

Stigma and Mental Health Utilization Among Homeless Populations across the United States

Vanessa Falcon¹, Aliyah Parker¹, Deanhal Tawfek¹

¹University of California, San Diego (UCSD), Department of Family Medicine and Public Health

Background

- A major study concluded that even though multiple populations in the U.S face increased social and environmental stressors, subgroups of underserved populations that face additional stigma are at increased risk psychologically ¹.
- Previous research had found that community-based mental health services could be an effective effort to decrease stigma and improve service utilization ².
- We aim to provide directions for future studies that examine the effects of community-based interventions on mental health care utilization and improvement of stigma.

Objective

- To determine the effectiveness of current community based interventions on mental health utilization and what can be improved to help decrease mental health disparities among underserved populations.

Methods

- A secondary data analysis was conducted utilizing the 2014 Health Center Patient Survey
- Statistical analysis was performed using descriptive and bivariate analyses via SPSS

Methods

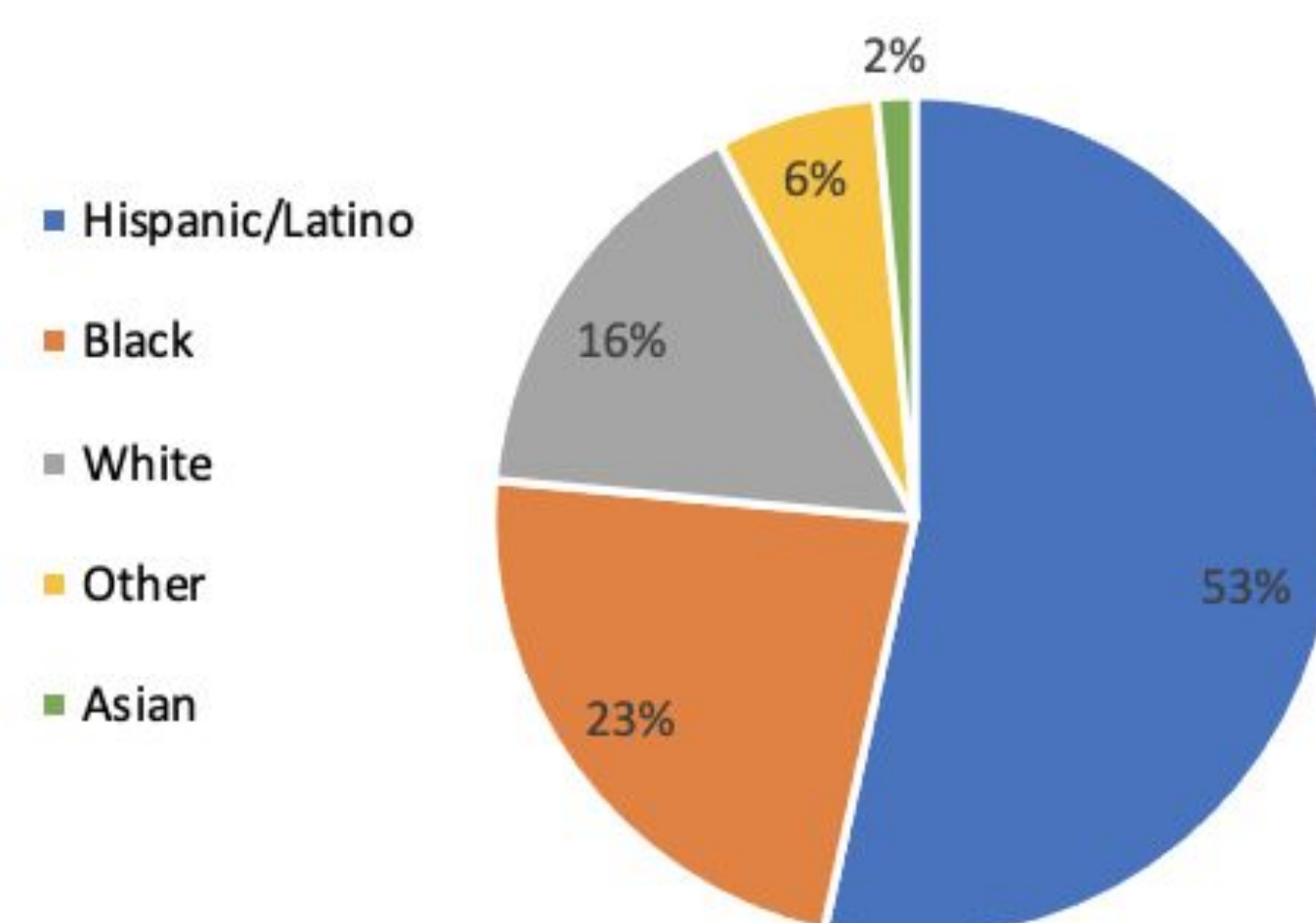
- In September 2014 - April 2015, the Health Center Patient Survey collected data on patients of HRSA-funded health centers via in-person interviews with a computer-assisted personal interviewing (CAPI) instrument.
- Patients were surveyed on their access to and utilization of health care services, measuring the exposure (community-based interventions) with the outcome (mental health care utilization and disparities)

Results

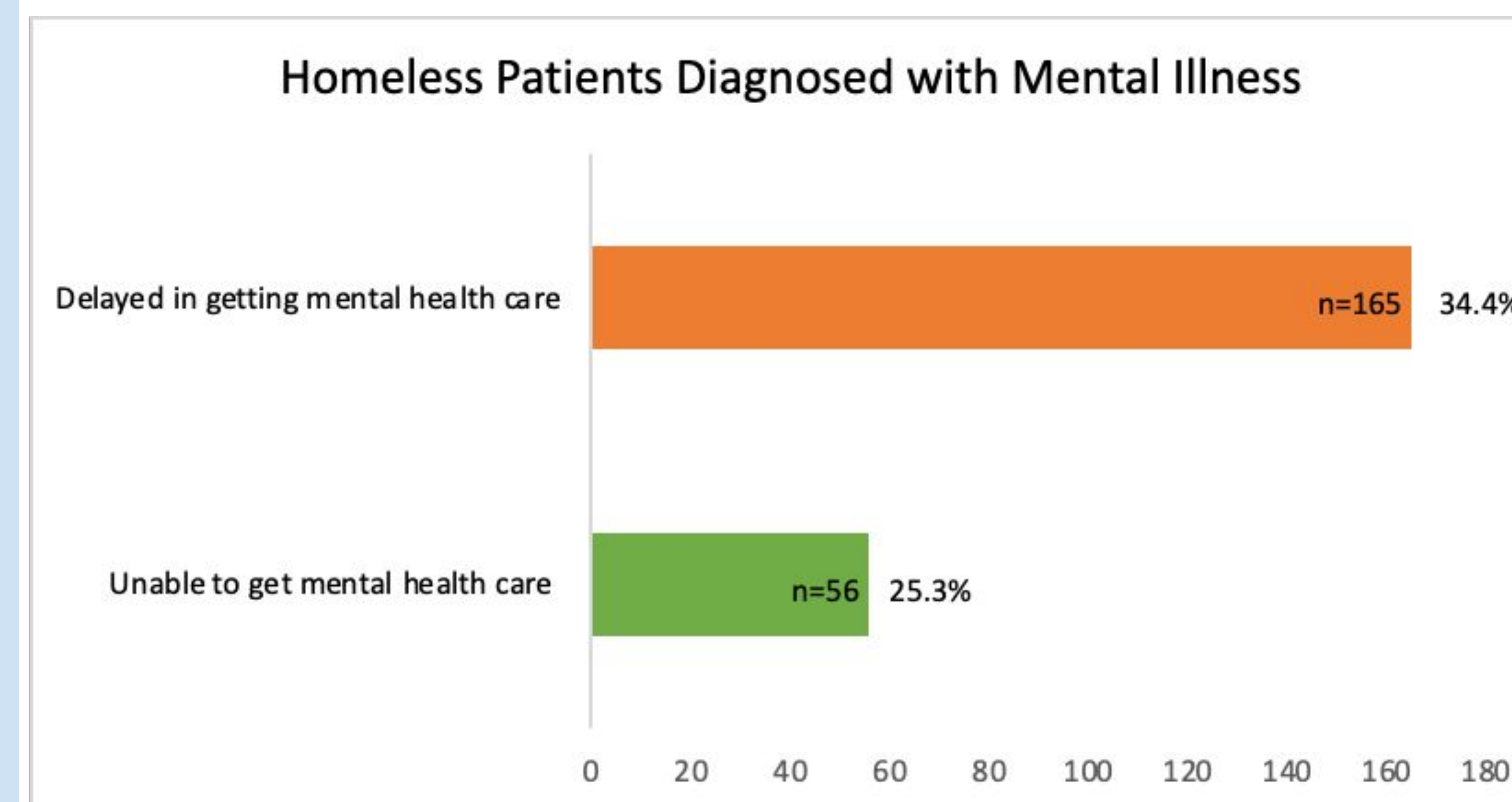
- 44%** (n=3076) patients unstably housed or homeless
- 31.3%** (n=935) homeless patients uninsured
- 7%** (n=221) homeless patients diagnosed with a mental illness



Distribution of Race/Ethnicity

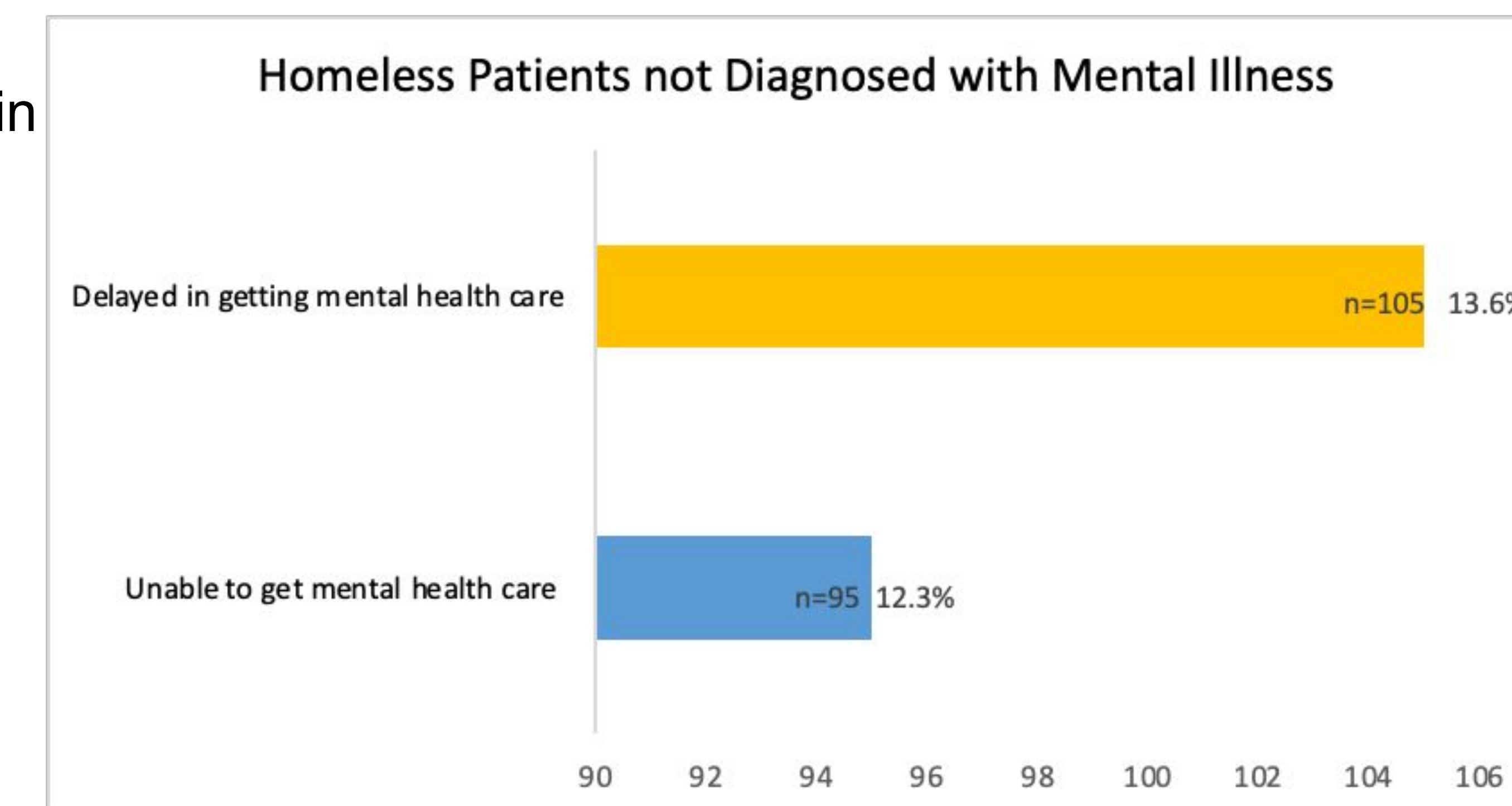


Results



- Over a quarter** of homeless patients diagnosed with a mental illness experienced delays in accessing mental health care or were unable to access mental health care.

- There is a significant difference in access to mental health care services among homeless patients diagnosed with mental illness compared to homeless patients not diagnosed with a mental illness.
- $p = 0.000002$ obtained by Chi-square test



Conclusion

- The amount of homeless individuals who didn't receive care or received delayed care despite receiving HRSA-funded services is an alarming issue.
- There is a need for a broader range of community based interventions that are focused on equity and accessibility to inform policies and outreach programs aimed at improving mental-health utilization among the homeless population.

References

- Devine, M., DeCaporale-Ryan, L., Lim, M., & Berenyi, J. (2017). Psychological Issues in Medically Underserved Patients. *Primary care*, 44(1), 99–112. <https://doi.org/10.1016/j.pop.2016.09.012>
- Mongelli, F., Georgakopoulos, P., & Pato, M. T. (2020, Jan 18). *Challenges and Opportunities to Meet the Mental Health Needs of Underserved and Disenfranchised Populations in the United States*. Focus (American Psychiatric Publishing), 18(1), 16–24. <https://doi.org/10.1176/appi.focus.20190028>