

Homeless adults have significant unmet health care needs

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The vast majority of homeless adults surveyed in a national study had trouble accessing at least one type of needed health care service in the preceding year, according to a study that will appear in the July *American Journal of Public Health* and is now available online. The report from investigators at Massachusetts General Hospital (MGH) and the Boston Healthcare for the Homeless Program may be the first broad-based national study of factors related to unmet health needs among homeless people.

"Our study documents the substantial inability of homeless people to get the health care they need," says Travis Baggett, MD, of the MGH Department of Medicine, the study's lead author. "Almost three-quarters of respondents had at least one type of unmet health care need. Rates for specific services were six to ten times higher than those seen in the general population, and being uninsured was a consistent predictor of the inability to get needed care."

The researchers analyzed data from the 2003 Health Care for the Homeless (HCH) User Survey, which interviewed patients seen at 79 clinics nationwide that receive funding through the Federal HCH Program, part of the U.S. Department of Health and Human Services. Almost 970 homeless adults who had received services at HCH-funded sites were interviewed about a range of topics, including whether they had trouble accessing five types of health services in the preceding year - medical or surgical care, [prescription medications](#), mental health care, eyeglasses and dental care.

While 73 percent of respondents reported at least one unmet health need, 49 percent reported two or more unmet needs. The breakdown regarding inability to access particular types of care was 32 percent for medical or surgical care, 36 percent for prescription medications, 21 percent for [mental health care](#), 41 percent for eyeglasses, and 41 percent for dental care. The most frequently cited reasons were the inability to afford needed care and lack of health insurance. The researchers note that, since all study participants had received some services at an HCH-funded site during the previous year, their results may under-represent the overall level of unmet health needs among homeless people.

Other factors associated with difficulty accessing needed care were lack of adequate food, a history of being in foster care as a child and vision problems. Respondents who reported having worked during the prior year actually had more trouble accessing services than those who had not worked.

"Our findings related to employment were particularly interesting," Baggett explains. "Homeless people who worked were more likely to be uninsured, and the more someone worked, the less likely they were to have health insurance. Independent of differences in insurance, homeless workers reported more difficulty getting needed medical care and prescription medications. This confirms our clinical observation that homeless people who work must often place higher priority on going to work than on receiving any health care they may need."

A fellow in General Medicine at MGH and Harvard Medical School, Baggett also is a clinician at the Boston Healthcare for the Homeless Program, an independent non-profit organization. He notes that efforts to improve health care access for homeless people need to address their unique needs. "Health services compatible with work schedules and co-located with food and shelter services may help mitigate the challenges faced by homeless patients. Future studies should assess the effects of

novel health care delivery strategies that address the barriers [homeless people](#) face in accessing needed care."

Provided by Massachusetts General Hospital

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