

Lesson 11 Group Discussion

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Research Project Title: Association between social support and psychiatric service among NYC homeless seniors with serious mental illness.

Research Question: What is the effect of social support on the need for psychiatric services among homeless seniors, controlling for Sociodemographic Factors?

The research question aims to investigate the relationship between social support and the need for psychiatric services among homeless seniors in New York City with serious mental illness. The study seeks to determine whether the presence of social support can reduce the need for psychiatric services among this population while controlling for other potential confounding variables.

The study seeks to answer the following questions:

1. Does social support have a significant impact on the need for psychiatric services among homeless seniors with serious mental illness in NYC?
2. Are there any other factors that significantly influence the need for psychiatric services among this population, such as age, gender, race, income, education, or other health conditions?
3. What is the nature of the relationship between social support and the need for psychiatric services? Is it a direct relationship, or does social support have an indirect effect on the need for psychiatric services through other factors, such as coping skills or access to healthcare?

Research Design

The study will use a quantitative research design, collecting data from a sample of homeless seniors with serious mental illness in NYC. The data will be analyzed using regression analysis, controlling for potential confounding variables. The study aims to contribute to the understanding of the role of social support in the management of serious mental illness among vulnerable populations and inform policy and intervention efforts aimed at addressing the mental health needs of homeless seniors in NYC.

Hypothesis

Hypothesis: Homeless seniors with serious mental illness in NYC who have higher levels of social support are less likely to need psychiatric services than those with lower levels of social support, controlling for other covariates.

This hypothesis suggests that social support may have a protective effect on the mental health of homeless seniors with serious mental illness, which may reduce the need for psychiatric services. The hypothesis assumes that social support is positively associated with mental health outcomes and that this association persists after controlling for other potential factors that may influence the need for psychiatric services.

To test the hypothesis, the study will collect data on social support, mental health status, and other relevant variables, and analyze the data using appropriate statistical methods to determine whether the hypothesis is supported or not.

Methodology

Sampling: A sample size of at least 50 participants is recommended. The research will use a non-probability sampling technique, purposive sampling, to recruit participants. The target population will be homeless seniors aged 60 and above with serious mental illnesses living in New York City. The participants will be recruited from shelters, soup kitchens, and other community organizations that cater to the homeless population.

Data Collection: For the quantitative surveys, data will be collected using structured questionnaires, which may include closed-ended and open-ended questions. The questionnaires may be self-administered or administered by trained interviewers. The surveys will be available in multiple languages to accommodate non-English speaking participants. Data will be collected anonymously to ensure privacy and confidentiality.

For the experimental design, data will be collected using pre- and post-intervention surveys, which may include structured questionnaires as well as clinical assessments. The surveys will be administered to both the treatment and control groups, and data will be collected anonymously to ensure privacy and confidentiality.

For the qualitative in-depth interviews, data will be collected through audio-recorded and transcribed semi-structured interviews. Participants will be selected through purposive sampling, and the interviews will be conducted at various locations including shelters, drop-in centers, and clinics. The interviews will be audio-recorded and transcribed for analysis. Data will be collected anonymously to ensure privacy and confidentiality.

For the secondary data analysis, data will be obtained from existing databases or published studies and analyzed using appropriate statistical methods. Data may be obtained through administrative records, medical records, or public use datasets.

Overall, data collection methods will be selected based on the research question and study design, and measures will be taken to protect the privacy and confidentiality of the participants.

Data Analysis: Chi-square is appropriate for analyzing associations between categorical variables, such as social support and utilization of psychiatric services. Logistic regression analysis is appropriate for assessing the relationship between two continuous variables, such as social support and mental health outcomes.

Ethical Considerations

Ethical considerations are an important aspect of any research project, especially when working with vulnerable populations such as homeless seniors with serious mental illnesses. Some ethical considerations that should be addressed in this study include:

1. **Informed consent:** Participants should be fully informed about the nature of the study, including its purpose, procedures, risks, and benefits, and must provide informed consent to participate.
2. **Privacy and confidentiality:** Measures should be taken to protect the privacy and confidentiality of the participants, such as using anonymous data collection methods and secure storage of data.
3. **Respect for autonomy:** Participants should be treated with respect and given the opportunity to make their own decisions about participating in the study.
4. **Minimization of harm:** The study should minimize harm to the participants, and researchers should be aware of any potential risks or discomfort associated with participation.
5. **Beneficence:** The study should be designed to maximize potential benefits to the participants and to society.
6. **Justice:** The study should be designed to promote fairness and equal treatment of all participants.

To address these ethical considerations, researchers should obtain approval from an Institutional Review Board (IRB) or Ethics Committee before beginning the study. The IRB or Ethics Committee will review the study protocol to ensure that the study is ethical and that the rights of the participants are protected. Additionally, researchers should provide informed consent to participants, use anonymous data collection methods, protect the privacy and confidentiality of the participants, and minimize harm and maximize benefits to the participants.

Limitations

The proposed study on the association between social support and psychiatric service among NYC homeless seniors with serious mental illness may face some limitations, which include:

Sampling bias: The study may not be representative of all homeless seniors with serious mental illness in NYC, as the sample may be limited to those who are willing to participate, have access to services, or are available at the time of the study.

Self-report bias: The study relies on self-reported data, which may be subject to social desirability bias, memory bias, or other biases that could affect the accuracy and reliability of the data.

Confounding variables: The study may not be able to control for all potential confounding variables, such as comorbid medical conditions, substance abuse, or past traumatic experiences, that could affect the relationship between social support and psychiatric service use.

Causality: The study may not establish causality, as the relationship between social support and psychiatric service use may be bidirectional or mediated by other factors that are not measured in the study.

Generalizability: The study findings may not be generalizable to other populations or settings outside of NYC, as social support and psychiatric service use may vary across regions, cultures, and social contexts.

It is important to acknowledge these limitations and take them into consideration when interpreting the study findings and making conclusions.

Expected Results

The expected results of the proposed study on the association between social support and psychiatric service among NYC homeless seniors with serious mental illness may vary depending on the data collected, the sample size, and the analysis methods used. However, some possible expected results are:

Higher levels of social support will be associated with lower need for psychiatric service among homeless seniors with serious mental illness in NYC.

Other factors, such as age, gender, race/ethnicity, duration of homelessness, and mental health status, may also play a role in the relationship between social support and psychiatric service use.

Homeless seniors with serious mental illness who have higher levels of social support may also report better mental health outcomes, such as improved quality of life, decreased symptoms of mental illness, and increased resilience.

The study may also identify gaps in the availability and accessibility of social support services for homeless seniors with serious mental illness in NYC and suggest potential interventions to address these gaps.

It is important to note that these are only possible expected results and the actual findings may differ based on the data collected and the analysis methods used.