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Jennifer Berberian

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Developing a Mental Health Program for Unhoused Women on the Monterey Peninsula Gathering for Women

Mentor: Staci Alziebler-Perkins

Collaborative Health & Human Services

Department of Health Human Services and Public Policy

California State University, Monterey Bay

By: Jennifer Berberian

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Abstract

Gathering for Women of Monterey provides resources for women facing homelessness.

Often, severe mental illness prevents unhoused women from seeking, obtaining, and sustaining

permanent housing. This capstone aimed to bring a mental health clinician to Gathering for

Women's day center. Letters requesting mental health professionals to offer services at

Gathering for Women were sent out to 23 mental health agencies and providers in the Monterey

area to recruit a mental health provider to offer counseling to guests once weekly. The objective

was for the Gathering for Women to provide an array of services that would be beneficial to the

guests and that offering these services at the Gathering for Women would make it easier for the

women to receive mental health treatment.

Keywords: Mental Health, Unhoused Women, Monterey Peninsula, Housing Barriers

Developing a Mental Health Program for Unhoused Women on the Monterey Peninsula Agency & Communities Served

Gathering for Women (GFW) is a day center that serves the unhoused women on the Monterey Peninsula. GFW offers daily meals, case management, showers, clothing closets, and personal hygiene products. The mission of GFW is to provide homeless women on the Monterey Peninsula with supportive resources and a caring community.

Most of the women who come to GFW for services lack permanent housing. Many of them sleep in their cars or tents. GFW collaborates with many other agencies on the Monterey Peninsula that support the unhoused people who reside there. Other supportive agencies include the Monterey Police Department, Community Hospital of the Monterey Peninsula, Monterey County Food Bank, Interim, and the Community Action Partnership.

Problem Description

Many women who frequent the Gathering for Women have untreated mental health issues. Some unhoused women on the Monterey Peninsula have mental health illnesses preventing them from obtaining permanent housing. These guests would benefit from mental health resources and a mental health provider that offers individual counseling at the day center weekly. Untreated mental health issues are a barrier to obtaining permanent housing for the women. When their mental health is so depleted, it is nearly impossible to do all the footwork that finding and securing permanent housing takes. Providing mental health services may help the women improve their mental health issues so that they can find and secure permanent housing.

The goal is to make mental health services more available for the women who come to Gathering for Women. This project aims to offer onsite mental health services for the women

who come to Gathering for Women. The guests would have a mental health provider to speak with weekly. The benefits of mental health counseling and resources can be life-changing for the women at GFW. When the women work on healing their minds, they can be free from the mental issues that corrupt their daily lives. Having a mental health provider come to the GFW weekly will make it easier for the women to access mental health services. The agency will be helping the women with one of the main barriers that keep them from being housed.

Contributing Factors

Stress

Being homeless is stressful. In addition to the stress from being unhoused, individuals who experience homelessness are prone to additional stressors that lead to mental illness. These stressors include fear of physical, sexual, or emotional assault, isolation, damaged relationships, poverty, and food insecurity (Fitzpatrick, 2016). Unhoused individuals have higher rates of being victims of assault and witnessing assaults on other unhoused individuals (Lee et al., 2017). Experiencing these acts of violence leaves unhoused individuals with anxiety and fear for their safety and the safety of those around them. Living in a constant state of worry and fear can cause damage to a person and potentially lead to mental health problems.

Trauma

Not having stable housing is traumatic. Those who experience homelessness face daily challenges that are traumatic for them. They may lose all their belongings or have to adjust to sleeping outside or in a crowded shelter. According to the Substance Abuse and Mental Health Service Administration (SAMHSA) unhoused women may have trauma that comes from psychological, physical, or sexual abuse (SAMHSA, 2021). Single mothers who are unhoused are experiencing post-traumatic stress disorder, depression, and substance abuse disorder at

higher rates than those who are housed (SAMHSA, 2021).

Unhoused individuals are often stigmatized, resulting in a traumatic experience that can cause fear and anxiety. According to the SAMHSA,

Within the larger society, people experience homelessness often are marginalized, isolated, and discriminated against. Additionally, they are highly vulnerable to violence and victimization, and re-traumatization becomes a distinct possibility. Given these concerns, it is important to understand the linkages between trauma and homelessness, and the impact on ensuring quality care. (SAMHSA, 2021).

Substance Abuse

Studies have shown that substance abuse disorder can cause homelessness and complicates finding permanent housing (Polcin, 2016). According to the National Institute of Health, research consistently shows that over one-third of unhoused individuals experience substance abuse disorder (Polcin, 2016). Studies show that few services meet the needs of the unhoused population who are experiencing substance abuse disorder. Substance abuse treatment, permanent housing, and mental health services are notably lacking.

Consequences

Deteriorating Physical Health

Stress can lead to deteriorating physical health. Small amounts of stress are normal, but chronic stress has serious adverse effects on a person's body. According to the American Psychological Association (2018), stress affects the body, including the respiratory, musculoskeletal, endocrine, gastrointestinal, cardiac, reproductive, and nervous systems.

Chronic Homelessness

Trauma is linked to chronic homelessness. According to research, individuals who

experience homelessness battle trauma due to a history of being victimized multiple times (Hernandez et al., 2020). Women who experience homelessness have a tripled probability of being victims of sexual violence (Hernandez et al., 2020).

Problem Model

CONTRIBUTING	HEALTH/SOCIAL	CONSEQUENCES	
FACTORS	PROBLEM		
Stressful life situations	Many unhoused women	Deteriorating Physical	
	on the Monterey	Health	
Trauma	Peninsula have mental	Chronic Homelessness	
	health illness that is		
Substance Abuse	preventing them from	Poverty	
Disorder	obtaining permanent		
	housing		

Capstone Project Description and Justification

Capstone Project and Purpose

The purpose of this capstone project is to provide the guests who visit the Gathering for Women with access to a mental health professional for one on one counseling and other mental health services. Since many of the women have mental illness, it would make it much easier for them to receive mental health treatment if they were able to receive the treatment at the Gathering for Women day center. The Gathering for Women can become offer an array of services to the clients including mental health treatment.

Project Justification

Most of us have seen someone standing on a street corner yelling obscenities into the airbut have we ever thought about how we can help that person? The U.S. Department of Housing and Urban Development (U.S. HUD, 2018) reported that on any given night, roughly 553,000 people experienced homelessness across the United States; 65% of these homeless stayed in shelters or emergency facilities and 35% of these homeless stayed in unsheltered locations, such as abandoned buildings or places unsuitable for human habitation. Homelessness, as defined by U.S. HUD (2018), is when a person does not have a fixed, regular, or adequate residence for the nighttime. U.S. HUD (2018) also estimated that 20.1% of these homeless individuals are also living with serious mental illnesses.

Project Implementation

The Letter

The first part of implementation process consisted of researching mental health providers in Monterey County. I did a Google search for providers in the Monterey County area. I found 25 mental health providers that I thought may be able to collaborate with Gathering for Women. My mentor approved my list before I sent out the letter. The letter was a professional document that stated that the Gathering for Women was looking for a mental health clinician to collaborate with at our day center. I mailed the 25 letters on March 17, 2022.

The Survey

The second part of my implementation was surveying the guests. I created a survey on Google Forms. I ended up printing the surveys to have the women manually fill them out since there is only one computer in each building. This made is easier to collect more surveys. The survey consisted of 13 questions. The first question was age. This is important because many of

the guests are senior citizens and I wanted to make sure to capture this demographic. I asked them how their mental and physical health was currently and within the last month. I asked them if they have ever been diagnosed with a mental illness or if they have family members with mental illness. When asked how they would rate their overall mental health, almost half of the women said somewhat poor. When asked if they have experienced problems with their daily life in the past 4 weeks due to emotional problems, such as feeling depressed, sad, or anxious, 81% of surveyed participants said yes. When asked how often their mental health affected their ability to get daily tasks done in the past 4 weeks, almost half of the women surveyed said very often. When asked if they have ever been diagnosed with a mental illness before over half the women said yes or they were not sure. 60% of surveyed participants have mental illness in their families. 70% of the women have seen a mental health provider in the past and 78% of the women surveyed are currently on medication for mental illness. I asked the women if they wanted to share anything else. One of the women told me that she has a stalker that causes her stress. Another women told me that her life is hard with not many friends or family. She said she felt helpless at times and that she feels suicidal most days.

Assessment Plan & Expected Outcomes

The Gathering for Women collects data on all the services that are provided to the women at the day center. When the clients have visits with the mental health provider, this will be documented in Penelope, the software that the agency uses to capture data. The number of times that the guests visit with the mental health clinician will be collected in order to see how many women are using this resource. The plan can also be assessed by surveying the women and asking them if their mental health has improved due to having regular visits with a mental health clinician.

The expected outcome of this capstone project is for the women to utilize the mental health program. It is expected that 2-6 women will come to the day center each week to have a one on one visit with the mental health clinician. The women will be able to be connected to other resources to help with mental illness through the provider as well. The plan to assess the outcome of this capstone project will take place after I leave the agency. This is due to the shorter amount of time that was available to carry out this project.

Project Results & Recommendations

The results of this capstone project are that there is a need for mental health services and not enough mental health providers and resources available in Monterey County. I received one response from the 25 letters that I mailed out. The response I received was from a representative from the Monterey County Rape Crisis Center (MCRCC). The email stated that MCRCC was not able to collaborate with the Gathering for Women at this time. The email stated the following:

I received your letter addressed to the Monterey County Rape Crisis Center (MCRCC) requesting a partnership to have a therapist at your location one day per week. I am sorry to say that MCRCC will not be able to partner in that respect at this time. We currently have 8 therapists on staff, all of them are at full capacity, and our existing waiting list is about 40 people - all of whom are waiting an average of 2 months to be seen. If you are looking to hire someone I have a few people who might be interested in working for GFW one day per week who are already licensed and have their own practices. Another option might be to partner with Monterey County Behavioral Health who would be able to connect your guests with other resources within the county. For example, a Monterey County Behavioral Health therapist would be able to make a referral to a MCBH

psychiatrist more easily than we would at MCRCC. I'm sorry that we cannot be of more help. (MCRCC, 2022).

A letter was sent to Monterey County Behavioral Health on March 17th. At this time the agency has not received a response from them or from any of the other agencies that I contacted.

Conclusion

This capstone project has proven that more mental health resources are needed. There are clearly not enough resources for all the members of our community. Gathering for Women, and other agencies need to be sure to continue to advocate and push for mental health programs.

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