

Introduction

Outreach Therapy

- Nonprofit in Pittsburgh, PA providing community-based occupational therapy through individual and group sessions, meeting individuals where they are across outdoor, shelter, and housing settings to support transitions into new environments
- Team: Julia Lam, OTD, OTR/L; Jordann Antoan, OTD, OTR/L; Rachael Rosenstein, OTD, OTR/L

STABLE: Sustainable Transitions and Building Lasting Empowerment

- Addresses the need for a consistent, comprehensive health assessment for adults experiencing homelessness
- 31-item tool used as a conversation guide and goal-setting resource during transitions from outdoors and shelters to housing
- Developed by Julia Lam, OTD, OTR/L, informed by Carrie Anne Marshall's Bridging the Transition to Housing: A Homelessness Prevention Framework, Maslow's Hierarchy of Needs, USC Keck Street Medicine's HOUSED BEDS
- Identifies needs across survival, adaptation, and integration using a functional, participation-based approach

Purpose

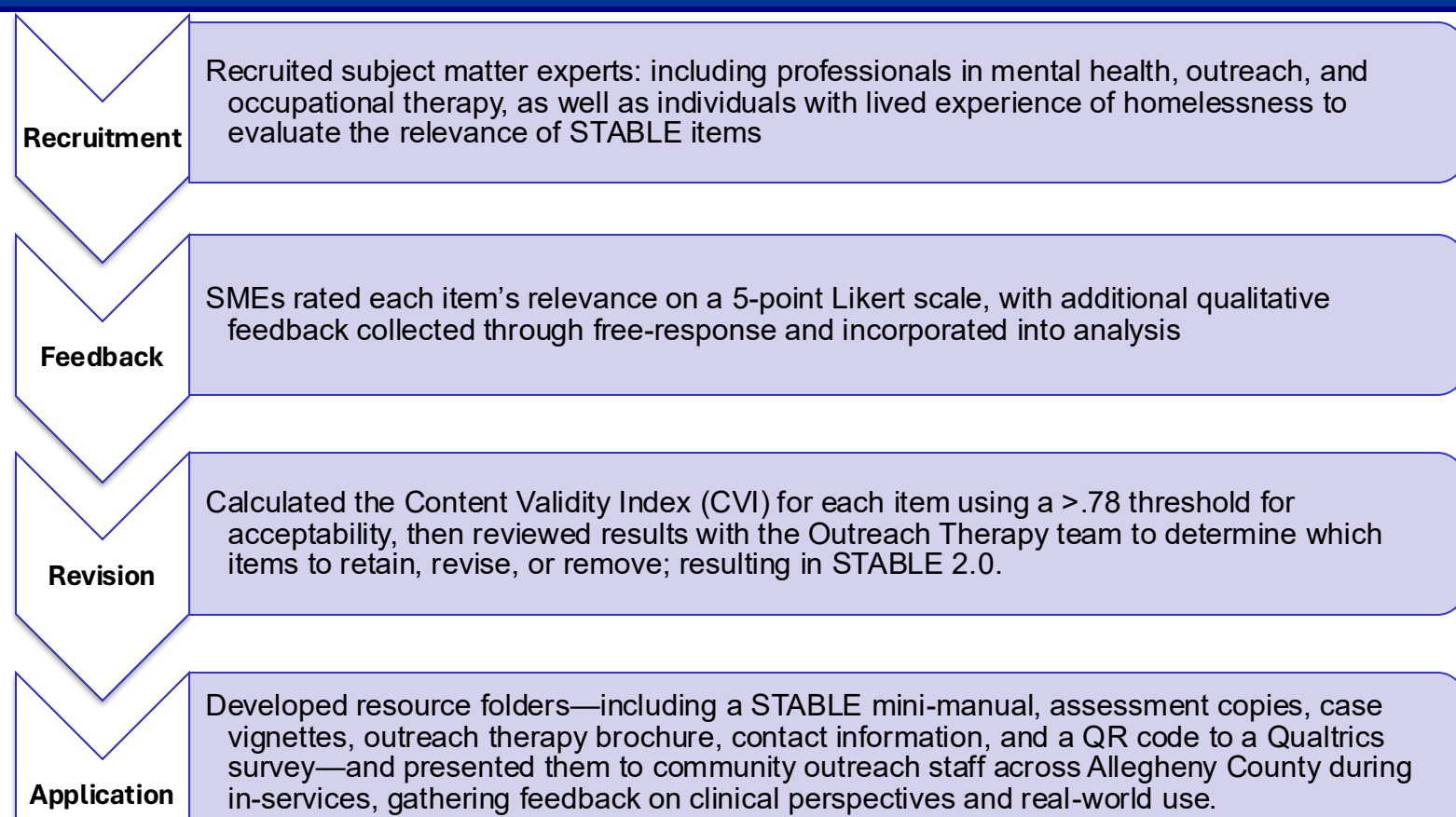
Understand the extent to which STABLE is usable, feasible, and effective for occupational therapy practitioners and staff working with unhoused individuals across diverse practice settings

Streamline the care process at Outreach Therapy by enhancing the knowledge of community outreach workers on the role of occupational therapy within the unhoused community.

Objectives

- Participants will understand the STABLE assessment tool and how its use can guide clinical practice when working with the unhoused population.
- Participants will understand the role of occupational therapy with supporting individuals in the transition from street to permanent housing.

Process



Revision of STABLE

Combined quantitative data and qualitative feedback led to the following updates:

Additions:

- New items (e.g., STABLE 2.0 item #26: "I find things to do when I'm bored")
- Option to circle up to four "No" responses to identify priority needs
- Added questions on social support and leisure participation

Changes:

- Revised wording to reflect actual participation (e.g., "I keep my living space clean enough for others' expectations" → "I manage my responsibilities so I'm not asked to leave the place I stay.")
- Split complex items (e.g., STABLE 1.0 item 17 → STABLE 2.0 items 17–19: physical, dental, and vision care needs)
- Updated response options ("Agree/Unsure/Disagree" → "Yes/Sometimes/No")
- Added the phrase "As of today..." for clarity

Removed

- Items that were overly broad or unclear (e.g., STABLE 1.0 item #27: "I do everything I need, want and am expected to do"; item #24: "I feel good about my source of income")

Qualitative Responses from Subject Matter Experts:

"Instead of or in addition to "I stay in touch with my friends", I may say "I have a support system I can count on."

"Since the header above the items says "In my daily life . . ." I think it seems that you are looking more at performance/participation – so would edit the items that currently have "can" in them to be restated without "can"

"Consider your ratings – agree, unsure, disagree...might be easier and clearer to put yes, no"

"Better resources for daytime assistance & transportation; help with maintaining income; access to health resources (i.e. therapist)" – People Experiencing Homelessness



STABLE Version 1.0



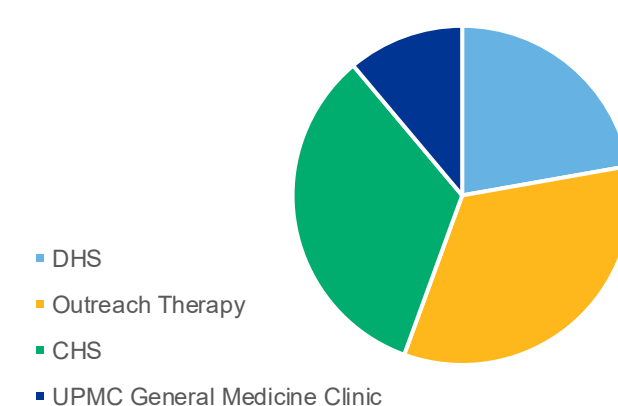
STABLE Version 2.0

Implementation of STABLE

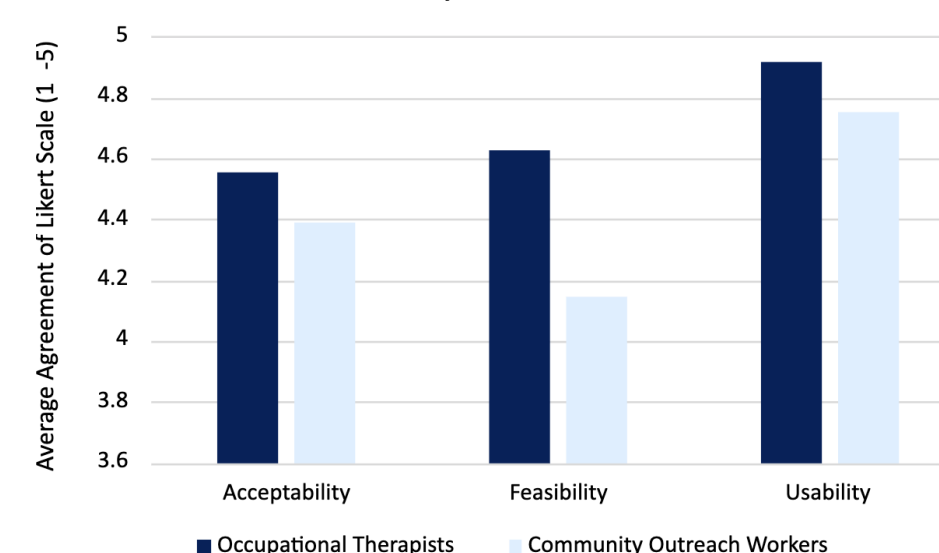
Satisfaction Rating	# of Respondents
1	0
2	0
3	1
4	0
5	0
6	0
7	1
8	0
9	4
10	3

1 = not at all satisfied; 10 = fully satisfied
N = 9 respondents

STABLE Trial Responders



Comparison of Occupational Therapists and Community Outreach Workers



Qualitative Responses from STABLE Trial Respondents:

"Easy and fast to use with a lot of valuable information"

"Produces conversations for collaborative goal planning/evaluations, easy to administer, and assists in discharge planning"

"It captures needs being met or not met in a concrete way and reminds us to ask a comprehensive list of things."

Discussion

Facilitators

- Simple visual design and usability of STABLE tool
- Application to outreach workers
- Significant feedback from SME
- Strong relationship with Outreach Therapy staff

Barriers

- Time constraints
- Sample size
- High clinical demands of SME & those requested to trial STABLE

Future Directions

Progress through the steps toward standardization of STABLE

Continued to promote the use of STABLE across different settings working with the unhoused population

Provision of streamlined care outcomes and more appropriate referrals to Outreach Therapy

Implications for Practice



STABLE supports both the occupational therapy team at Outreach Therapy and outreach workers more broadly by helping identify priority areas of need, guide goal setting, and facilitate appropriate referrals and resource connections.



Items included in STABLE encompass many common areas of priority within the population of people experiencing and exiting homelessness. These items reflect key domains that frequently impact stability and successful transitions to housing, ensuring the tool remains both relevant and practical for guiding care and resource allocation.



Given high clinical demands and time constraints, STABLE offers a quick and simple conversation-guided tool that establishes meaningful and individualized goals. Outreach workers can engage with their clients to complete the assessment in a way that makes sense for their working relationship, such as reading the prompts for the client.

Acknowledgements

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References

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