Openhouse Community Engagement Program: A community-based participatory evaluation

THE CLIENT
Openhouse: Housing, Services, and Community for LGBTQ Seniors
San Francisco, California

THE CHALLENGE

HMA Community Strategies (HMACS) worked with Openhouse, which enables San Francisco Bay Area LGBTQ seniors to overcome the unique challenges they face as they age by providing housing, direct services and community programs.

HMACS provided a local evaluation of Openhouse’s Community Engagement Program, as part of the California Reducing Disparities Project (CRDP). The Openhouse Community Engagement Program is a holistic and comprehensive prevention and early intervention program that aims to reduce and prevent social isolation and loneliness, as well as the symptoms related to depression, anxiety and long-standing trauma for LGBTQ older adults. The evaluation focused on Openhouse’s three strategies, all interwoven as a program to allow for multiple points of entry, including emotional support programs and social engagement wraparound programming.

CRDP is a statewide policy initiative that was launched under the Office of Health Equity to identify solutions for historically unserved, underserved and inappropriately served communities. This cutting-edge, competitive statewide grant program seeks to recognize and elevate community mental health practices and identify strategies for systems change.¹ CRDP is designed to fund community-defined, evidence-based practices and pair them with rigorous evaluation to create an evidence base for their effectiveness.

THE APPROACH
HMACS and Openhouse partnered to pursue the CRDP grant opportunity to reduce mental health disparities in minority communities and complete required program evaluation. HMACS advised Openhouse on the grant program, worked with Openhouse to develop a proposal strategy, wrote the required evaluation plans and eventually secured $1.2 million in funding for the project. Now in 2019, in the third year of the project, HMACS is working closely with leadership and staff at Openhouse to carry out the project. HMACS has provided a breadth of services to support the implementation of the evaluation, including creating all of the evaluation survey instruments, advising on and convening a community advisory board, piloting the survey instruments, creating a database, training staff on data collection, storage, and

¹ California Department of Public Health, California Reducing Disparities Project, 2018.
https://www.cdph.ca.gov/Programs/OHE/Pages/CRDP.aspx
human subjects’ protections and handling all Institutional Review Board (IRB)-related tasks. This work will continue until 2021.

The Openhouse evaluation design and implementation has been guided by a community advisory group. HMACS and Openhouse periodically convene this advisory group, comprised of community members, in order to provide input into the evaluation design and questions, data collection methods and protocols, and to provide input into emerging findings, as they are available, to ensure validity. In year one, the advisory group participated in reviewing and editing instruments developed by the statewide evaluator and in the design of the local evaluation, including four survey instruments.

The Community Engagement Program evaluation includes both qualitative and quantitative methods. Quantitative data is analyzed using rigorous analytic methods, using Stata for inferential analysis and descriptive analyses such as participant demographic description, participation, and program monitoring and Excel for descriptive analyses. Analyses include an exploration of differences in outcomes by demographic, mental health at entry into the Community Defined Evidence Project (CDEP), dosage, type of services utilized and other variables. The analysis depends heavily on instrument design and the guidance of the advisory group, and the regression and variant analysis is driven by the priorities of the population as decided by the advisory group.

The inferential analyses conducted include regression modeling to test the impact on mental health, quality of life, social connectedness and other dependent variables relative to several independent variables. Additionally, simple t-tests and other tests of significance were used to explore changes by comparing pre- and post-program data. Qualitative methods include transcription, coding (manually and using NVivo) for themes, and interpretation of findings in conjunction with Openhouse staff and the community advisory group were also conducted.

THE RESULTS

In 2019, the third year of collaboration on a five-year evaluation, HMACS is in the midst of its work to measure the effectiveness of Openhouse’s Community Engagement Program. At the end of this five-year project, a final report will be developed, findings and the basis for a replicable model will be shared, and there will be an initial evidence base that will make the previously marginalized programs eligible for mainstream mental health funding.