FY11 United Way End-Year Report

Program: Individual Counseling for Low-Income Women

Agency: The Women's Initiative
Date: July 29, 2011

As a reminder, The Women's Iniative runs its programs on the calendar year. In addition to 2010 totals, this report offers the latest numbers from January 1– June 30, 2011.

1. **For the current funding period, please highlight your program's goals, activities and results, noting any changes to your original plan/proposal. Include any relevant budget and/or financial information. Limit your response to no more than one page.**

Program goals, activities and results for our *Individual Counseling Program for Low-Income Women* have remained the same.

In 2010, our goal was to reach 160 women through individual counseling – we served 195. One-hundred eighty one of these women resided in the United Way service area. In 2011, we increased our goal to serving 240 women. This increase reflects our agency's commitment to respond, very proactively and aggressively, to the increasing demand for affordable mental health services in our community.

In the first two quarters of 2011, we have served 142 women in individual counseling and support groups. Fifty-three women carried over from 2010, 60 women were new counseling clients, and 29 women have participated in our support groups which include: Grupo de Apoyo, "Treat Yourself Right" Support Group, and Postpartum Support Group.

As previously noted, The Women's Initiative is electing to offer a growing number of support groups. Groups are facilitated by TWI counselors and offer a therapeutic alternative for women who are on our waitlist or who might benefit from connecting with others who are struggling with similar psychiatric issues. At the moment our waitlist is extremely long with more than 60 women awaiting counseling services. We are doing everything possible to increase capacity, so women in need of counseling can receive services in a timely fashion.

Our agency is pleased to report increasing diversification in our funding sources. Primary revenue sources in 2010 were as follows: 54% individual donations, 9% events, 22% grants, 11% in-kind contributions, and 4% fees for services. Because an increasing number of women are accessing counseling & support group services at the very bottom of our sliding scale ($5 per session), funding from individual donors, foundations/corporations and grants is essential.

2. **Please share a success story from your program. We are especially interested in stories that show a long-term impact on a person and families that show collaborations or referrals to other agencies.**

A young mother in her early twenties was referred to The Women's Initiative for individual counseling sevices by the Department of Rehabilitation Services. She had

recently lost her job and her health insurance, and the financial pressures at home were mounting. She was struggling with severe anxiety and addiction to prescription pain medications. Intensive counseling and wellness workshops helped this woman regain her self-confidence and take the needed steps to regain equilibrium both emotionally and financially. She has recently landed an entry level position that also includes benefits for the client and her child. She is taking care of herself and is on the path to a brighter future.

Referral sources continue to be notably diverse. Medical professionals, program partners and friends/family continue to be our greatest referral sources. Program partners include a wide range of entities such as Children Youth & Family Servies, Charlottesville Free Clinic, UVA Northridge, OAR, Probation & Parole, Martha Jefferson Hospital and Jefferson Area CHIP. Recent in-kind advertising, made possible through Monticello Media, has also enabled us to broaden our reach and ensure that women throughout Charlottesville and Albemarle are aware of our services.

3.Complete the following Outcome Measurement update (based on your application for funding) for the fiscal year.

Projected Number of Intended FY10/11 Primary Beneficiaries:
160 (2010)/ 240 (2011)

Actual Number of Primary Beneficiaries:
195 (2010)/ 142(2011 to date)

Projected FY11 Outcomes	FY11 Indicators Tracked	FY11 Outcome Results (provide specific numbers and percentages)
Outcome #1: Provide counseling services to an increasing number of low-income women who are suffering from anxiety, depression, and other mental disorders. The target for the indicators listed to the right were A) 80% and B) 85%.	The indicators tracked for **Outcome #1** were A) percentage of low-income women served and b) percentage of uninsured/underinsured women serve.	**In 2010,** 78% of women served were low-income. Women defined as low-income have household incomes at or below 200% of the poverty guidelines as established by the United States Department of Health & Human Services. 85% of the women served were uninsured/underinsured. **Thus far in 2011**, 85% of the women served have been low-income and 82% are either uninsured or on Medicaid.
Outcome #2: Have a high percentage of women who have attained a strong & healthy sense of mental well-being when therapy is complete. The target for the indicators listed to the right were: A) 80% B) 95%	The indicators for **Outcome #2** were A) significantly decreased and/or elimination of symptoms and B) attainment of tangible tools to combat stress on a daily basis.	**In 2010,** approximately 76% of the women served experienced significantly decreased and/or elimination of symptoms and 91% of our clients attained tangible tools to combat stress on a daily basis. **Thus far in 2011,** percentages for both of these outcome measurements have remained steady.

Projected FY11 Outcomes	FY11 Indicators Tracked	FY11 Outcome Results (provide specific numbers and percentages)
Outcome #3: Have a high percentage of women who honor their commitment to counseling by showing up for their scheduled appointments. The target for the indicators listed to the right were: A) 50% B) 20% C) 30%	The indicators for **Outcome #3** were: A) Percentage Honored B) Percentage Rescheduled C) Percentage No-Shows	**In 2010**, 96% of our appointments were either honored or rescheduled, with only a 4% no-show rate. **Thus far in 2011,** 86% either honored or rescheduled prior to 24 hours, 10% rescheduled within 24 hours or no-showed, and 4% were cancelled due to weather by TWI.
Outcome #4: Provide a wecoming and compassionate environment for women seeking counseling. The target for the indicators listed to the right were: A) 95% B) 95%	The indicators for **Outcome #4** were: A) A non-clinical setting B) A knowledgeable, supportive staff	**In 2010,** 96% of clients surveyed reported both a non-clinical setting and a knowledgeable, supportive staff. **Thus far in 2011,** 100% of the women served have indicated that we provide a healing, non-clinical setting and 95% experienced a knowledgeable, supportive staff.
Outcome #5: Track client progress through the use of *My Outcomes* software from initial appointment through termination. The 2010 target for the indicators listed to the right were: A) 85% B) 85% C) 85% D) 85%	The indicators for **Outcome #5** were: A) Increased sense of personal well-being B) Improved interpersonal relationships C) Improved social interaction D) Increased overall sense of well-being	For those clients who completed counseling in **2010**, 81% experienced an increased sense of personal well-being, 79% saw improved interpersonal relationships, 70% had improved social interaction and 79% experienced an increase in overall sense of well being. **Thus far in 2011,** outcomes measurements in these four categories have remained steady.

4. **Impact Report**. We are looking for issues and statistics specific to our local area; you are also welcome to include some general issues that set the framework for the local statistics. Under the Actual Results heading, we are looking for impact, especially long-term results, not just numbers served. For the Financial Impact section, have each example highlight a different thing (in other words, don't just multiply the first answer three more times).

Community Needs or Issues Your Program Addresses -- please include at least 3 local issues/statistics and cite your source

Access to basic mental health services for uninsured & underinsured women in our community continues to be extraordinarily limited. In the past two years, dramatic cutbacks in

mental health services for the moderately mentally ill at Region Ten and the closing of FOCUS' counseling program have further reduced access. The continuing financial pressures faced by low-income women and their families as a result of the current economic climate have also resulted in increased incidences of mental distress and violence. TWI is frequently the *only* resource available to these at-risk women. While progress is being made to coordinate efforts and eliminate gaps in services through our involvement in the Community Mental Health & Wellness Coalition, the circumstances continue to be dire. (This coalition includes representatives from 20+ entities such as Charlottesville Free Clinic, Region Ten, University Medical Associates, OAR, and AIDS/HIV Services Group). Quotes from this coalition that continue to illustrate local need:

- *Community members with moderate mental health symptoms are transitioning into serious symptoms due to lack of services.*
- *The situation is forcing people to self-medicate with illegal drugs.*
- *Available mental health care is extremely limited. Barriers include… long waiting lists, affordability, and communication difficulties.*

We are encouraged by the potential impact that the Mental Health & Wellness Coalition's collaborative efforts will have on the continuity of care for adults in our community. Towards this end, The Women's Initiative's Executive Director is playing a lead role on the coalition's Steering Committee and is also serving as Chair of their Resource Committee.

Your Program's Solutions that United Way Community Impact Funds Support

Actual Results - *based on your stated outcomes; please use percentages and numbers served to help show* outcomes

Specific percentages for each of our stated outcomes appear in the previous table. In addition to those statistics, we share the following.

In 2010, the majority of women served were low-income and uninsured. Approximately 47% were unemployed. Depression, anxiety and adjustment disorders were the top diagnosis with trauma from past emotional and physical abuse being a common thread. Predominant symptom severity was moderate to severe. Approximately 73% of women completed their therapy in 12 sessions or less. An additional 13% completed their counseling in 13-24 sessions, and approximately 14% concluded therapy in 25+ sessions. Our clinical team continues to receive training in brief-treatment models and strives to serve approximately 88% of women in 12 or fewer sessions. We anticipate that this percentage will fluctuate annually depending on the diagnosis and symptom severity of our client caseload.

Thus far in 2011, the majority of women served have been low-income, uninsured, and unemployed. Depression and adjustment disorders have been the top diagnosis with anxiety and PTSD also being prevalent. Diversity continues to grow: 50% Caucasian, 13% African American, 30% Hispanic, 1% Asian, and 6% Unknown/Other. Ages ranged from 18-65+, with approximately 70% of the women falling between the ages of 18-45. The majority of women have been single, separated or divorced. Approximately 58% are mothers with 1-4 children. 57% have not attained college degree. 73% reside in Albemarle County and the City of Charlottesville. Our geographic reach currently extends to the following counties as

well: Amherst, Fluvanna, Greene, Louisa, Madison, Nelson, Culpepper, Rappahannock, and Orange.

Financial Impact of Donations:

The impact of United Way donations cannot be overstated. Because of your generosity and belief in our programs, we have been assured that critical monthly funds in support of our *Individual Counseling Program for Low-Income Women* have been in place. Furthermore, we have found that other supporters in the community, both individual and corporate, recognize the caliber of your vetting process. We frequently received inquiries as to whether or not we receive funding from the Thomas Jefferson Area United Way, and our response is always an enthusiastic and honored YES.