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Senior Capstone Project : interim incorporated vocational fair

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Senior Capstone Field Seminar

Senior Capstone Project Final Research Report

Interim Incorporated Vocational Fair

Keywords: The role of vocational development in the social rehabilitation of mentally ill homeless adults.

Abstract: The purpose of this project was to aid in the social rehabilitation of mentally ill adults by empowering their vocational ability. The results of a program evaluation showed that only a minority of graduates from a transitional living program was vocationally active. After identifying the specific barriers to community involvement a vocational fair was organized to address the need.

Executive Summary:

Agency and Population

Interim Incorporated is a private non-profit public benefit organization dedicated to serving mentally ill adults with a history of chronic homelessness. Interim offers a range of programs that provide support from homelessness to independent living. To be eligible for the program clients must be over the age of eighteen, diagnosed with an Axis I mental illness, receive Medi-Cal and social security benefits, and have a history of chronic homelessness.

Summary of Problem

Despite the program's goal of social and vocational rehabilitation, the majority of program graduates are not working, attending school, or volunteering in the community. For social rehabilitation to be accomplished, vocational skills are necessary.

Description of Capstone Project

To encourage the clients to strengthen their vocational skills, I organized an agency wide vocational fair. The purpose of the fair was to challenge the barriers that were preventing clients from being vocationally involved in the community. The success of the fair was based on client attendance and participation and was a success. The fair empowered the client population by helping them realize that there are vocational opportunities in the community. The fair also debunked myths regarding social security policy on working.

Findings and Recommendations

Throughout the process of organizing and holding the vocational fair I observed that most clients and staff do not understand social security policy. I also observed that there are definite barriers that discourage clients from vocational involvement, which will be discussed later. I

also observed that clients had desire to work and be part of the greater community. To fully understand and be able to serve the client population staff must be aware of each individual clients financial status, more specifically the type of disability income they receive. I recommend that program staff, especially case managers, be trained to thoroughly comprehend social security policy. Transportation also proved to be a major barrier to client activity. I recommend that staff organize a system of transporting clients who want to volunteer.

Agency and Program Description

History and Mission

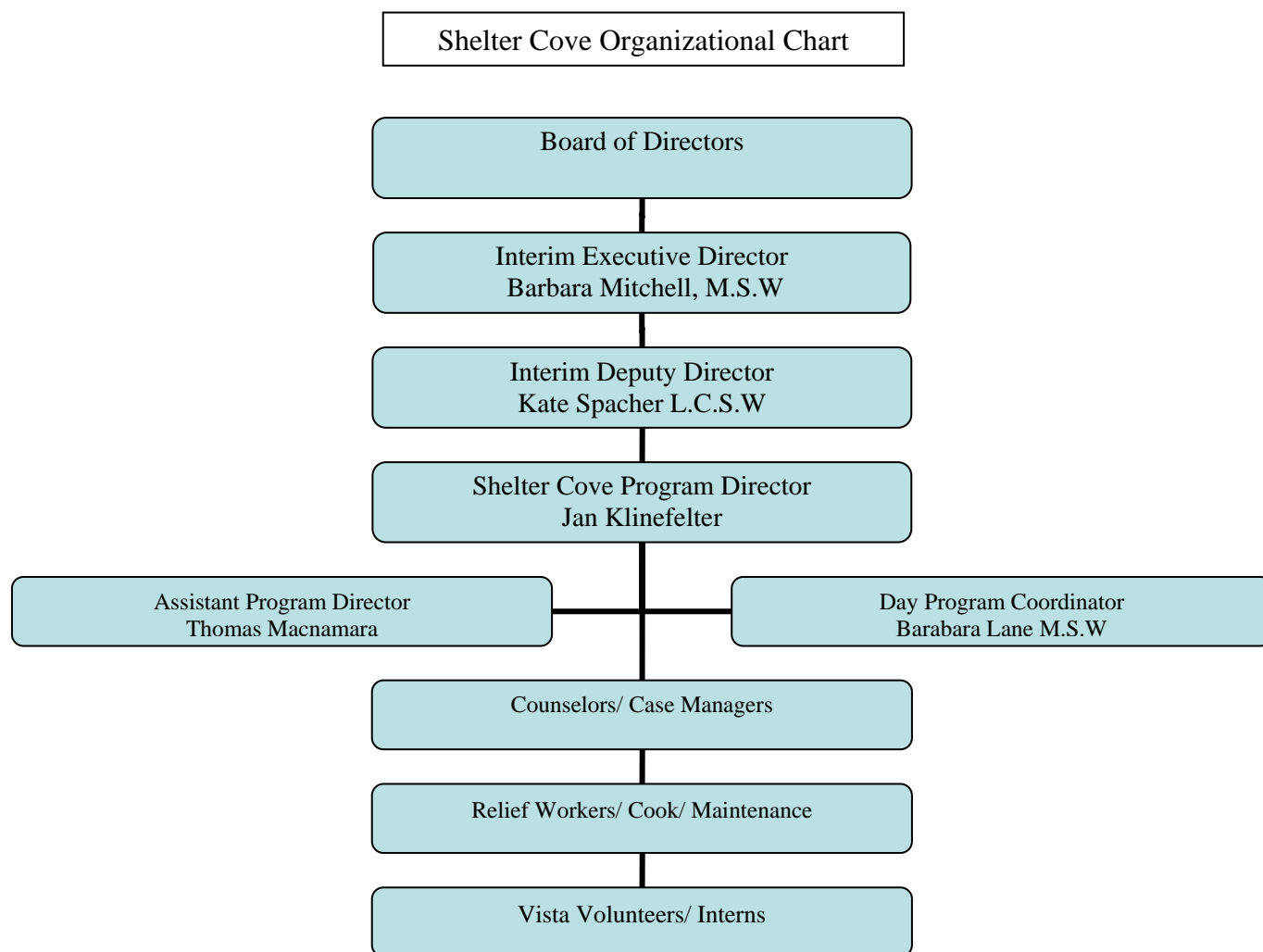
Interim Incorporated is a registered 501-C3 private non-profit public benefit organization. Interim was founded in 1975 by a group of dedicated citizens who believed that adults with mental illness could live independently providing they had a safe and affordable place to live, supportive services, and assistance in developing independent living and medication management skills. Interim's mission is *to help people with psychiatric disabilities to manage their illnesses, achieve satisfying productive lives in the community, and attain the maximum level of independence possible.* Interim seeks to reduce the need for costly inpatient psychiatric care and institutionalized living. In addition to providing services, Interim offers clients paid employment positions. These positions include peer advisor, maintenance crew, kitchen crew, and landscaping. Interim operates eighteen different programs in the Monterey Tri-County area, serving over seven hundred clients per year. The programs specialize in specific client services including affordable housing, drug and alcohol support, residential treatment, family outreach, homeless outreach, social support, and education and employment services.

I am completing my internship at Interim's Shelter Cove program, which is a two-year transitional living program for up to thirty-six adults with mental illness or dual diagnosis.

Shelter Cove offers supportive housing designed to function as a bridge to independent living. Prior to being admitted to the program clients lived on the streets, with family members, in board and care shelters, or in highly structured institutionalized environments. Monterey County Behavioral Health division or other Interim programs refer clients to the program. Common client issues include medication and symptom management, drug/alcohol addiction, finance management, education and employment planning, social relationship skills and independent living skills. Shelter Cove offers a case management services and a structured day program that includes daily groups from 9am-3pm. The groups address drug and alcohol issues, medication management, symptom management, independent living skills, budgeting and shopping, creative art expression, and building healthy relationships. Shelter Cove is on Fort Ord, a remote abandoned military area. The surrounding area is limited in commerce, and clients are mostly reliant on public transportation. After completion of the Shelter Cove program clients are eligible and encouraged to move into Interim's permanent housing, which offers affordable community style housing with less support and structure.

Organizational Structure

Interim is governed by an elected board of directors. Executive and deputy directors oversee all of the individual program directors. The program director supervises the case managers who have the most contact with clients. A typical caseload is twelve clients, and it is not uncommon to be short staffed. As an intern, I am at the bottom of the chart. My mentor is the program director, but I report to all staff. I do not have any contact with the board, or executive and deputy directors. My duties as an intern are similar to those of a relief worker. The chart below is an example of the program's organizational structure.



Problem Description

The results of a program evaluation showed that only a minority of clients surveyed were currently working, attending school, or volunteering in the community. Interim's mission is to socially rehabilitate clients by helping them transition into independent living. Part of this transition includes community involvement. As Shelter Cove is not a licensed facility, staff cannot require clients to work. Recently, staff tried to implement a requirement that clients complete ten hours of community service per week. Most clients did not take the requirement

seriously, many expressed that they did not know where to volunteer and had no transportation.

After spending a couple of years with the client population, I have made several observations. Society commonly stigmatizes people with mental illness as lazy and unproductive. The clients have been told they are disabled, which by definition means unable to work due to injury or illness. In reality, this is a tremendous barrier. Many clients are not disabled once they become stabilized on medication. By spending time participating with clients during extracurricular activities, I am confident in stating that clients are able to contribute and eager to be involved. Clients will come together to work at fundraising carwashes, community clean-ups, talent shows and, greenhouse building. The client group possesses an untapped energy that is stifled for a variety of reasons. The population is diverse and one client cannot be compared to another. However, there are observable barriers common to the majority of the population. The most common barrier is a lack of transportation. Work or volunteering is exceedingly inconvenient when it involves riding the bus for several hours. When I have told clients about different events happening in the community, the response of “I have no way of getting there” is very common. Another barrier specific to employment is the fear of losing disability benefits. It is evident that the majority of clients do not understand what type of benefits they are receiving and the benefit restrictions. Fear is also a major barrier. Most clients have not worked for many years and their confidence is low. Before being stabilized on medication, clients have had difficulty holding jobs and have been stigmatized by their mental illness. Many clients tend to believe that they are incapable of work or following through with a long-term obligation. Granted there are clients in the program who are very low functioning, but every single client has something to offer and talents that can be utilized. A final barrier is the lack of guidance. Although the program offers supported employment and education services,

clients are able to slip through the cracks and get away with not being involved. This is usually due to other more immediate issues that need to be addressed and staff cannot force a client to be involved.

Why is this a problem?

By not working or pursuing a vocation, clients are remaining in a rut. Because all clients are receiving social security disability they are not financially dependent on working. Clients have the option to remain on disability as long as they are “disabled”, and some chose this option out of fear. Although disability income covers basic expenses, it gives clients only enough to survive. Clients have no money left to save, and little money left for anything extracurricular. So clients basically are confined to their houses with no financial means to contribute to personal growth. So the rut continues, through medication and therapy clients are regaining mental health, but there are too many hours in the day to have nothing to do. Interim’s goal is to socially and vocationally rehabilitate clients, and this goal is not being met. Honoring on the social rehabilitation model, the clients must make their own choices. Also, a support system is essential in recovery. Clients need to have community connections established before they leave the program so they have something to identify with when they leave.

Problem Identification

My original capstone project was to create and distribute a program evaluation for graduates of the Shelter Cove program. This evaluation included quality of life questions relating to clients personal and vocational functioning, and questions relating to program satisfaction. I distributed thirty evaluations and was able to collect fourteen. The results showed that only a minority of clients were currently working, attending school, or volunteering in the community. As an intern, I organized different events to encourage client interaction and participation. Through

this, the problem was also very evident. I noticed that clients were not in the habit of doing extracurricular activities outside of required program. Some clients were not even attending required program and spending the majority of their day alone in their houses.

Population Description

Shelter Cove serves adults with mental illness who are in need of supportive housing. To qualify, clients must be homeless, and be diagnosed with an Axis 1 mental illness including bi-polar disorder, schizophrenia, schizoaffective disorder, major depressive disorder, or dual diagnosis with a substance abuse disorder. Clients must be referred through Monterey County Behavioral Health Department and be eligible for Medi-Cal. The client population is low-income, the majority of clients receive Supplemental Security Income (SSI), and many have a payee. All clients are on psychiatric medication, and many are conserved. Common client issues include medication and symptom management, drug/alcohol addiction, finance management, education and employment planning, social relationship skills and independent living skills. Clients range in age from 18-65, and there is an equal representation of males and females. The majority of clients are long-term residents of the Monterey Tri-County area. All clients are taking psychiatric medication and at least 30% of clients are conserved with a payee.

Literature Review

Interim Incorporated is a member of the California Association of Social Rehabilitation Agencies (CASRA). According to CASRA, “the goal of psychiatric rehabilitation is to help people reach a healthy level of social and vocational functioning”. Social rehabilitation is the bases for Interim programs, and the literature I reviewed helped me further understand Interim’s objectives. The social rehabilitation model allows for clients to make their own decisions, as well as the power to direct their own lives. The social rehabilitation process includes helping

clients develop social, vocational and other living skills so they can live independently in the community (CASRA, 2007). Despite the traditional view that symptoms must cease I found several articles which argued that “recovery does not mean cure” (McGuire, 2000), and the recovery process is a “complex outcome involving multiple concepts” (Ralph, 2000). The literature I reviewed repeatedly referred to the importance of “self determination” in the recovery process. “Self determination refers to individuals making life choices based on their personal preferences” (Leff, 2003). It is theorized that the combination of mental illness and low levels of self determination frequently contribute to a poor quality of life and limited social and societal involvement (Cook & Jonikas, 2002). The literature also stressed the importance of including self-determination as a component of program evaluation (Leff, 2003).

Capstone Project Description

My capstone project was to organize an agency wide vocational fair. The purpose of the fair was to challenge the barriers to client vocational involvement. I collaborated with local agencies to determine what agencies should participate. I contacted different agencies and requested their participation in the fair. I was able to get representatives from Social Security, Employment Development Department (EDD), Supported Education and Employment Services (SEES), and the United Way Volunteer Center. As I spent a lot of time visiting local agencies and many were not able to attend, I set up a general information table with contact information from agencies seeking volunteers. I sent out invitations to all the different Interim programs requesting client attendance. I used incentives such as raffle prizes and food to encourage clients to attend. The fair was organized into two parts. The first part was an employment panel consisting of Social Security, EDD, and SEES. Each representative spoke about their programs services and then a question and answer period. There was then a break and lunch was served, raffle prizes given

and clients wrapped up questions for the panel. During the second part of the fair, a representative from the United Way Volunteer Center spoke about services and allowed interested clients to fill out applications.

Methods

The implementation of my project was reliant upon collaboration, communication, and leadership. Through collaboration I determined client interest and located community agencies, through communication I informed the clients of the fair, and through leadership I encouraged clients and staff to participate.

Project Outcomes

This project informed clients of the different vocational options available in the community. It also informed clients and staff of the different social security regulations relating to employment. Through client participation in the fair it was evident that there vocational interest in the client community.

Project Evaluation

I evaluated the project based on two factors of success, client participation and organization attendance. Client participation exceeded my expectations and the majority of organizations that committed to attend did.

Anticipated Benefits

The anticipated benefits of this project are that the need for vocational services was identified, as well as the barriers that must be overcome to encourage clients to be involved in the community.

Application to Academic Requirements

Major Learning Outcomes

1. MLO 1- Collaboration

I addressed the competencies of this MLO by collaborating with clients and staff to design and implement a vocational fair. I collaborated with clients to determine what specific vocational issues they were facing, and used this information to design the fair. I collaborated with staff to determine what organizations should be present. I also collaborated with outside community agencies to determine which would be appropriate to invite.

2. MLO 6- Knowledge of Health and Human Services

I relied on my knowledge of health and human services to plan the vocational fair. I had to determine the need and find organizations to invite that met the client need.

3. MLO 7- Leadership

I addressed the competencies of this MLO by motivating clients to participate in the vocational fair. I utilized my leadership knowledge by being prepared and confident in my presentation to clients and staff. I also utilized leadership by encouraging community agencies to attend.

Reflection of CSUMB Vision Statement:

“The university will be a collaborative, intellectual community distinguished by partnerships with existing institutions both public and private, cooperative agreements which enable students, faculty, and staff to cross institutional boundaries for innovative instruction, broadly defined scholarly and creative activity, and coordinated community service. Institutional programs will value and cultivate creative and productive talents of students, faculty, and staff, and seek ways to contribute to the economy of the state, the well being of our communities, and the quality of life and development of its students, faculty, and service areas.”

My capstone project reflects the CSUMB vision because I fought for the well being of the local community and encouraged clients to contribute to the economy of the state. It is my sincere hope that my capstone will initiate change that improves the quality of life for Interim clients.

Conclusion

Findings

Through implementation of this project I found that more clients wanted to go back to work than I initially thought. Like society, I stigmatized the client population by thinking that they did not want to work because they were intent on living off benefits. By observing client participation in the fair, I noticed that clients were more driven by fear of survival than laziness, and the fear was based on lack of resources and not understanding social security policy.

Agency Benefits

This project benefited Interim Inc. by empowering clients to make a change. The project also informed staff of the needed change.

What I learned

I learned that clients have a tremendous amount to share and give, yet lack the resources to do so. I learned that living on disability can be more of a hindrance than help, and that it is very scary for clients to become financially independent.

Recommendations

I recommend that all program staff be required to complete training relating to social security benefits. All case managers should be aware of their clients financial status which includes the type of disability they are receiving and the applicable rules and restriction. I recommend that the program make it a requirement for potential graduated to be committing at

least ten hours a week to vocational activity before they can graduate. I recommend that it become a program requirement for all clients to at least attend one interview with Supported Education and Employment Services (SEES). Lastly, I recommend that the program create a transportation system for clients who want to volunteer.

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