The Mental Health of Children and Their Families Living in HOPE SF Communities

A project of Health Equity for HOPE SF

Partners:

HOPE SF Sites:

Alice Griffith
Hunters View
Potrero Terrace &
   Annex
Sunnydale

Purpose:

To explore opportunities & barriers to supporting the mental health of children and their families living in the HOPE SF sites.

This assessment was conducted by SFSU Master of Public Health students and faculty as part of a practice-based course. For more information:

hopesfsu@sfsu.edu
healthequityinstitute.org

What We Wanted to Find Out:

- How are mental health issues expressed, how do residents cope and who do they trust and talk to?
- What are the weaknesses & strengths of current services?
- How can new strategies foster nurturing family relationships?
- What community wide efforts can be used to support mental health?
- How can sustainability of strategies and programs be ensured?

What We Did:

Assessment Planning (Dec 2012 – Jan 2013)

Literature Review (Feb - April 2013)

Read 200 articles and reports about mental health issues of children and families living in public housing across the United States

Interviews/Listening (April – June 2013)

Develop Findings & Recommendations (July 2013)

Who We Listened To:

➤ **30** Residents

Age	Gender	
23 – 70 yrs	7 Male	23 Female

Sites	Ethnicity
5 Alice Griffith	44% African American
6 Hunters View	13% Latino
14 Potrero	7% Samoan
5 Sunnydale	36% others

➤ **23** Mental Health Program Staff
➤ **28** Key Stakeholders

Organizations	
City Agencies	**Community Based Organizations**
Public Health	Mental Health providers
Human Services & First 5	Youth Development
Police & Probation	Housing
Mayor's Office	Family Support
Economic & Workforce Dev.	Community Development

What We Found Out:

Mental Health Issues in HOPE SF Communities

1. Violence and lack of safety cause severe ongoing fear, stress and mental health issues for families.

Children and Families Coping with Mental Health Issues

2. Violence and fear force many residents to remain indoors and become isolated.
3. Violence and "acting out" may also be a reaction to stress. Distrust of police is common.
4. Substance use can be a form of coping and it contributes to safety and community concerns.
5. Meeting basic needs and dealing with stress get in the way of family building activities and self-care.
6. Community building activities provide support and relief from stress. Residents want more.
7. Activities outside the neighborhood provide relief from stress, fear and violence.

Access to Services

8. Access barriers may cause families to only seek care in a crisis. Many more families need support.
9. Effective programs are in tune with HOPE SF residents. But, there are few trusted programs.
10. Services are often not trusted and are seen to be uncoordinated and only temporarily available.
11. Distance to mental health services and transportation challenges make services hard to access.
12. Stigma about mental health and fear of family separation prevent some families from getting care.
13. Safety concerns prevent residents from accessing care and affect staff well-being and their work.

Funding

14. Lack of flexible funding, a short-term view and historic disinvestment harm HOPE SF sites.

What We Recommend:

Big Picture

1. Prioritize addressing violence and provide support when violence happens.
2. Long term, sustained investment in comprehensive, coordinated and flexible services are needed.

Community Engagement

3. Support community building activities. Create safe spaces for families.
4. Support outreach about mental health services and demystify mental health care.

Program Staff

5. Address program staffing issues that impact resident access and staff effectiveness.
   - Hire staff who understand community experiences and are sensitive to cultural norms.
   - Ensure consistent staffing and minimize use of temporary staff and interns.
   - Support staff emotional well-being and provide trauma related training.

Community Services

6. Support peer-to-peer mental health activities including peer navigation and community building.
7. Develop an on-site, inclusive Community Center that provides "embedded" mental health services.

Individualized Services

8. Provide case management to all HOPE SF families in need to promote sustained mental health.