

Q1 Please provide your contact information below.

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Q2 Please describe your company or organizations overall goals and mission.

Services for the UnderServed (S:US) drives scalable solutions to transform the lives of people with disabilities, people in poverty and people facing homelessness: solutions that contribute to righting societal imbalances.

We envision a city where everyone has a roof over their head, is healthy, productive and can enjoy the social connections that create a life of purpose. We're a nonprofit with a staff of 2,400 that provides \$200 million in services. Our efforts are supported by various local, state and federal government entities as well as foundations, corporations and individual donors. Most importantly, our vision allows us to deliver the same quality of services to one individual or to thousands. No challenge is beyond our scope.

Our uniqueness lies in our ability to take what we learn on the ground and use it to change systems and impact policy. By delivering high quality services that address the complex circumstances of each person, we help transform lives, improve neighborhoods and boost future generations.

Q3 Please indicate which category your organization falls under.

Community Based Organization

Other (please describe below: 150 character maximum):

Social Services Provider; Supportive Housing Provider

Q4 Innovation Executive Summary. Please describe the innovation, and how it addresses the social determinants

of health. Please identify how the innovation addresses the 6 innovation criteria (i.e. ROI, scalability, feasibility, evidence based support for innovation, relevance to the Medicaid population and speed to market).

Trauma-Informed Yoga, a recent adaptation of the practice, incorporates the proven benefits of yoga such as decreased anxiety and depression (Prathikanti et al. 2017; Bajaj et al. 2016; Grossman et al. 2010), and improved cardiovascular health (Toschi-Dias et al. 2017; Fulambarker et al. 2012; Rosenzweig et al. 2007), with a safe environment, noninterpretive language, and a focus on emotional awareness (Emerson & Hopper, 2011). Trauma-Informed Yoga is proven to decrease PTSD symptoms for survivors of domestic violence (van der Kolk et al. 2014).

Trauma-Informed Yoga addresses the Social Determinants of Health of: Health and Healthcare and Social and Community Context. Yoga is a low-cost activity that can improve individual's health and mental wellbeing. Through our pilot, we are exploring its impact on physical health, recovery from problem drug use, trauma-related symptoms, and community connectedness.

We are working with the creators of a Trauma-Informed Yoga practice, Exhale to Inhale, to adapt the practice to work in Starhill, our residential substance use disorder treatment program, for women with histories of trauma. Exhale to Inhale's work has focused primarily on survivors of domestic violence. Located in the Bronx, Starhill serves 500 individuals per year who are low-income, Medicaid-enrolled, currently or formerly homeless and have behavioral health diagnoses and/or chronic health conditions. About half of individuals at Starhill are justice-involved, having recently been incarcerated or in treatment as an alternative to incarceration. Individuals coming into treatment often have histories of unaddressed trauma and the majority have never engaged in nor have access to yoga. This pilot will provide Trauma-Informed Yoga onsite to 80 individuals and integrate its use with the course of treatment.

In a 2015 evaluation, we found that 85% of individuals at Starhill acknowledged histories of traumatic events and 70% displayed symptoms of PTSD. These rates were highest among women. Problem drug use can both precede and follow the development of PTSD; individuals often turning to alcohol and drugs as a way to mitigate the symptoms. Trauma-Informed Yoga, in conjunction with recovery coaching and services provided at Starhill, will be a tool to reduce symptoms of trauma and provide lasting coping skills. We are working with Exhale to Inhale to set up three 8-week cycles of yoga sessions to test the feasibility of the practice and to make adjustments in scheduling and engagement. In other pilots, we have found that peer support is critical to success. We identified two to three peers who will champion the pilot to provide feedback throughout the pilot and help with engaging residents.

The pilot started in June 2018 and it is receiving positive feedback from the participants. The primary goal of this pilot is to create a safe environment where individuals are able to focus on recovery. Additional goals are to decrease symptoms of trauma, increase coping skills, improve physical and mental health, increase engagement and retention in SUD treatment, and improve overall well-being. We will evaluate physical health (hypertension and cardiovascular health) and mental health (trauma symptomology, depression and anxiety) outcomes from the pilot but will also explore quality of life measures and self-rated happiness in relation to the piloted activities. Our goal is to show the success and impact of this alternative wellness activities as a quality of life improvement and cost-benefit for VBP and MCOs.

Our agency has the goal of expanding it to other programs. All of our programs serve Medicaid-enrolled individuals who have behavioral health challenges and chronic health conditions. The majority of those we serve are currently or formerly homeless and have histories of complex trauma.

S:US' internal Program Planning and Evaluation department will be responsible for evaluating the effectiveness of this pilot. Individuals will assess their quality of life, happiness, and mental/emotional wellbeing prior to implementation of Trauma-Informed Yoga. The pilot will be successful if there is an improvement in trauma symptomology, engagement/retention in treatment, quality of life, happiness, and mental/emotional wellbeing indicators, physical health, and satisfaction with the service. We will also measure success through staff, peer, and consumer satisfaction surveys and focus groups. This data will inform us on training needs, possible adaptations of the pilot, and help create our plan for sustainability.

The evaluation will show the impact of having alternative wellness activities available for the people we serve. Quality of life and happiness are not easily translated however this pilot will enable us to examine the relationship between wellness activities and connection with other yoga participants, their impact on happiness and how this translates into health outcomes. We believe that the investment in these activities will improve the lives of those we serve, which is a key goal of all of our programs.

The pilot will help determine if alternative wellness activities, like Trauma-Informed Yoga, are impactful and well-attended. Part of our sustainability and scalability plan is to train current staff, including peer staff, in Trauma-Informed Yoga, and incorporate it into a schedule of activities in the new model of treatment.

Q5 Was your innovation implemented? If so, please explain when, the number of people impacted, and the results.

Yes (please specify when and the estimated number of people impacted):

Yes, TIY implemented in June 2018. The pilot will last until January 2018. The pilot will involve a minimum of 80 women. From the first cycle, participant feedback included, “we have something for ourselves”, “the [yoga instructor] is perfect, she made the session feel warm and relaxing”, and “this helps how I think about health, my eating, and my recovery”.

Q6 Please identify the SDH Domain that your innovation addresses. (Select all that apply.)

Social and Community Context ,
Health and Health Care

Q7 I give the Department of Health the right to share the information submitted in this application publicly (for example: on the DOH website). I understand that there is no monetary reward/reimbursement for my submission or for attending the summit should my innovation be selected.

I consent to have my innovation shared

