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1. Identifying Homeless Population Needs in the Emergency Department Using Community-Based Participatory Research

https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-021-06426-z?trk=organization_guest_main-feed-card_feed-article-content

Millions of Americans are homeless and the mortality rate for the homeless population is at an all time high. Homeless people have been called “frequent flyers” or “super users” when it comes to visiting the emergency department thus my result in a change in attitude in the provider and lack and affect the quality of care they receive (Franco et al., 2021). According to recent interviews ED staff and inpatient workers state that the homeless population lack basic needs so when they are in the hospital not only are the staff caring for their medical needs but also their social needs as well (Franco et al., 2021). Providing appropriate resources and discharge education along with working with shelters can have a positive impact on the homeless population and decrease the use of emergency departments.

Reference

Franco, A., Meldrum, J., & Ngaruiya, C. (2021). Identifying homeless population needs in the emergency department using community-based participatory research. *BMC Health Services Research*, 21(1), 1-11.

2. Cardiovascular Disease and Homelessness

<https://pubmed.ncbi.nlm.nih.gov/29852981/>

Cardiovascular disease is the leading cause of death in the homeless population (Baggett et al., 2018). Recent studies found that cardiovascular disease is at an all time high in the

homeless population and the traditional risk factors are not all that are causing cardiovascular disease. The study found that along with the inability to control traditional risk factors such as hypertension and diabetes psychosocial risk factors also have a major impact on cardiovascular (Baggett et al., 2018). The homeless population lacks the ability to receive medical treatment and are unable to provide the medication needed to control the risk factors but the study also found that depression, alcohol use, chronic stress and cocaine abuse also contribute to the increase in cardiovascular disease (Baggett et al., 2018). Providing education to the homeless population along with resources can help decrease the risk for cardiovascular disease in the homeless population.

Reference

Baggett, T. P., Liauw, S. S., & Hwang, S. W. (2018). Cardiovascular Disease and Homelessness. *Journal of the American College of Cardiology*, *71*(22), 2585–2597.
<https://doi.org/10.1016/j.jacc.2018.02.077>