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Access to Public Assistance Benefits & Services Outreach

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Abstract

Monterey County Department of Social Services Community Benefits Branch provides temporary public assistance to eligible residents of Monterey County to meet their basic needs. Programs include temporary cash assistance, General assistance, Medi-Cal, CalFresh, and CalWorks. The goal of the agency is to promote the social and economic self-reliance of each individual they serve. Low-income families and individuals are faced with a lack of access to benefits and services that are provided to help. There are many factors as to why we see inequality and a lack of access to benefits and services, such as access to technology, education around resources, and the fear of being in a government system. These factors lead to financial distress, higher health risks, and homelessness. Furthermore, the lack of access to public assistance benefits and services presents a variety of problems for families, children, and individuals. The purpose of this project was to address the lack of access to public assistance benefits and services throughout the community. The project allowed the agency to provide information on benefits and services directly to the community to five different employers through a flyer distribution and feedback through a survey. There was a 56% response rate of employees who are current clients. The remaining percentage stated that the outreach was beneficial, would like to reach out for help, and apply. It is recommended that MCDSS Community Benefits Branch continues to do this form of outreach to obtain more clients throughout employers.

Keywords: Access, low-income, health, Monterey County

Agency & Communities Served

The Monterey County Department of Social Services Community Benefits Branch provides temporary public assistance benefits and services to assist eligible residents of Monterey County meet their basic needs (MCDSS, n.d). With a mission statement:

To promote the social and economic self-reliance of each individual and family we serve through: employment services, temporary financial assistance, social support services, protective services to children, dependent adults and seniors, partnership with community to develop and support social change, highlighting personal responsibility and self-sufficiency. (MCDSS, n.d)

The Community benefits branch is one of the services provided by the Monterey County Department of Social Services aside from CalWorks Employment services, Family Children's Services, and Aging & Adult Services.

The Community Benefits Branch has a number of benefits and services. The first service is CalWORKS, a cash assistance program that provides assistance to families towards a path of work and self sufficiency. Its purpose is to provide temporary financial assistance to economically disadvantaged families with dependent children. Like any form of assistance the help one receives is based on family income, resources, and household size (MCDSS, n.d). A second service is Electronic Benefit Transfer Card (EBT), an assistance program that allows a Supplemental Nutrition Assistance Program participant to pay for food. (MCDSS, n.d.) A third service is CalFresh, a California's food stamps (SNAP) program. This program ties in with the Electronic Benefit Transfer Card as it's, "designed to supplement the food budget of low-income households to meet their nutritional needs. Individuals granted CalFresh benefits can buy food at

a grocery store or other authorized places using an electron Benefit transfer (EBT) card”

(MCDSS, n.d.). This program gives out amounts of benefits to families depending on household size, family income and resources.

One of the most used programs the Community Benefits branch provides assistance to low-income families, seniors, and adults with disabilities is Medi-Cal, is a state health insurance program. This program helps pay for medical, dental, and prescription medications for those who are eligible. Eligibility for this program, “is established by the Department, a representative from the Central Coast alliance for health, the local Managed health Care Plan, provides eligible recipients with assistance accessing physicians and covered medical services and providers” (MCDSS, n.d.). Many people are able to qualify once they go through the process of eligibility and fulfilling its requirements.

The branch has one last assistance program, the General Assistance (GA) program “is a county funded temporary cash assistance program for unemployed single adults and couples who may not have dependent children and are not receiving other public assistance benefits including Supplemental Security income (SSI) or unemployment benefits” (MCDSS, n.d.). The GA program is a great form of assistance to those who are barely making ends meet on their own. Security income and unemployment benefits can help individuals buy food, pay expenses, and meet basic needs. All the public assistance benefits and services to assist eligible residents of Monterey County provided by the Community Benefits branch can be easily accessed when coming in contact with one of the workers.

All these benefits and services are offered to and used by the public ranging from different ages and household sizes. Adults, pregnant women, infants, and even inmates have received some sort of assistance.

Problem Description

In any agency many problems can be found. At the Monterey County Department of Social Services Community Benefits Branch there is a lack of access to public assistance benefits and services, such as healthcare, food security, and having a stable home. Many have the privilege of access to healthcare, receiving treatments, and buying food without a worry of costs or accessibility. However, low-income families and individuals are faced with a lack of access to benefits and services that are provided to help. There are many factors as to why we see inequality and a lack of access to benefits and services. Low-income families and individuals are the most vulnerable group that deal with this inequality. Within these groups, we see that low-income communities are more likely to not receive care within this system. Access to healthcare and other services have always been a problem throughout the years, and it has only gotten worse over time.

Lack of access to public assistance benefits and services presents a variety of problems for families, children, and individuals, with access to services being the most complex and prevalent. What many people might not realize is that health insurance can only cover a certain amount of health care; the current number of American citizens who were uninsured in 2020 was around 31 million according to Stasha (2021). That is only a number that targets health care, plus there are also non Americans to think about and there are many more problems than that. Let us not forget the main problem: the overall access to the benefits and services. As time goes on,

technology is used more and more, while some people are not able to keep up with the change, whether because of not having internet access, or not knowing how to use technology at all. We also cannot forget that education plays a big role in accessing such benefits and services. Not only does one have to apply for services, but also one must be able to comprehend what is being agreed upon. Within low-income communities there are mixed statuses of citizenship in a household. When wanting to seek help from government agencies there will always be that fear being undocumented and risking deportation. What many people don't know is that anyone can easily qualify as long as one meets the basic requirements. For example, immigrants would need to be a U.S citizen or permanent legal citizen because, unfortunately without that they would not be able to apply. What they don't know is that individuals can always apply to receive emergency services only (C4Yourself, 2021) which is something that needs to be more known.

Low-income communities are faced with a lack of access to public assistance benefits and services that can deeply affect their lives. In order to fully understand and become aware of the issue, we must deeply analyze it, and break down the main factors that contribute to the continued lack of access to public assistance benefits and services among low-income communities.

Contributing Factors

Access to Technology

Technology is a huge asset to the world at large, but unfortunately not everyone can benefit fully from it, whether it be because of lack of internet access, lack of computer access, or lack of general knowledge of how to use technology. According to The Markup (2020, para. 3) more than 14 million people in the U.S. are without any internet access. That is the United States

overall, so what about smaller communities and those in poor areas. With technology changing everyday people are able to connect to the internet in a variety of different ways, such as high-speed internet wired connections, satellite internet, cellular internet and hotspots, but some are not as lucky to access those options.

Martin (2018, para. 3) states that nationally, 78 percent of households subscribe to the internet, but households in both rural and lower-income counties trail the national average by 13 points. This means that people living in poorer areas are lacking the access to the internet which holds them back from reaching out to services and resources like ones provided by the Community Benefits Branch. Different forms of technology are being used everywhere you go and it is unfortunate when those who need services the most are unable to figure out how to use it, such as computer or tablet use. Some people don't know how to use them and then require help from others, which asking for help might not come easy for some.

Education Around Resources

There can be many resources and services available but even the smartest person can still have difficulty analyzing what certain words mean. When it comes to county, state, government paperwork one must make sure what is being read is understood correctly. This can become difficult when one might not speak the English language and no interpreters around to help. According to Ryan & Bauman (2016), "Hispanics reported the lowest percentage at every level from high school graduate or more (67 percent) to advanced degrees (5 percent)." The Hispanic community is at the bottom of the education chart and seems to struggle the most when it comes to understanding official paperwork. Low-income individuals need to comprehend what they are being told to avoid later consequences; such as health risks or financial burdens.

It can be very easy to look over forms and sign without question, but people need to take their time and read up to the smallest details if they really want to access resources. Not understanding what certain words mean is completely fine. People need to start asking for help when they need it and that prevents them from ending up getting held reliably for signing documents they had no idea what was being said.

Fear of Being In a Government System

People fear asking for help, asking too many questions, and there's people who fear it all due to their citizenship status. Every home is different, a mix of parents, children, grandparents, plus many more. So when it comes to putting people's names in a government system some might grow fear. According to Johnson, Perez, & Mejia (2021, para. 1), "California is home to almost 11 million immigrants—about a quarter of the foreign-born population nationwide." Everyday these individuals work hard to provide for themselves or their families either in California or back in their country. Some people have to work with a fake name and social security number in order to work legally in the state and although it's illegal they see no other choice. Once a person's name is in the system it's not going anywhere.

A citizenship status brings great fear to a household but it is important for everyone to know that they are safe when seeking help to live. Accessing any form of resource or benefits comes with a list of eligibility requirements to look over and it's crucial to look into the qualifications for an immigrant. It can be very difficult for someone to put themselves in the system but knowing there's a chance of accessing public assistance benefits and resources will be worth it.

Consequences

Financial Distress

When it comes to accessing adequate health care, having health insurance or a high income is a necessity. Without both insurance and income, low-income families are not only at a higher health risk, but they are also faced with financial distress. “Not having health insurance or having a lot of costs for medical care not covered by health insurance can cause financial problems and may lead to debt and bankruptcy...[it] can also affect a patient’s quality of life and access to medical care” (NIH, n.d.). Some of the basic health needs for low-income people are doctor visits and receiving prescriptions for their medical needs. Everyone should be seen by a doctor at least once a year for their yearly physical, and even that comes at a cost. Doctor visits start from \$0 - \$25 with health insurance, and, unfortunately, low-income people do not always have the access to insurance. This leads to them having to pay out of pocket when health conditions worsen, and they have no other choice than to pay \$300 and up for basic care. Low-income people often cannot afford a \$25 co-pay, let alone several hundreds of dollars for a simple doctor visit or prescriptions. This leads them to borrow money from family, banks, or clinics and hospitals who will give them the care they need, allowing them to open an account to make payment for their care. Unable to pay the fees and extra costs, their accounts end up at a collection agency, and that is when financial distress truly begins to affect the family.

People in this situation were already worried about their health to begin with, and they now have to worry about paying back all the money they owe to wherever they borrowed from. Families can come to regret receiving care in the first place because now they are drowning in debt. Since it is too late for them to take any health care back, “researchers also found that

medical spending sent millions of people effectively into poverty or into deeper rungs of poverty” (Newkirk II, 2018, para. 8). These individuals and families who were already low-income are now classified as being in poverty, the state of being extremely poor. They are forced to spend every hard-earned dollar to pay off all those health care bills.

When it comes to families that have no income due to unemployment the situation gets even more difficult. According to Cunningham (2018, para. 7) “a high percentage of low-income adults lack a high school degree (21%) and are not employed (48%).” That is a huge percentage that is unemployed, and they still have to worry about rent and other house utility bills. Not only do these adults lack education, but also their children are more likely to receive less education because of the socioeconomic group they grow up in.

The harsh reality is that healthcare is a commodity sold to those who can afford it, rather than a physician’s dutiful service to the public. The overall consequence in the United States revolves around money and without it low-income families and individuals are cheated out of a basic right.

Higher Health Risks

When the lack of access to health care and more among low income communities is at an all-time high, higher health risks develop. With the “many challenges low-income communities face to access adequate health care in the United States” (Davenport & Lazar, 2018, para. 1) they are at a higher risk of health problems that can and will develop or worsen over time. “One-fifth of low-income adults report their health as fair or poor, compared to only 5 percent of higher-income adults” (Cunningham, 2018, para. 5). Studies show that low-income individuals that do not have the access to health care have lower health overall compared to those who do

have the access. Some of the health risks are the “Rates of obesity...among low-income adults (36%) compared to higher-income adults (28%). Low-income adults are also much more likely to be smokers (25%)” (Cunningham, 2018, para. 5). These rates show that the risks of being obese and a smoker target the low-income population at a much greater rate. Not only is their health at stake, but they will not be able to receive treatment for their health issues. Many individuals tend to eat excessively or begin to smoke due to the stress they take on from the lack of resources to care, further compounding the mental health problems that develop from the low access to health care.

Cunningham (2018, para. 6) states that, “low-income people are much more likely to be in serious psychological distress (7%) compared to higher-income people (1%). Low-income people also report more difficulty sleeping (18%) than higher-income people (14%).” Much of that psychological distress comes from not having access to resources that provide the care in the beginning, such as health insurance that covers over 50% of health costs. One of the mental health risks that develop is depression; “a mood disorder that causes a persistent feeling of sadness and loss of interest” (Mayo Clinic, 2018, para. 1). Depression takes a toll on a family; it first may affect the breadwinners, the parent(s), then the rest of the family. Living on a low-income budget can cause financial strains in the home based on the food insecurity and housing problems that can result. These issues first affect the parents after they realize they are not making enough money to pay for food, shelter, daily necessities, and health care. However, not only are adults facing mental health problems but also the children in the home can begin developing issues. “These stressors can increase parental risk for mental health problems and substance abuse, which can diminish their capacity to engage in positive parenting practices (eg,

warmth and responsiveness, nurturance, supervision) and increase the potential for child abuse and neglect” (Hodgkinson, Godoy, Beers, & Lewin, 2017, para. 8). When a child sees a parent acting in a different way than they normally do, or constantly sees them stressed over the financial situation the family is in, they start to get depressed themselves because they have no control over the situation while also feeling helpless. Children 18 years old and younger are often affected by poverty, and they make up 33% of the overall population living in poverty (Hodgkinson et al., 2017). Being young in age, they are unable to contribute financially into the home, and even less able to find access to health care on their own. Children depend on their parent(s) income or health insurance to receive adequate health care, so without either they are at a high risk of developing health conditions. Children can also become depressed themselves from seeing their parent(s) suffer, and there is limited access to get them to care for their mental health. Depression comes from the families lack of income and insufficient health insurance coverage which leads them into the financial distress they continue to face.

Homelessness

If it is difficult having financial problems, imagine adding to the situation not having a place to live, sleep, or feel safe. Because of this, the final consequence for the lack of access to services and benefits is the increase in the homelessness population. The word “homelessness” refers to not having a home. However, people do not need to live in the streets to be considered homeless. Different situations can apply for a person to be considered homeless. Some of these situations include sleeping on the streets, staying with friends or family, living in poor conditions that affect physical and mental health, and/or living in a hotel, as well as sleeping in your vehicle wherever you can find a spot. To illustrate, if a person is living in poverty and does not have

sufficient income to pay the rent, that person automatically is defined as homeless. Poverty and homelessness are strongly linked. Low-income people are frequently unable to pay for housing, food, childcare, health care, and education. Difficult choices must be made when limited resources can cover only some of these necessities, and often it is housing, which absorbs a high proportion of income, that must be dropped. People who are homeless have their own barriers when it comes to using mainstream benefits and resources even if they should be at a high priority to use these resources. According to Gov Info (2021), “homeless people are often unable to access and use federal mainstream programs because of the inherent conditions of homelessness as well as the structure and operations of the programs themselves”. This is very true as benefits and programs require a permanent address or phone number to reach these individuals. This only makes it harder for homeless people to be granted the help they need, making it even harder for them to try and make it out of homelessness.

Problem Model

Contributing Factors	Problem	Consequences
Access to technology (internet access, computer access)	Lack of access to public assistance benefits & services	Financial distress
Education around resources available		Higher health risks
Fear of being in a government system (mixed status households)		Homelessness

Capstone Project Description and Justification

Capstone Project

The lack of access to public assistance benefits & services will unfortunately lead to consequences that will affect an individual's life day by day as long as benefits and services are not being accessed. The project hopes to reach the individuals in the community and bring them access to those services. This will be done by going into job locations that provide the most job opportunities to lower income people. Community Benefits workers that will be part of the project will help by taking in flyers and information on the benefits and services the Monterey County Department of Social Services Community Benefits Branch provides. This will allow the community to get informed on the services available to them without missing out on a day's worth of work. A survey will be distributed at the end of the short presentation after the flyer distribution to get responses on how likely the people will be reaching out to access these services. Lastly, a piece of paper will be passed out where employees can write down their name, number/e-mail address, and the type of service(s) they are interested in hearing more about and possibly apply to. This will allow workers to contact them in the future for further assistance.

Project Purpose

The purpose of this project is to address the lack of access to public assistance benefits and services throughout the community. This project will specifically address a main factor into the problem, the access to technology. This is a huge barrier in the community, as many people lack access to the internet, computer, or the lack of general knowledge on how to use technology. The project will allow the agency to provide information on benefits and services directly to the community through the flyer distribution and the short presentation that summarizes what the

Monterey County Department of Social Services provides. By doing so, the agency is making the use of technology less of a need to the people by providing information directly to them. This will help the people see that the agency acknowledges the barriers they encounter. There is a big need for this as the lack of access to technology creates a lack of access to the benefits and services that are available. The project will help the community gain knowledge of services and acknowledge that there are forms of accessing health care, food access, and other general assistance outside of their employment.

Project Justification

This project's goal is to reach out to the community and provide them with information regarding the benefits and services available to them face to face. Low-income people not only lack access to technology but a lot of adults don't know how to maneuver through it. The project will target those individuals that struggle with accessing the benefits and services because they are at higher risk of certain consequences. The community needs to be informed with this information because for one, many of these working individuals struggle financially and having to pay for unexpected health services can become an ever bigger financial distress on them. According to Jagannathan (2019, para. 1) "more than half of American adults (56%) face some kind of medical financial hardship." This shows that more than half of adults struggle financially to cover health care costs and that is not including other financial hardships.

Along with financial hardships come higher health risks that the community needs to be informed about. One of the resources that the community will be informed about is Medi-Cal, a state health insurance program for low-income families, seniors, and adults with disabilities. In fact, between 2016 and 2017 the percent of uninsured citizens in Monterey County, CA grew by

4.22% from 9.5% to 9.9% (Data USA, n.d). This shows that as the years have passed they are not accessing health insurance and hiring their risks of health issues. The low-income community consequently face financial distress and higher health risks but they should also be aware that at any point the lack of access to benefits and services can lead to homelessness. Even if the community thinks they might not end up homeless it is important to inform them that there is that chance or at least educate them for their peers outside of their employment. One of the services is the General Assistance program, a county funded temporary cash assistance program for unemployed single adults and couples who may not have dependent children and are not receiving other public assistance benefits including. With this form of assistance there was a drop of homelessness in Monterey County in 2019 from 2,837 to 2,422 from the increase of cash distribution through general assistance (Johnson, 2019). This is great information that needs to be shared to the community to help them recognize that the different types of benefits and services do work and are targeting future outcomes.

This form of outreach will be very effective as the people that will be reached are low-income and are out of work at the end of the season. Many workers in agriculture have close to three months of no work and within these months many apply for their unemployment and they should learn that there is more than just money out there that is accessible. With this form of outreach they are being taught what each and every service does and how exactly they can apply. Bringing information directly to them will make them realize that there are many benefits waiting for them and can easily apply to them with our help.

Assessment Plan & Expected Outcomes

In order to measure the effectiveness of the project the survey that will be passed out after presenting will help determine if informing the community on the benefits and services is a good form of outreach and give the agency hopes that potential clients are interested in the services. The sign up sheet that will be passed out after the presentation will give us a list of potential clients that are interested in learning more about the programs and possibly apply to them. This project has a goal of getting 15 new clients and those employees who sign up on the sign up sheet will be contacted a week later to assist in their application process and if all program requirements are reached and application is approved they will be considered a new client. This will measure the increase of the number of clients that are trying to be reached and determine the increase in the use of benefits and services. The MCDSS will be notified of their interest in an application by the sign-up sheet. They will be able to fill the application so we can then recognize that they were part of our outreach.

The expected outcome of this project is to see an increase in the number of clients within the agency, as well as an increase in the use of the benefits and services provided by the Monterey County Department of Social Services Community Benefits unit. By implementing this short presentation of the flyer and a brief summary of what resources are available or the alternative of flyer and survey drop off with employers, the project will aim to raise awareness among members of the community of the benefits and services available not only to them, but also to their family, children, and peers. This project will allow the community to have a better understanding of these resources and enable people make the call to get their application started and start receiving those benefits. The use of the survey will give us an understanding if the outreach was helpful and as the surveys are mailed in with applications with the alternative

outreach that will show us that people have applied because of our new form of outreach. The project will bring more low-income clients into the agency, and hopes to decrease financial distress, higher health risks, and even homelessness.

Project Implementation

In order to implement the project what needed to be done first was to learn more about the benefits and services along with the eligibility requirements for Medi-Cal and CalFresh. By doing so it helped the educational aspect of the benefits and services in order to present to the community. The community that the project presented to were low-income employers so, the next step was to research who are those employers that employ the most low-income people in Monterey County. Reaching out through emails and phone calls explaining what the goal of the project was and how it would go about, there were five different employers who approved of the project. On the list are; Al Pak Labor, D'Arrigo Bros, Dole, Misionero Vegetables, and Monterey Fish Co.

In addition to learning about the benefits, services and their requirements a flyer with information regarding the benefits and services was searched for an existing flyer by mid September 2021 and was printed and passed out the days of outreach. This existing flyer was edited to make sure that the information was updated such as agency phone number, main MCDSS address, and program names with a brief description of what they are. The existing flyer was approved on September 9, 2021, printed on September 16, 2021 and was passed out the day of the project outreach before the end of October 2021. Not only was there a flyer but there was also a survey that the employees got to fill out. This survey was created in August 2021 and printed on September 9th, 2021. This survey consists of 5 questions: Do you have Medi-Cal or

CalFresh now? Would you consider getting more information on the programs? Would you apply for these programs? Did this presentation have useful information? How likely are you to reach out to us and apply? The survey and flyer came in both English and Spanish. The flyer and survey that were created were stapled to employee pay stubs and distributed on employer pay day.

The project was fully developed by the end of June 2021 and shared before the end of October 2021. The project consisted of the flyer and survey being dropped off to the five employers in mid-September 2021. The employers added the flyer and survey to employees pay stubs and distributed them on their specific pay day. Surveys were filled out by employees and were returned back to their supervisors as they were completed. They were given one week to complete before surveys were collected by supervisors and returned to the employer sites main office. Review of final capstone results will no longer be in mid November 2021, but now at the end of October 2021. A detailed implementation plan and timeline can be seen in the Scope of Work in Appendix A.

Project Results

The initial plan for the project was to present an MC Choice flyer and summarize what each program the agency offers. Along with a survey and sign-up sheet at the end of the presentation in which employees can fill out if they showed interest in gaining more information or applying to any program. Due to the global pandemic (COVID-19) and its variant, California issued restrictions to minimize the spread of Covid and its variant. Due to these circumstances, employer sites denied the idea of having an in-person presentation for this outreach. An alternative was created once all employers on the outreach list rejected an in-person presentation

during the first week of September. The final project consisted of a flyer drop off to employers; Al Pak Labor, D'Arrigo Bros, Dole, Misionero Vegetables, and Monterey Fish Co. Along with a survey in which employees can fill out at home and return back to their supervisors. This flyer and survey can be found in Appendix B. Due to this, the project outreach ran for a total of two weeks as there was a waiting period to get back the most surveys possible.

After gathering all returned surveys on September 30 and October 1st there were a total of 259 out of the 500 surveys distributed. That is a 51% total response rate. The main question in the survey asked employees if they currently use services for Cash Assistance, Cal Fresh, Food Assistance or Medical and the response showed that 56% of employees are current clients of the agency. Meanwhile, the remaining 44% answered the last questions and all responded "yes" to considering getting more information on the programs, if they would like to apply, and if the flyer had useful information. On a scale of 1 to 5, 5 being the highest, all responded 5 to the likelihood of reaching out to the agency. This information can be found on Appendix C. This achieved the expected outcome of reaching out to more low-income individuals. It also provided more information about the numbers of current clients, as well as bringing in more. Employees now have more knowledge on the services that the Monterey County Department of Social Services Community Benefits Branch offers, and how easy it can be to apply.

Although the potential clients were unable to sign-up for further information and help through the project due to the circumstances of being unable to have an on-site presentation, overall there was a huge percentage of feedback that showed interest in applying in the near future on their own. The goal of the project was to reach more potential clients, and that is exactly what was done.

Conclusion & Recommendations

Throughout the conducted research and survey data results from employees who participated, there needs to be more outreach provided to low-income families and individuals. Not having access to public assistance benefits and services will affect these families and individuals as they continue to not access them. The outreach benefits the low-income community, because they continue to be the most vulnerable population that deal with this inequality. Having outreach employees go into the low-income community and employer sites help them be aware of the public assistance benefits and services. This makes the community aware of the resources available to them and start an application process. It would be ideal that Monterey County Department of Social Services Community Benefits continue this form of outreach, throughout the low-income employers of Monterey County.

The outreach helps prevent financial distress, higher health risks, homelessness, and increases the access to public assistance benefits and services. The results showed that MCDSS can work closely with employers across Monterey County to educate them on the public assistance benefits and services available. In order to ensure that this project continues it is recommended that Monterey County MC Choice employees resume outreach with low-income employers across Monterey County. Using the flyer and survey that was created, can continue to help determine if the project was successful or not, and what improvements can be made. MC Choice employees can continue to outreach to employers who have not been reached yet.

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Appendix A

Scope of Work

Activities	Deliverables	Timeline/Deadlines	Supporting Staff
Learn more on the programs & benefits and the eligibility requirements (target Medical & CalFresh)	Gain a better understanding on our services to present to the public	May 2021	Victor Longoria
Research low-income employers	Determine employers to low-income community	May 2021	Victor Longoria
Search for existing flyer and edit if necessary (Programs, Tel #, etc.)	Make sure that information is updated and easy for clients to comprehend	May/June 2021	Victor Longoria
Approval of flyer and print		September 2021	Victor Longoria
Create, get approval, and print survey	Determine how likely they are to access services	September 2021	Victor Longoria
Implement capstone project at employer sites	Drop off flyer and survey to employer sites where they will attach them to employee pay-stubs and distribute on pay day.	Mid September 2021	
Pick up surveys	Review survey results	September 30, 2021 October 1, 2021	
Review final capstone results	Determine if employees are current clients or how likely they will apply after reading the flyer. Based on survey results.	October 8, 2021	Victor Longoria

Appendix B

WE OFFER SERVICES FOR CASH ASSISTANCE, CALFRESH FOOD ASSISTANCE AND MEDI-CAL ASSISTANCE

OFRECEMOS SERVICIOS DE ASISTENCIA MONETARIA, ALIMENTARIA (CONOCIDO COMO ESTAMPILLAS PARA COMIDA) Y ASISTENCIA DE MEDI-CAL

5 WAYS TO APPLY
5 MANERAS DE APLICAR

- 1) ONLINE/EN LINEA:** WWW.C4YOURSELF.COM OR WWW.GETCALFRESH.ORG
- 2) PHONE/POR TELEFONO:** 1-877-410-8823
- 3) FAX:** 831-784-5691
- 4) MAIL/POR CORREO:**
MONTEREY COUNTY DEPARTMENT OF SOCIAL SERVICES
1488 SCHILLING PL
SALINAS, CA 93901
- 5) OFFICE & DROP BOX LOCATIONS/ UBICACIONES DE OFICINAS Y BUZONES:**
Salinas: 1000 S MAIN STREET SUITE 216
Seaside: 1281 BROADWAY AVENUE
King City: 116 BROADWAY STREET

YOU CAN ALSO UPLOAD YOUR DOCUMENTS/TAMBIEN PUEDE ENVIAR SUS DOCUMENTOS: www.dssupload.com

ASSISTANCE FROM MC-CHOICE OUTREACH STAFF ALSO AVAILABLE/ PERSONAL DE MC-CHOICE TAMBIEN ESTAN DISPONIBLES: 1-866-361-0477

DUE TO THE HEALTH PANDEMIC AND YOUR SAFETY IN PERSON INTERVIEWS ARE LIMITED. WE ENCOURAGE YOU TO APPLY ONLINE, BY PHONE OR MAIL.

DEBIDO A LA PANDEMIA DE SALUD Y SU SEGURIDAD, ENTREVISTAS EN PERSONA SON LIMITADAS. SE RECOMIENDA APLICAR EN LINEA, POR TELEFONO O CORREO.



Based on the flyer we attached, we would like to hear back from you!
¡Según el volante que adjuntamos, nos gustaría saber de usted!

Do you use our services for Cash Assistance, Cal Fresh Food Assistance or Medi-Cal?
¿Utiliza nuestros servicios para Asistencia en efectivo, Asistencia para alimentos frescos de Cal o Medi-Cal?

Yes/Sí
 No

Would you consider getting more information on the programs?
¿Consideraría obtener más información sobre los programas?

Yes/Sí
 No

Would you like to apply for these programs, or other programs we offer?
¿Le gustaría postularse para estos programas u otros programas que ofrecemos?

Yes/Sí
 No

Did the flyer have useful information that you will use or share to others?
¿El volante tiene información útil que usará o compartirá con otros?

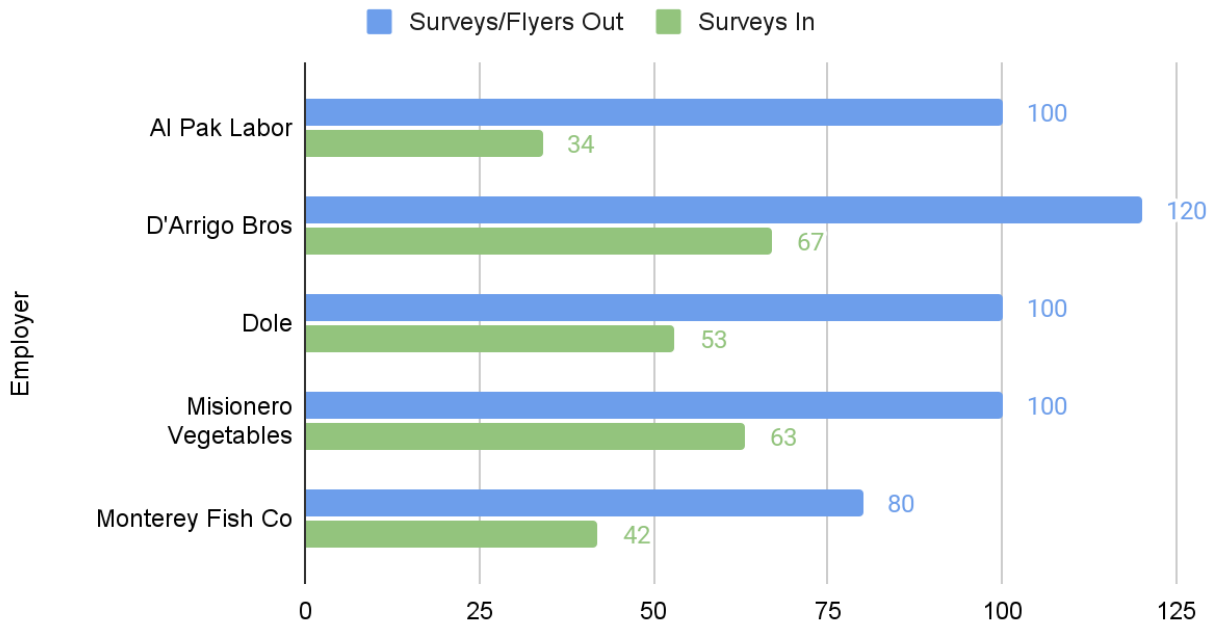
Yes/Sí
 No

How likely are you to reach out to us and apply? Scale, 5 being the highest 1 2 3 4 5
¿Qué tan probable es que se comunique con nosotros y presente una solicitud? Escala, siendo 5 la más alta 1 2 3 4 5

1
 2
 3
 4
 5

Appendix C

Outreach Survey Intake



Outreach Survey Results

