

III. Homeless Mortality Literature Review

Peer-reviewed literature points to the following suggestions on addressing homeless mortality and strategies for developing partnerships between clinical and academic entities. Collaborations between clinical agencies and academic organizations constitute effective teams working towards the goal of best practices and standardized methods in assessing and addressing homeless mortality.

Note: These suggestions are developed from a systematic review of the literature that has been submitted for publication.

Suggestions from a Review of the Literature

The Big Picture

1. Current research supports a “Housing First” approach. Experiencing homelessness has been shown to have lasting impact on early mortality, even after securing housing¹. This makes early intervention critical to mitigate the negative effects on health. Providing housing with interdisciplinary medical and behavioral health services² and outreach to people experiencing homelessness that are unsheltered²³ are key to addressing early mortality.
2. Policy must prioritize addressing social (or structural) determinants of health, such as lack of adequate employment, lack of appropriate educational programs, systemic racism, and limited access to socioeconomic resources.ⁱ
3. Coordination with other agencies, such as the Department of Veterans Affairs and Medicare,ⁱⁱ on data collection and accessing services is crucial.

Specific Intervention Recommendations

1. A focus on harm reduction programsⁱⁱⁱ
2. Integrated mental health and substance use treatment, including tobacco use^{iv}
3. Suicide prevention interventions^v
4. Standardized pain management protocols^{vi}

The Need for Real-Time, Local Efforts

1. Addressing mortality among people experiencing homelessness calls for local response, as each geographical area may have different primary causes of mortality.^{vii}
2. Assessing mortality data must be an ongoing, real-time process. Causes of death and, thus, changes in interventions will change over time.^{viii}
3. Unique populations will have different causes of death and, therefore, need unique targeted interventions. For example, research has discovered unique causes of early mortality in unsheltered individuals, families with children, youth, veterans, and older adults.^{ix}

Benefits of Academic-Community Partnerships

Partnering with an academic institution, namely a local college or university, provides several benefits to the process of developing a mortality count. Foremost, many colleges and universities have faculty that are experts in designing epidemiologic studies and in advanced statistical analysis. This may fill a gap in the available expertise in community and public health agencies. If human subject research approvals are called for, they often have the most expertise in obtaining this as well.

Pairing clinical expertise with research expertise can synergize the work of advocacy on issues related to homeless mortality. Some of the specific benefits to clinical agencies partnering with academic institutions on homeless mortality studies include the following.

- It is an opportunity to put research into action and implement research that can be rigorously compared to existing research models.
- It is an opportunity for small cities, rural areas, and other underrepresented groups to share findings. Much of the current research pertains to large city centers with extensive resources. A need exists to hear from other settings about what is happening, what interventions work, and what gaps in knowledge exist.
- Peer-reviewed research increases credibility because it is critiqued by peers with a history of publishing in the field and topic.
- Peer-reviewed publications can substantiate arguments for funding.
- Dissemination of results may also be widened and amplified by the academic partners. Publishing in journals can be a vehicle for capturing and sharing proven and reproducible methods with other organizations.
- Peer-reviewed research allows for your work to be referenced, which creates a documentation history and footprint.
- Faculty can assist the research process by creating a study design, ensuring adequate sample size to back-up findings, working on advanced statistical analysis, and co-authoring an article for a peer reviewed journal.
- Combining the clinical agency and university press relationships can enhance the ability to share the findings of a community's count back into the community.

How to Engage Academic Institutions

University researchers benefit from productive community collaboration and co-authorship on community and peer-reviewed publications. Academic health centers, in particular, often have community benefit mandates and/or mission-driven programs (whether paired with funding opportunities or not) for community collaboration.

Many universities have a greater focus on patient-centered care and population health and are eager to partner with health centers and organizations that represent the “real-world” setting and community-based care. Consider inviting university personnel from local universities to become board members.

If you have not partnered with universities, a mutually beneficial first step is promoting student internship opportunities. Students from a variety of disciplines are looking for quality internship experiences. Hosting an intern not only provides a fresh perspective and creative look at existing problems but also can be a bridge to university resources (i.e., access to statistical experts and software, access to public health researchers, and potential grant opportunities).

A Call to Publish Research

Published research can validate the need for attention to the issue of mortality among people experiencing homelessness. Research results can validate the need for funding towards this public health issue and show that funded interventions work. Published research is a communication tool between providers and agencies serving people experiencing homelessness.

As the community prepares to design and conduct a mortality count, whether organized by governmental or nonprofit agencies, they should reach out to local academic programs to identify thought partners who can participate.

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