1		Gro	up#	·		[Other Specify] #:	
Select type(s) and enter		Population size per		-	opulation size per Population size per				
number of strata		strata is known? Yes X				known?		strata is known?	
		No (imputed unhoused population similar to		□ Y	∕es □ No □ Yes □ No				
		housed, STRONG							
		ASSUMPTOIN)							
Data collection	Χ	Structured (Quantitative)	•		Χ	Semi-structu	red (Qualitative)	
tool(s)	-				_				
	Samp	oling method			Da	ta collection r	meth	od	
Structured data	п Ри	posive				Cev informant in	tervie	ow (Target #):	
collection tool # 1		ability / Simple random			□ Key informant interview (Target #):				
		• •			☐ Group discussion (Target #):				
		bability / Stratified simple rand	OIII		X Household interview (Target #):_ 372				
		bability / Cluster sampling			□ Individual interview (Target #):				
		bbability / Stratified cluster sam	pling				-	Target #):	
	□ [Ot	her, Specify]				Other, Specify]	(Targ	jet #):	
Target level of	95% l	evel of confidence			10+	-/- % margin of e	error		
precision if						-			
probability sampling	V	O:Hbb							
Data management	Х	Github							
platform(s)	1								

		[Other, Specify]					
Expected ouput type(s)		Situation overview #:	Х	Report #: 1		Profile #:	
31-(-)		Presentation (Preliminary findings) #:	Х	Presentation (Final) #: 1		Factsheet #: 1	
		Interactive dashboard 1#:_		Webmap #: TBD		Map #: TBD	
		Preliminary findings docume	nt #:	2 factsheets at 20 resp	onde	nts and 60 respondent	
Access	Х	Public					
		Restricted					
Visibility Specify which logos should be on outputs	None						

2. Rationale

2.1. Rationale

The COVID-19 pandemic has radically changed the access to services and the needs of Seattle's homeless population. As shelters have closed and become unsafe, many people have moved out of the shelter system. At the same time, the recession has caused an influx of low-income housed people using food banks. These two changes mean that needs assessments conducted at the point of service are less reliable. At the same time, the needs of the unhoused have shifted rapidly since the last at-scale community needs assessment, conducted in 2016. Service providers reported increased need for to up-to-date, information about services and pandemic transmission, hygiene supplies, and clean water, as the shutdown of many public institutions has removed key access points.

This rapid needs assessment (RNA) will undertake a spatially randomized survey of Seattle's unhoused population using a spatially balanced random survey. The key added value of the research instrument is to assess coverage on the entire population, making information useful for city-wide response planning and local service providers.

3. Methodology

2.1. Methodology overview

The study will be predominantly quantitative and data will be collected through randomly selected interviews with persons living outside of housing or shelters. The sampling of persons will be based weighted by population density across census districts as a proxy for the unhoused population. This is the strongest assumption undertaken in the assessment. Data will be collected solely by the principal investigator.

2.2. Population of interest

The population of interest is persons currently without housing in the CoS. This may include persons living in informal tented settlements, shelters and vehicles. The preliminary stakeholder consultation revealed that shelter populations have declined during the COVID crisis and that shelters regularly collect needs information on their residents. This creates a problem for sampling as the ratio of in-shelter to out-of-shelter unhoused people is unknown (previously it would have been taken from the last CoS HNA). In response the data collection will be practiced during hours when shelter residents are not usually in residence.

2.3.1. Primary Data Collection

Tool

The questionnaire will be circulated by email to 5 early stakeholders involved in outreach and advocacy for comment. After the first 20 respondents are selected, a second comment may be held to add more questions. The reason for the second comment period is that some stakeholders may wait for more credibility before supporting.

Sampling strategy

The sampling methodology is based on the Community Assessment for Public Health Emergency Response (CASPER) toolkit developed by the CDC, but adapted to the distribution of unhoused persons. 17 Census districts will be randomly selected (weighted by census population) and 3 districts will be selected at true random among the downotown area. This is to compensate for the assumed higher ratio of unhoused to housed persons in the downtown. Within each census track random GPS points will generated, and the enumerator will search for respondents within 200 meters of that point. Within each track new points will be generated until 5 respondents per track have been surveyed.

Wherever possible the head of household (or family unit) will be interviewed. In case where the head of household is not available and there is more than one adult within the household, the data collectors will introduce the assessment and then ask household members who they think among themselves would be best able to provide information given the nature of the assessment.

Wherever possible, the head of household will be interviewed. In While the sampling will not be disaggregated by gender, it is expected that a large enough sample of both male and female respondents will be captured in the survey to allow for findings representative to the male and female population of the camp, albeit at a lower level of confidence.

Data collection method

One enumerator, the PI, will administer the survey, traveling by bicycle and car. Data will be gathered using KOBO (an Android-based mobile application). The tool will be piloted in order to test the form in the field prior final use and ensure that data collectors are fully familiar with it. Data collected during the course of the survey will be stored directly on github

For many respondents, minimizing the risk of transmission is to simply collect data by phone or by proxy. Surveys conducted in shelters or large tent encampments can be done by shelter staff or by phone randomized within the encampment, effectively eliminating enumerator-respondent contact. Unfortunately, some unhoused people lack working cellphones or a systematic way to be selected by phone surveys. To maintain generalizability, these respondents must be approached in person and offered an instruction card to call for a phone interview, with an in-person interview conducted as a last resort if phone calls are truly impossible. In the event of an in-person interview social distancing will be maintiained. The PI (sole enumerator) has collected the necessary masks and gloves, and is tested for COVID-19 regularly as part of his volunteer work with ROOTS Shelter.

2.5. Data Processing & Analysis

To ensure the quality of the data collected, the following checks will be implemented:

- Data cleaning will be conducted by the PI at 20 respondents, 60 respondents and 80 respondents to ensure proper use
 of the questionnaire.
- Data cleaning logs and the respective raw will be kept to allow all steps of the process to be replicated

Once all data has been collected and cleaned, data will then be analysed by a review of descriptive statistics in addition to more advanced statistical analysis where appropriate, through R. The final report will include not include the disaggregation of survey variables by population subgroups because . A list of the main indicators that will guide the analysis have been outlined in Annex 6: Data Analysis Plan.

4. Data Analysis Plan (TBD)

Research questions	IN #	Data collectio n method	Indicator group / sector	Indicator / Variable	Questionnai re Question	Instruction s	Questionnaire Responses
	A.1	HH Interview	Key characteristi cs	Enumerator ID	Enumerator ID	Enter name	
NA (introductory information and demographics)	A.1. 1	Interview	Key characteristi cs		Hello, my name is and I am conducting a survey of unhoused people. My intent is to provide service providers with accurate information about the characteristics and needs of refugees and of unhoused people. This survey asks about your access to resources such as water, hygiene supplies and information regarding hygiene. The data will be collected in an anonymous way and your name will not be associated with it.	Read Select one	
		Interview	Key characteristi cs	Willing to be interviewed	Are you willing to take part in this interview?		Yes; No
		Interview	Key characteristi cs		What is the number of the district you live in?	Enter number	
	A.4	HH Interview	Key characteristi cs	Block number	What is the number of the block you live in?	Enter number	TBD

A.7 HH Respondent Gender of Select one Male; Female; Other; Prefer not to Key Interview characteristi gender respondent answer cs **A.8** НН Key Respondent How old are Enter number characteristi Interview age vou? cs ΗН Kev Respondent Select one How many 0-9 years; 10-12 years; more Interview characteristi Education vears of than 12 years education have you completed? **A.9** HH Key Is head of Is the Select one Yes; No characteristi household? respondent the Interview head of cs household? **A.17** HH Key Do you have respondent Select one Yes; No Interview characteristi health any health concerns which concerns impact your ability to do everyday tasks? **A.18** HH Key type of health What kind of Select any or Difficulties seeing even when Interview characteristi health concerns all wearing glasses; Difficulties hearing concerns even when using hearing aid; do you face? Difficulties walking or climbing stairs; Difficulties remembering or concentrating; Difficulties washing all over or dressing; Difficulties communicating even in native language; Other B.1 HH A lot/ some/ a little/ nothing **Attitudes** Important_iss How much do Select one Interview ue you feel you know about COVID-19 Which of these Useful info Select any or Symptoms of novel coronavirus; How I can protect myself and my types of information family against the novel coronavirus; Personal stories from other people would be most on how they cope with the pandemic useful to you? situation; Scientific progress in development of a vaccine or treatment against novel coronavirus; How I can take care of a person who 1. What is the belongs to a risk group; How I can extent of best take care of my children's access to the school education: How the novel WASH coronavirus is different from other knowledge diseases such as flu; The pandemic evolution in the world; The pandemic evolution in the USA]; The pandemic evolution in Seattle/King County; Information about authorities' decisions; How I will be impacted economically by the pandemic: How to maintain my mental health during the isolation; How to maintain my social contact despite the physical distancing; B.3 HH Which There is a vaccine for COVID-19; Water filling day Select one Interview knowledge statement is There is currently no vaccine for the true about novel coronavirus; Don't know

				vaccines for		
B.4	HH Interview	Water knowledge	how much water	COVID-19 Which of the following can be symptoms of COVID-19	Select one	cough;Fever;Shortness of breath;Sore throadt;Runny or stuffy nose;Muscle or body aches;Headaches;Fatigue;Diarrhea; Loss of taste and smell;Abdominal Discomfort;Vomiting;Hair Loss;Chest congestion;Skin Rash
B.5	HH interview	Water knowledge	Water quality satisfaction	What is the maximum incubation period (i.e., the time from viral infection to developing symptoms of illness) of the novel coronavirus?	Select one	Up to 3 days;Up to 7 days;Up to 14 days;Don't know
B.5. 1	HH interview	Water knowledge	Reasons for dissatisfaction	Which of the following statements are true?	Select all that apply	Antibiotics can be used to treat the coronavirus; Antibiotics can be used to prevent the coronavirus; People of all ages can become infected with the coronavirus; People of all racial and ethnic groups can become infected with the coronavirus; Eating garlic can lower your chances of getting infected with the coronavirus; Most people who are infected with the coronavirus die from it; Most people who are infected with the coronavirus recover from it; Younger adults are most at risk of severe symptoms if they become infected; Older adults are most at risk of severe symptoms if they become infected; Masks do not affect the likelihood of transmitting covid-19 to others
B.5. 2	HH Interview	practices	checked water quality	Which of the following are effective measures to prevent the spread and infection of the novel coronavirus	Select one	Avoiding touching your eyes, nose, and mouth with unwashed hands; Use of disinfectants to clean hands when soap and water is not available for washing hands; Staying home when you are sick or when you have a cold; Adapt below list to local context/above list Herbal supplements; Covering your mouth when you cough; Using caution when opening letters; Getting the flu vaccine; Wearing a face mask; Using antibiotics; Using homeopathic remedies; Physical distancing (keeping minimum 2 metres between you and other persons outside your household); Self-isolation; Disinfecting surfaces; Disinfecting the mobile phone; Eating garlic, ginger, lemon;

connected to Enter D.1 HH Which of the The Police Navigation Team;A Services shelter; A food bank or food eceived network following Number Interview sources have provider; A healthcare provided you organization;211;Word-ofwith information mouth;Internet search;radio stations; 1.a. What about the public government press releases; zoom outreach health in the last calls; your doctor; hospitals Other sources are month (multiple currently most select) active/effectiv e? D.2 HH Services reason not Do you have Yes, consistent; Yes, but only received connected access to the sometimes; No; Don't know Interview internet (via mobile phone or computer) E.1 HH How much do The Police Navigation Team:A responsibility responsible Very low Interview for household vou trust the confidence [*] shelter:A food bank or food following provider:A healthcare networks [*] [*] [*] [*] organization:211:Word-ofsources of [*] Very high confidence information mouth;Internet search;radio stations; about the novel government press releases; zoom coronavirus calls; your doctor; hospitals Other E.2 HH Your own family doctor; Your responsibility responsible How much Very low 1.b Interview for household confidence do confidence [*] Employer (if applicable); Media problems vou have in the Other opinion leaders; Hospitals;; [*] [*] [*] [*] [*] Very high Local Public Health Authority below Schools : Public transportation individuals and confidence / companies : Government : Police :: organizations NA that they can Church; The president; handle COVID-19 well? F.1 HH hotline desludging Are you, or Enter Yes, tested and the result was Interview usage hotline have you been, Number positive; Yes, suspected but not infected with confirmed by a test; No, tested and the result was negative; No; Don't COVID-19? F.2 HH Yes, confirmed; Yes, suspected but hotline what did your Do you know people in your not confirmed by a test[*] No, tested Interview usage immediate and the result was negative; No; social Don't know environment who are or have been infected 2. What with the novel sanitation and coronavirus? hvaiene behaviors are F.3 HH hotline if reported How difficult Select one Extremely difficult to Extremely easy currently satisfaction leakage, how Interview would you say being satisfied avoiding practiced infection with COVID-19 is? F.4 HH Which of the hotline leakage Multiple Cleaning high touch surfaces in your satisfaction living space like door handles, tent Interview satisfied with following Select measures have hotline flaps, blankets; Cleaned high-touch you taken to electrongic like phone, tablet, or prevent laptop; Handwashing for at least 20 infection with seconds; Avoiding touching your eves, nose, and mouth with the novel coronavirus? unwashed hands: Use of disinfectants to clean hands when soap and water was not available for

washing hands ; Staying home when you were sick or when you had a cold ; Herbal supplements ; Covering your mouth and nose when you cough or sneeze; Using caution when opening letters; Getting the flu vaccine; Wearing a face mask; Using antibiotics; Using homeopathic remedies; Physical distancing (keeping minimum 2 metres between you and other persons outside your household); Self-isolation; Eating garlic, ginger, lemon G.1 HH [to avoid Community Jordan water Select one Yes • No • I don't know Interview mobilization scarce prejudicing the 2.b. What knowledge sample, the barriers to question "do people face to you have increasing enough those information" is behaviors not asked again here1 Do you have Yes • No • I don't know Select one health insurance? If yes, what Select one Medicaid; Medicare; employersponsored; private or group health type? insurance; National Health Insurance; Unknown Yes, consistent; Yes, but only Do you have Select one consistent sometimes; No; Don't know access to clean water for drinking 3, 3, What If yes, from Select Tbd is the extent of what sources multiple access to the Select one Yes • No • I don't know following vital Has the resources, pandemic and how has affected your the crisis access to clean affected water for access: clean drinking? water, Do vou have Select one Yes, consistent: Yes, but only bathrooms,, consistent sometimes; No; Don't know clothes access to clean washing? water for washing If yes, from Select Tbd what sources multiple Select one Has the Yes • No • I don't know pandemic affected your access to clean water for washing? Do you have Select one Yes, consistent; Yes, but only consistent sometimes; No; Don't know

	access to toilets?		
	Which of these locations do you use?	Select multiple	Tbd
	Has the pandemic affected your access to toilets?	Select one	Yes • No • I don't know
	Do you have consistent access to showers?	Select one	Yes, consistent; Yes, but only sometimes; No; Don't know
	Which of these locations do you use?	Select multiple	Tbd
	Has the pandemic affected your access to showers?	Select one	Yes • No • I don't know
	How often are you able to wash your clothing?	Select one	Yes, consistent; Yes, but only sometimes; No; Don't know
	Are you able to wash your clothing as often as you like?	Select one	Yes • No • I don't know

i