



Perceptions of Resources and Homelessness

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Introduction

The World Health Organization (WHO, 2018) report health inequalities are avoidable but need to be recognized and addresses.



The Centers for Disease Control and Prevention (CDC, 2013) state that the first step in remedying disparities and inequalities is to identify the problem.



If the homeless needs are not accurately assessed, then this population is at risk for poorer outcomes.

Knowledge of identified needs would allow non-profit organizations to use their financial resources to provide services where they are most needed.

Significance of the Problem

The Department of Housing and Urban (HUD) Development's 2017 Annual Homeless Assessment Report (AHAR) to Congress reported that homelessness rose by 1% from 2016 to 2017(Henry, Watt, Rosenthal & Shivji, 2017).

Life expectancy 44 years for homeless versus 78 years for general population (Gerber, 2013).

The homeless population has substantial health disadvantages (Fazel, Geddes, & Kushel, 2014; Nusselder et al., 2013) including mental illness and drug dependence (Fazel, Khosla, Doll, & Geddes, 2008).

Clients seeking services from a non-profit organization in East Tennessee

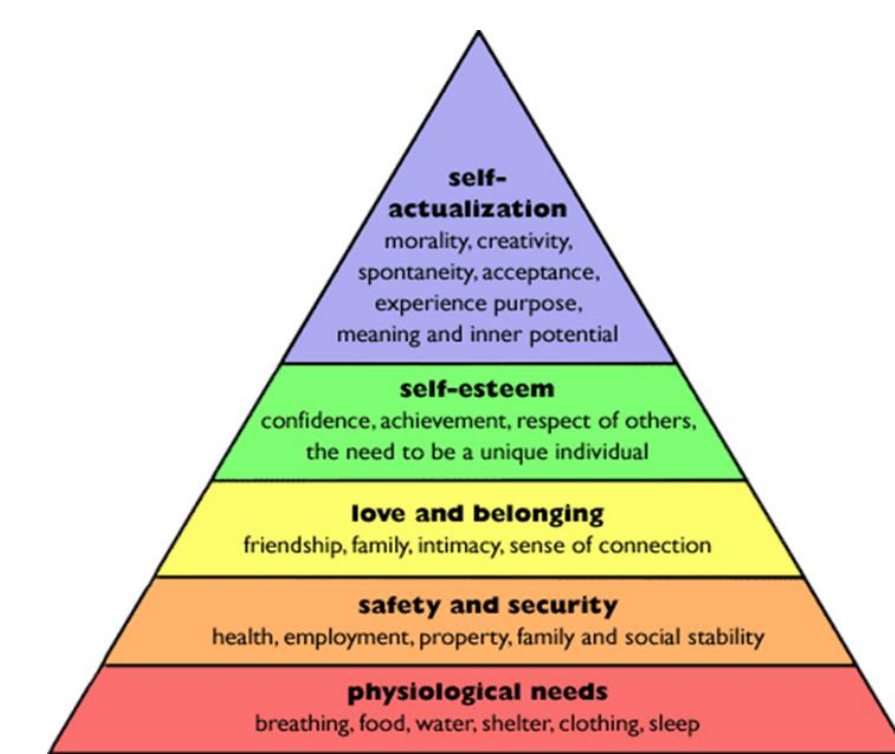


Purpose

The purpose of this project is to identify the priority of needs (spiritual, medical, food, and clothing) of the homeless clients seeking services from a non-profit program in East Tennessee and how this information affects the providers of care.

The focus of this research project is significant for agencies and marginalized individuals, such as the homeless, in order to improve the effective use of agency resources.

Theoretical Framework



Maslow's Hierarchy of Needs

Methodology Phase One

Use a convenience sample to administer the "Under the Bridge Data Collection Tool" to clients seeking services from a non-profit organization in East Tennessee

Methodology Phase Two

Administer the "Under the Bridge pre-intervention collection tool" to the providers of service at a non-profit organization in East Tennessee, present PowerPoint of results, then administer post-intervention data collection tool after PowerPoint

Data Collection Tools Phase One and Two

Under the Bridge Data Collection Tool

Under the Bridge Pre-Intervention Survey for Providers of Services

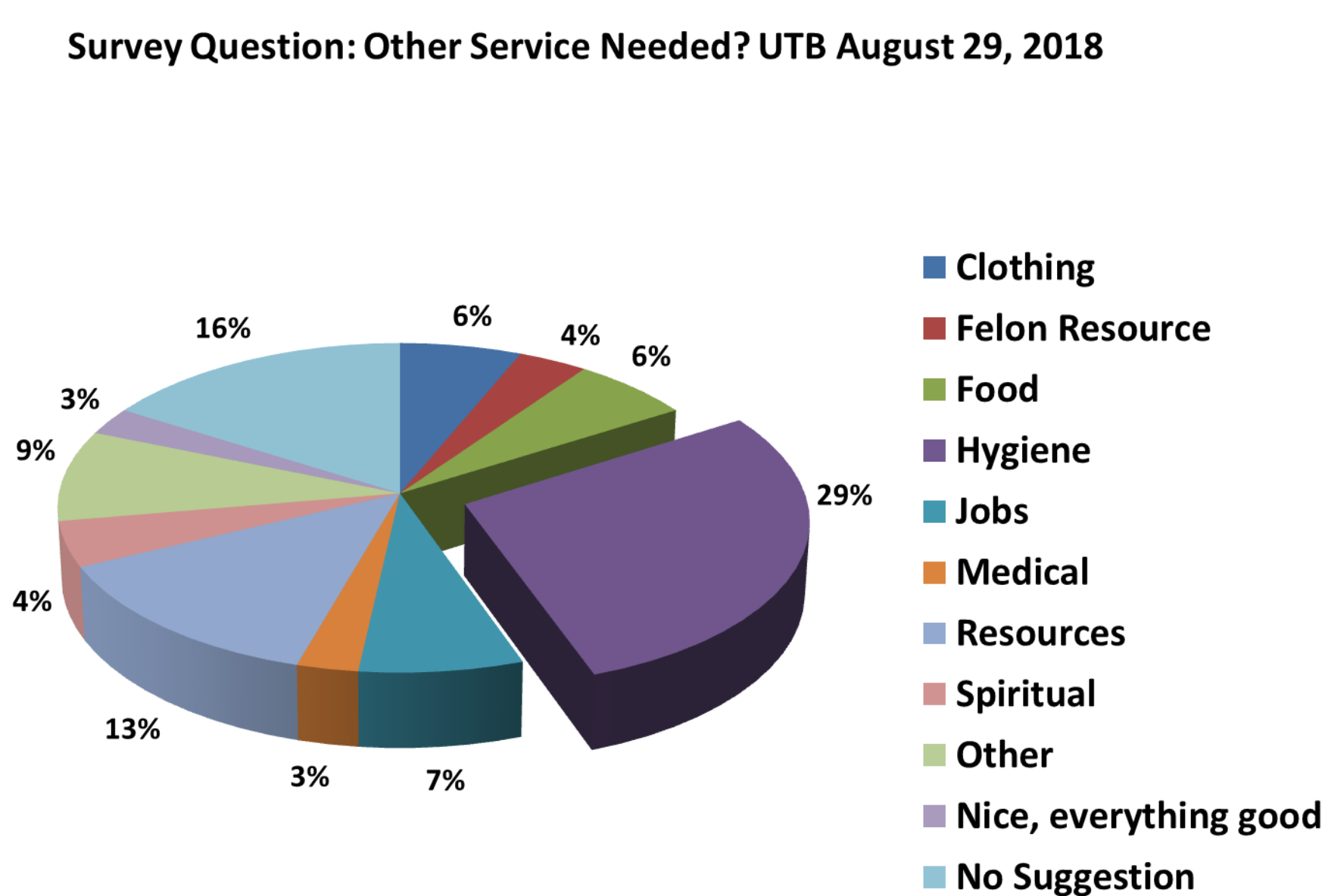
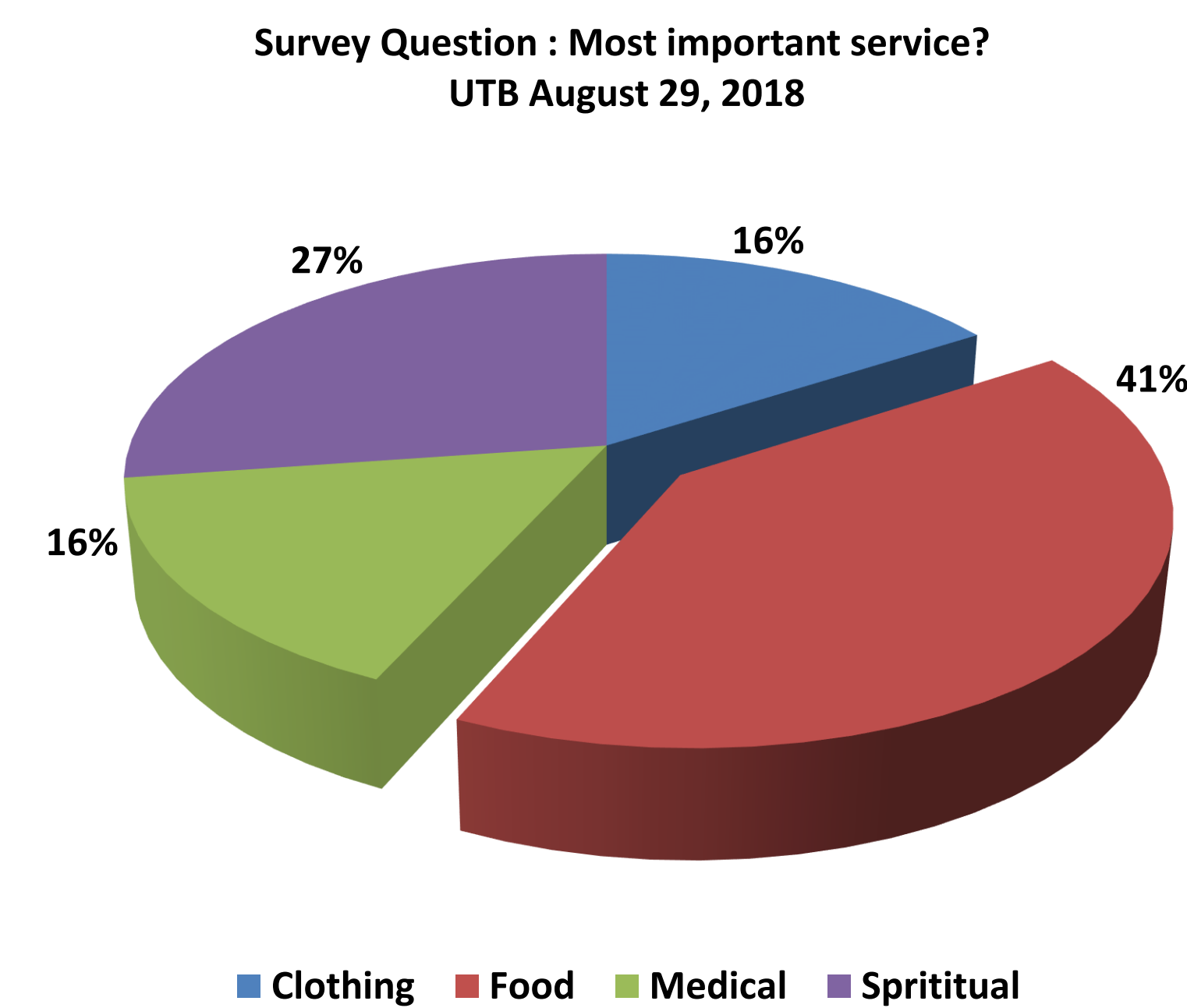
1. Of the four weekly services offered by Under the Bridge, which service do you think is the most important to the clients?

2. What one additional service would you recommend adding to the current services?

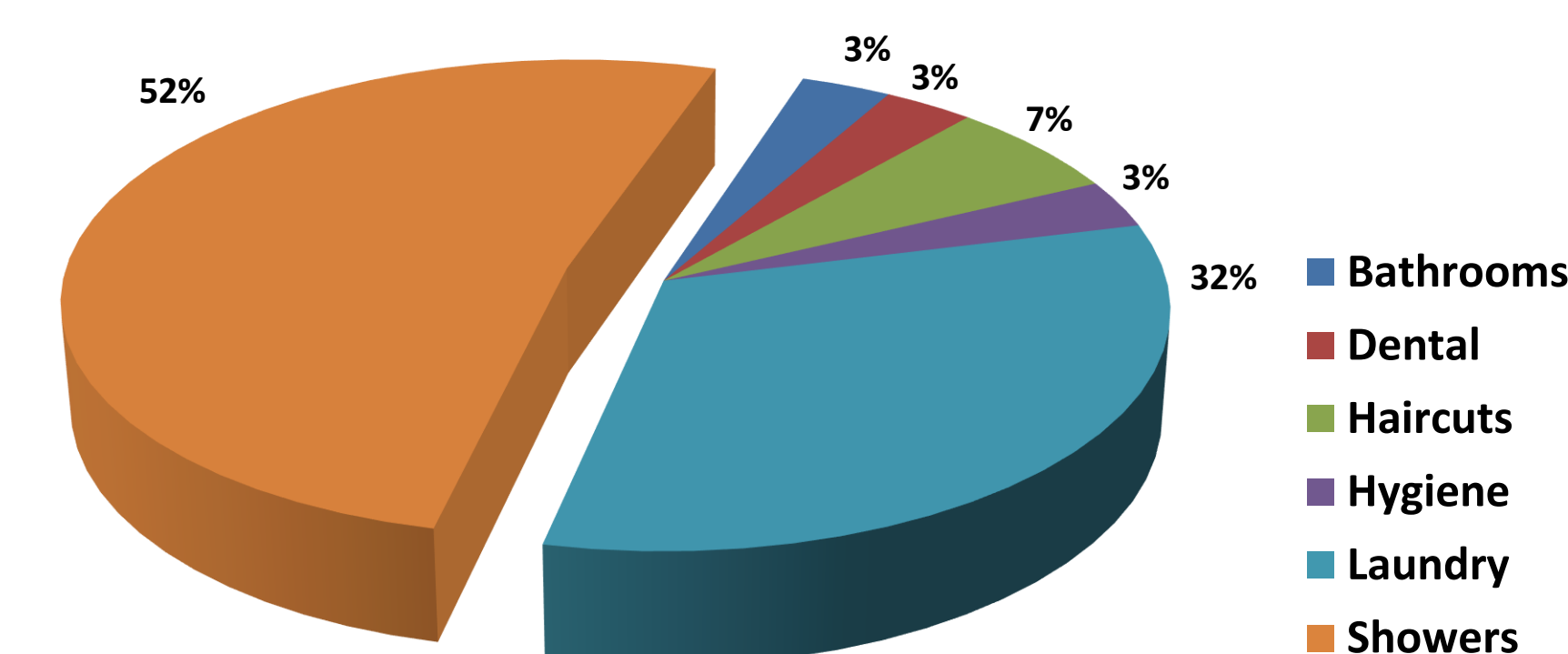
3. What are the most commonly used services offered by Under the Bridge, which service is the most important?

4. What are the most commonly used services offered by Under the Bridge, which service is the most important?

Results from Phase One



Types of Hygiene Services August 29, 2018



Results from Phase Two

Phase Two Results of Stakeholders

	Spiritual	Medical	Food	Clothing
Pre-test	4	1	3	0
Post-test	5		3	0

Other Service

	Hygiene	Career/Job	Resources/Housing	Mental Health
Pre-test	0	4	2	2
Post-test	2	2	2	2

Implications for Practice

Nurses and other stakeholders, who assess and address the needs of homeless individuals, can contribute to their overall health and achieve health equity.

Advanced practice nurses are situated where they can assess priority of needs for the homeless.

Non-profit organizations benefit from knowing the priority of needs, as stated by their clients in order to improve the allocation of resources.

The homeless clients gain resources from having their priority needs met.

Discussion and Recommendations

Three outcomes for this research were met.

Priority of needs as described by the clients seeking services from the organization were identified.

Additional needs not currently provided by the organization were identified.

Minimal change in the stakeholders' perception of needs was noted.

References

Fazel, S., Khosla, V., Doll, H., & Geddes, J. (2008). The prevalence of mental disorders among the homeless in western countries: Systematic review and meta-regression analysis. *PLoS Medicine*, 5(12). <https://doi.org/10.1371/journal.pmed.005025>

Fazel, S., Geddes, J., R., & Kushel, M. (2014). The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations. *Lancet*, 384(9953):1529-40. [https://doi.org/10.1016/S0140-6736\(14\)61132-6](https://doi.org/10.1016/S0140-6736(14)61132-6)

Gerber, L. (2013). Bringing home effective nursing care for the homeless. *Nursing*, 43(3). <https://doi.org/10.1097/01.NURSE.0000426620.51507.0c>

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