

White Paper: The Westside Clubhouse Addresses San Francisco Homelessness

The Westside Clubhouse in San Francisco offers a case study of how Clubhouses for the seriously mentally ill (SMI) serve as effective interventions against homelessness.

*The Westside Clubhouse: Westside Community Services is a Behavioral Health Community Health Center in San Francisco. Westside established a Clubhouse for the Seriously Mentally Ill in 2022 under a grant from the **California HealthCare Foundation**. The Clubhouse has since enrolled roughly 60 San Francisco inner-city SMI members.*

Key Findings

- Clubhouses like Westside provide targeted rehabilitation services for the clients who are at the highest risks for housing insecurity. Clubhouses serve clients with serious mental illness who also are unemployed, have histories of incarceration, and who grew up in institutional care.
- Despite these risk factors, the Westside Clubhouse has for the past three years been effective in helping: :
 - its housed members to retain their housing – *no member has lost their housing.*
 - unhoused members to find more secure housing --*three members have moved from unhoused to permanent housing.*
 - members in residential behavioral health care move into housing at discharge --*no member has gone from residential care to unhoused.*
- Clubhouses provide key elements of support that help members to retain or to gain housing:
 1. **Clubhouses are a safe place to discuss their housing challenges.** While members report being hesitant to disclose housing problems with social services and case workers for fear of losing benefits, they will talk about housing issues with Clubhouse staff and other members. The Clubhouse provides a safe environment where members can openly discuss housing challenges and get help when they do not feel safe doing so anywhere else.
 2. **Clubhouses are a way to stay in touch with housing authorities while unhoused and searching.** Members in search of permanent housing may easily become lost to housing authorities because they have no fixed address or reliable communications. The Clubhouse provides means –computers, cell phone chargers—for unhoused members to stay in touch with housing support services. Clubhouse staff may also become contact points for getting messages to members.

Background: Emotional problems are believed to be the dominant risk factors for homelessness in the developed world. Roughly three quarters (76%) of homeless populations are estimated to have mental disorders.ⁱ California is no exception. The prevalence of emotional problems among California’s unhoused have been reported as ranging from 66% to 85%.ⁱⁱ In San Francisco, a recent city census found dramatic increases in the rates of mental illness among the unhoused. Mental

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illness contributes to both their risk of losing housing and their difficulties in regaining stable housing.^{1 iii iv}

The Westside Clubhouse serves a population that is at high risk for housing insecurity. Members all have serious mental illness and incomes below the poverty line. Most (84%) are unemployed, are persons of color (74%), and have histories of incarceration (89%) and of childhoods in institutional care (40%).^v Unsurprisingly, half (51%) of members report when joining the Clubhouse that they have no permanent housing.

Member Survey and Interview Findings: Clubhouse membership appears to be both an aid to maintaining housing and to gaining more secure housing. Westside-- in partnership with a health research firm, Atlas Clarity-- maintains a quarterly member survey and interview program that tracks members' outcomes, including housing status. Findings from member surveys and interviews indicate the following:

- 1. Clubhouse members who have housing when they join (49% of members) have all sustained housing over the past two years. These members use Clubhouse resources to help manage problems with their apartment managers and utility firms.** The Clubhouse has actively helped members retain their housing. Two examples:
 - A 65-year-old Black woman was unable to make utility payments for several months and was told by her apartment manager that she would have to leave if she did not pay. She did not want to tell her social worker or case manager for fear that they would “*not understand and report me and then I would lose my benefits...*” She did tell a Clubhouse member and a staff member. The staff member was able to help her get a loan and an extension from PG&E.
 - A 50-year-old Black woman had plumbing problems and rodent infestation in her apartment. The manager of the apartment told her that there was nothing they could do. She felt she had to move out even though she had no place to go. She also did not want to tell her social worker, fearing that she would be “*penalized for not taking care of the situation by herself.*” She talked with Clubhouse staff and members who helped her get rodent eradication products and plumbing repairs. She remains in her apartment.
- 2. Westside Clubhouse members who do not have permanent housing when they join (51%) use the Clubhouse as a resource for seeking housing.** Members without permanent housing include those who are in:
 - **residential behavioral health care** with no housing available when discharged. Over the past two years, Clubhouse members who have left residential care have all gone to permanent housing on discharge. *No member has left residential care to become unsheltered.*

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- **temporary shelters and single room occupancy** apartments (SROs) or are living unsheltered. *Three Clubhouse members have moved from being unsheltered to having permanent housing.*

Unhoused members often have difficulty staying in touch with services trying to help them to find housing and may miss opportunities because they cannot be reached and/or become “lost to the system.” While they may have cell phones, they may not have been able to pay fees and keep the phone charged. The Clubhouse offers a desktop computer where members can connect to housing services and email. The Clubhouse maintains charging stations for cell phones. And clubhouse staff serve as contact point for housing services and case workers trying to get in touch with an unhoused member. Two examples:



- A 52-year-old man who was unable to gain employment because of serious emotional disorders was approaching discharge from a long-term residential care program. *“I did not want to go to where my case worker was thinking of sending me to temporary housing in the Tenderloin, but did not want to say so for fear that I would just be kept in the residential program. At the Clubhouse, I learned of an opening in supported public housing from a member who lives there and got help applying there.”*

A 32-year-old Black man sleeping in shelters had applied for housing assistance but had difficulty staying in touch with housing authorities. He gave the Clubhouse as his contact point and was able to be reached when a single-room apartment became available. *“They only give you 5 days to get back to them when your turn comes up. If I hadn’t gotten the message through the Clubhouse, I would not have known that I was eligible for a room and would not have gotten it.”*

Acknowledgements: *The report was based on surveys and interviews of Westside Clubhouse members. The Clubhouse maintains a program of quarterly member surveys and interviews conducted in partnership with Atlas Clarity, LLC. Funding for the research program is provided by the California Health Care Foundation, by Westside Community Services and by pro bono support by Atlas Clarity, LLC. Data analysis and drafting were conducted by Wendy Everett, PhD, NP, Sheila Fifer, PhD, and Jeffrey Burko, MPH of Atlas Clarity, LLC.*

Please address any questions concerning findings or methods to sfifer@atlasclarity.com

ⁱ SF Neilson, et.al., “Individual Level Predictors for Becoming Homeless and for Exiting Homelessness.” *Journal of Urban Health*, 2019 Aug 6;96(5):741–750. doi: [10.1007/s11524-019-00377-x](https://doi.org/10.1007/s11524-019-00377-x)

ⁱⁱ Toward a New Understanding: The California Statewide Study of People Experiencing Homelessness. [CASPEH Report 62023.pdf \(ucsf.edu\)](#)

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ⁱⁱⁱ “Mental Illness Rates Skyrocket Among San Francisco’s Homeless,” The San Francisco Standard, August 16, 2024. The Standard data taken from a SF Department of Public Health census report.

^{iv} Padgett DK. *Homelessness, housing instability and mental health: making the connections*. BJPsych Bull. 2020 Oct;44(5):197-201. doi: 10.1192/bjb.2020.49. PMID: 32538335; PMCID: PMC7525583.

^v SF Neilson, op.cit.