

# Commitment to Health at Covenant House: Improving Health and Wellness of Unhoused Youth in New Orleans

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## BACKGROUND

In 2012, the U.S. Department of Housing and Urban Development altered the definition of homelessness, expanding the definition to encompass those who are “living in a place not meant for human habitation,” which includes individuals and families who struggle to remain in stable and safe, permanent housing environments. After Hurricane Katrina in 2005, the rate of homelessness in New Orleans drastically increased; some residents were displaced and without homes for a short period of time, while others have experienced chronic homelessness ever since due to the aftermath of the hurricane. As Hurricane Ida struck Louisiana on August 29, 2021, the sixteenth anniversary of Hurricane Katrina, ending homelessness still remains a major public health issue in the city of New Orleans. As of January 2020, 3,173 people experienced homelessness in Louisiana on any given day, with 246 of those individuals identified as unaccompanied young adults between the ages of 18 and 24.

Addressing the various health needs of the homeless population is integral due to their status as a vulnerable population with increased risk for medical hospitalizations, hypertension and diabetes, Hepatitis C, mental health concerns, sexually transmitted illnesses, substance use, COVID-19, and a myriad of other conditions and illnesses. The unhoused youth population is also more likely to have poor diet quality and nutritional status in addition to low self-esteem and low self-efficacy due to a variety of structural and social inequities. This population also has been shown to lack adequate access to quality, equitable health care treatment. The goals of this community project were to be a source of knowledge, resources, and opportunity regarding healthy lifestyle behaviors in the sectors of mental and physical health. The primary goals of this service-based program are to analyze and address barriers to healthy lifestyle behaviors among youth impacted by homelessness in New Orleans and to improve health knowledge, health habits, self-efficacy, and health outcomes within this community. Improving the health and wellness of unhoused youth in New Orleans is extremely important in the effort to enhance health equity and access among vulnerable groups and underserved communities

Covenant House in New Orleans provides comprehensive services to more than 900 individuals each year for at-risk youth ages 16-22 years old, offering supportive housing, health resources, and educational and vocational services. Covenant House is not only a shelter for homeless youth, it serves as a source of protection, safety, and stability for young people in crisis. They assist all young people in making positive decisions about their future by providing guidance, education, and resources. The programs and services offered are characterized into 4 major groups: 1) 24/7 care center and stable housing, 2) education, employment, and life skills, 3) health and wellness, and 4) outreach. Covenant House provides both physical and behavioral health services to promote wellness among residents; they promote wellness as a positive, affirming multi-dimensional and holistic process that encompasses lifestyle, mental and spiritual well-being, and the environment.

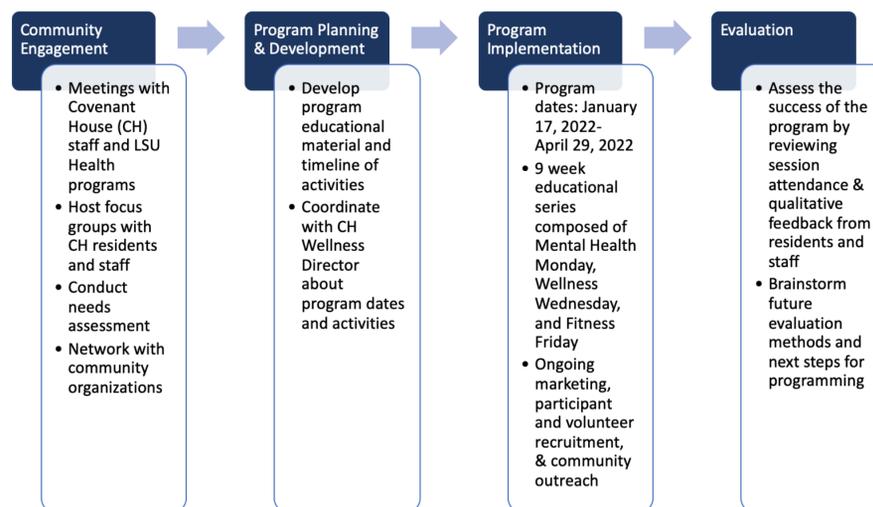


## OBJECTIVES

- To collaborate with various interprofessional health-related programs to provide educational workshops and interactive sessions regarding mental and physical health and wellness
- To identify and analyze barriers to healthy lifestyle behaviors among youth impacted by homelessness
- To provide educational information and resources regarding health and wellness, specifically mental and physical health
- To measure the efficacy of educational workshops and interactive sessions using postworkshop questionnaires
- To improve self-esteem and self-efficacy of unhoused youth
- To improve understanding of mental and physical health among unhoused youth
- To improve ability to practice self-care and mental health among unhoused youth
- To improve ability to practice nutritional health among unhoused youth

## METHODS

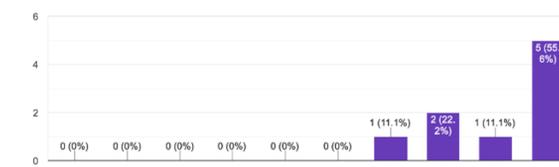
- Two focus groups were held at Covenant House to assess the current attitudes, health perceptions, and needs of the youth residing at or receiving services from Covenant House
- The originally-developed program was scheduled as a 10-week education series; it was reduced to 8 weeks due to COVID-19, weather, and external social factors
- The bi-weekly sessions were held on Monday, Wednesday, and Friday evenings
  - Mental Health Monday
  - Wellness Wednesday
  - Fitness Friday
- Community-based participatory research is the underlying scientific approach utilized in Commitment to Health at Covenant House
  - This is a collaborative process that engages community members, employs local knowledge in the understanding of health problems and the designs of interventions, and invests community members in the processes and products of research



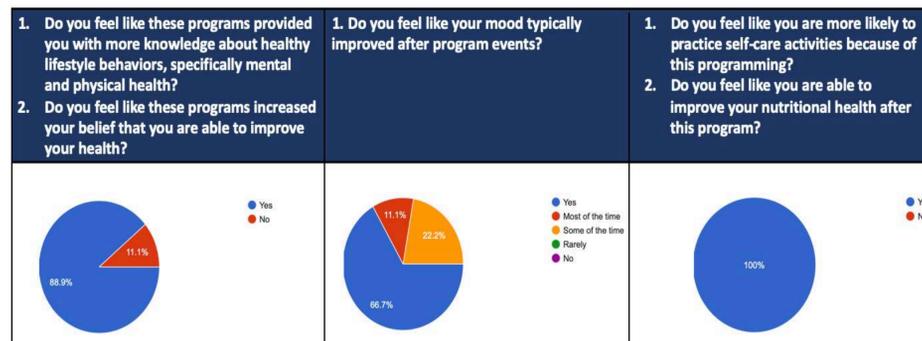
| Program Implementation Timeline                                 |  |   |   |
|---|--|---|---|
|   | Mental Health Monday   | Wellness Wednesday  | Fitness Friday  |
| January 17-21, 2022<br>"New Year, New Me"                       | Setting Health Goals in the New Year   | Nutrition in the New Year                                 | New Year's Dance Party with NFL Cheerleaders          |
| January 31- February 1, 2022<br>"History's Impact on Health"    | Coping Mechanisms and Dealing with the Past  | Understanding our History & Social Determinants of Health | Trauma-Informed Yoga with Magnolia Yoga Studio        |
| February 14-18, 2022<br>"Love Yourself"                         | Valentine's Day--Self-Love Edition   | Healthy Heart, Happy Heart                                | HIIT Fitness Class (rescheduled due to parade)        |
| February 21-25, 2022<br>"Mardi Gras & Medicine"                 | Mood and Mardi Gras; Carnival and COVID (combined session)                                     |   | Second-line dance class (cancelled due to Mardi Gras) |
| March 14-18, 2022<br>"Eat Healthy, Sleep Well, Relax... Repeat" | Eating Healthy: Foods that Improve Mood  | Sleep Hygiene and Management                              | Outdoor Pet Therapy                                   |
| March 28- April 1, 2022<br>"Spring into Wellness"               | Connecting to Nature and the Community   | How to Promote a Healthy Environment                      | Football and Fun on Lake Pontchartrain                |
| April 4-8, 2022<br>"Sexual Health Awareness"                    | Healthy Relationships  | Safe Sex Practices  | Walking for Wellness                                  |
| April 18-22, 2022<br>"Building Healthy Behaviors"               | Personality, Behavior, and Conflict Management   | Substance Abuse   | HIIT Fitness Class                                    |
| April 25-29, 2022<br>"The Finale"                               | A Final Discussion and Set of Activities focused on the Commitment to Health at Covenant House |   |   |

## RESULTS

Qualitative feedback displayed that residents felt as though they learned information that they originally did not know about and that they enjoyed activities where they were able to create artwork or yoga. The themes of what was most enjoyable about the program include talking with people, getting information about mental and physical health, in addition to how the staff, volunteers, and facilitators interact with the residents. Residents described that they could trust staff and volunteers with content discussed and that they appreciated their sense of freedom and being treated like an adult. Another common theme is a feeling of support; residents mentioned that programs provided them an opportunity to heal, a chance to become the best version of themselves, and the feeling of having a second family and that people care about them. The residents who rated the Commitment to Health at Covenant House programming reported that they enjoyed the sessions overall.



There were 19 sessions offered throughout the duration of the program. In total, Commitment to Health at Covenant House wellness programs had 187 people in attendance, including residents who repeatedly joined sessions. Mental Health Monday programs had 95 attendees, Wellness Wednesday programs had 56 attendees, and Fitness Friday had 36 attendees. Several external factors also contributed to attendance levels on the various days, so this evaluation measure was not optimal.



## CONCLUSIONS

Commitment to Health at Covenant House has been a program that has been well-received and supported by residents and staff at Covenant House. The program was planned, developed, implemented, and evaluated with continuous, equitable input from the involved community members. Throughout the program, there was collaboration between Covenant House and various organizations, which led to the successful delivery educational sessions and interactive activities. First and foremost, the Covenant House staff were incredibly supportive and helpful in providing insight and guidance throughout the program planning, development, implementation, and evaluation phases. Some LSU Health New Orleans School of Medicine interest groups that helped to support the goals of the program were the Student National Medical Association, the Latino Medical Student Association, Cardiology Interest Group, Medicine in Motion, Mindfulness in Medicine, and Women in Medicine. All interest groups were very important when offering volunteers, donations, support, or their time when delivering educational presentations or facilitating group activities at Covenant House. Various project goals were met, which produced a positive impact on the Covenant House residents, including improved knowledge, self-efficacy, and perceptions regarding health and wellness.

## CITATIONS

- <http://endhomelessness.org/wp-content/uploads/2012/01/changes-in-hud-definition-homeless.pdf>
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- Steele, R. W., Ramgoolam, A., & Evans, J. (2003). Health services for homeless adolescents. *Seminars in Pediatric Infectious Diseases*, 14(1), 38-42. doi:https://doi.org/10.1053/spid.2003.127216
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