

Study shows homeless people with mental health conditions benefit from personalized primary care

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Homeless people with mental health conditions have a better primary care experience in clinics tailored to their unique needs, according to a study co-authored by University of Maryland School of Public Health researcher Dr. Cheryl Holt. Published by PLOS ONE, an international online publication of the Public Library of Science, the multi-site study was funded by the Department of Veterans Affairs Research and Development.

More than 600,000 people experience homelessness in America on any given night, according to the National Alliance to End Homelessness, and 20 to 25 percent of that population suffers from mental illnesses that make it difficult to access health care services. With this vulnerable population in mind, a national team of researchers set out to understand what factors help assure a positive primary care experience.

Drawing on data from a sampling of patients at five primary care sites across the country, the researchers examined organizational and patient factors that affect perception of care among formerly or currently homeless persons with mental who were chronically and recently homeless. health conditions. The study, which included surveys from more than 300 patients, identifies three factors that predicted a positive primary care experience for homeless patients, especially those with severe mental illness: homeless-specific tailoring, perceived extent of choice in providers, and housing status.

"It turns out that patients are sensitive to the type of clinic where they receive care," said Dr. Holt, an associate professor of Behavioral and Community Health. "If it has services and staff who have a commitment to the homeless, they notice and they feel more comfortable. If the patients themselves have a sense of choice about who they can see for care, it matters to them. And it mattered most of all,

in this analysis, to people who had severe psychiatric symptoms."

Features of clinics tailored to homeless patients include same-day services and integrated primary care and mental illness facilities. To improve the experience of homeless patients, organizations may want to deliver these types of tailored services and offer a choice of providers, the researchers concluded.

"This research has resulted from a long-term focus on improving community health in a way that is rooted in the perceptions, concerns and desires of the community or social context," Dr. Holt said. "People with mental illness and homelessness have some unique challenges in primary care. It's not just access to care, but making sure that experience doesn't leave them feeling stigmatized or unheard."

Additionally, stable housing – formerly homeless people who were domiciled - was associated with a more positive perception of care relative to those

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