

## **1. Social Determinant of Housing Instability and Adverse Pregnancy Outcomes: A Scoping Review**

This study conducted a scoping review to examine the literature on pregnancy-related morbidities among women giving birth and infants living in unstable housing. Computerized database searches found articles utilizing a variety of pregnancy and housing-related search phrases (Robinson et al., 2022). The searches included English-language US studies between 1991 and 2019. Two reviewers synthesized and critically evaluated peer-reviewed qualitative and quantitative publications using quality assessment techniques from the Joanna Briggs Institute. The birth outcomes of women were underreported compared to baby outcomes, and inconsistent definitions for housing insecurity reduced the rigor of overall findings. Numerous research has examined the effects of housing insecurity on women who give birth: study sample methods and the absence of a standard definition of housing instability limit findings. However, researching this association is essential to comprehending how social variables affect a woman's health from birth. Future studies should assess the lack of data regarding birthing outcomes within this population. Advocacy at the policy level addressing social determinants must also improve legislation affecting community-based prenatal services and initiatives for pregnant women with housing insecurity (Robinson et al., 2022).

### Reference

Robinson, K., Sherman, A. D. F., Ogunwole, S., Meggett, J., & Sharps, P. (2022). Social determinants of housing instability and adverse pregnancy outcomes: A scoping review. *The Journal of Perinatal & Neonatal Nursing*, 36(32), 118-130. <https://doi.org/10.1097/jpn.0000000000000648>

## **2. The challenges homeless people face when accessing end-of-life care: what district nurses need to know**

Homeless people's physical and emotional health is worse than the general population's. Death rates are substantially higher, but not enough sites are suited for palliative and end-of-life care (Barnes, 2022). The current healthcare system fails those who are homeless. The stigma of homelessness affects medical professionals' care. Services frequently lack flexibility and have a low tolerance for drug abuse (Barnes, 2022). District nurses are well-positioned to provide person-centered care focusing on collaborative decision-making since they are often skilled end-of-life care practitioners. However, many homeless people pass away without the assistance of district nurses or specialized palliative care. It is crucial to comprehend why this occurs to address the problem effectively.

People who are homeless have less autonomy than individuals with housing security, and their views on palliative care frequently diverge from those of experts (Barnes, 2022). Care must be available and adaptable, and a trustworthy relationship is essential. Quality care is challenging because much of healthcare is rigid. Medical professionals and the general public frequently have unfavorable opinions of homeless individuals, which harms their ability to obtain healthcare. When ignored, many non-life-threatening disorders wreak havoc on homeless people and necessitate more involved treatment. There is a need for increased communication between services, and the inclusion of palliative care facilities within homeless shelters could address the problem (Barnes, 2022).

In conclusion, individuals who are homeless suffer the most from high inequality, with one-third of fatalities resulting from treatable diseases (Barnes, 2022). Additionally, district

nurses are well-positioned to deliver sophisticated end-of-life care since homeless persons are more likely to endure significant pain at the end of their lives. Even though advanced care planning is recognized to provide further control and lower anxiety, homeless persons lack access to these services. The rehabilitation approach that is the focus of advanced care planning makes it more difficult for staff to determine when palliative care is necessary. As many homeless individuals avoid accessing healthcare owing to past experiences, district nurses must be more aware of how to give individualized treatment and guarantee no re-traumatization. Improved end-of-life care for homeless persons requires person-centered care and integrated teamwork. Indeed, establishing connections with homeless programs can aid in removing obstacles to providing quality end-of-life care (Barnes, 2022).

#### Reference

- Barnes, H. (2022). The challenges homeless people face when assessing end-of-life care: What district nurses need to know. *British Journal of Community Nursing*, 27(10), 498-503.  
<https://doi.org/10.12968/bjcn.2022.27.10.498>