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Madison Herbeck

Samantha Proctor

Bailee Scheer

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Efficacy of Educational Programs for Homeless Adults with Mental Illness

Madison Herbeck, OTS, Samantha Proctor, OTS & Bailee Scheer, OTS

Department of Occupational Therapy, University of North Dakota, Grand Forks, North Dakota, United States

Please direct correspondence to Madison Herbeck at herbeck00@gmail.com

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Focus Question

How does the implementation of educational programs for sheltered homeless adults ages 18 and older who have mental illness influence their positive occupational engagement and quality of life?

Case Scenario

Mental illness is prevalent among the homeless population, and it is estimated that one out of every four homeless persons has severe mental illness (Gutman, 2021). “On a single night in 2021, more than 326,126 people were experiencing sheltered homelessness in the United States” (U.S. Department of Housing and Urban Development, 2022, Key Findings section, para. 2). The number of people categorized as unsheltered homeless increased in rural areas between 2020 and 2021; however, no specific number was reported because of the COVID-19 pandemic to reduce transmissions (U.S. Department of Housing and Urban Development, 2022). Individuals from low-income families are more likely to experience homelessness in their lifetime. Homeless adults were chosen as the population of interest due to experiences, hardships, and opportunities that individuals may have in their communities.

The term “homelessness” describes “a person who lacks a fixed, regular, and adequate nighttime residence” (U.S. Department of Housing and Urban Development, 2022, Definition of Terms section, para. 7). The Centers for Disease Control and Prevention reported that individuals who experience homelessness have higher physical and mental illness rates ([CDC], 2017). These people might be chronically homeless, have temporarily lost their shelter, be fleeing domestic violence, or face other issues. Stigmatizations by providers impact the care of homeless populations. The CDC defines mental illness as “the emotional, psychological, and social well-being of an individual” ([CDC], 2021, para. 1). Mental health is important at all stages of life and impacts how individuals handle stress and interact with others.

Occupational engagement is vital for this specific population of homeless adults. Occupations include ADLs, IADLs, health management, leisure, and social participation. The performance of occupations results from choice, motivation, and meaning within a supportive context (American Occupation Therapy Association, 2020). Engagement includes objective and subjective aspects of clients’ experiences and involves the transactional interaction of the mind, body, and spirit. Although this population critically needs life skill strategies training, occupational therapy services are not yet part of the customary health care services provided to shelter residents within the United States (Koh & O’Connell, 2016). Another important aspect is the homeless population's fear of disclosing their housing status to healthcare providers due to poor treatment and care and the feeling that they are being treated without dignity (Pendyal et al., 2021).

When considering a theory, the Person-Environment-Occupation (PEO) Model closely aligns with the focused question. In this model, the environment is the “sum total of what surrounds a person” (Baptiste, 2017, p. 142). The components of the environment include physical, social, cultural, institutional, and virtual aspects that surround the person. According to Baptist (2017), the person is seen as unique and can assume many roles that allow for engagement in activities and occupations needed and desired. This can be a challenge for homeless adults due to the limitations of not having all the components necessary in their environment. According to Montgomery et al. (2016), homeless adults receiving temporary shelter services have unique stressors that can exacerbate mental illness. Although shelters typically provide three meals a day, a bed, and medical and psychiatric care, shelter life is often harsh, and residents may be exposed to violence, drug use, and theft (Montgomery et al., 2016).



This environment negatively impacts the homeless adult population through lack of occupational engagement and quality of life.

Purpose Statement

Homeless adults continually face occupational deprivation. There is a lack of reimbursement for occupational therapy community-based interventions (Gutman, 2021). This critically appraised topic aims to explore how educational programs will impact and influence positive occupational engagement and quality of life for homeless adults with mental illness.

Methodology/Key Findings

An initial literature search was conducted on March 3rd, 2022. Searches were related to occupational therapy, homelessness, and adults. Databases used include the Cumulative Index to Nursing and Allied Health Literature (CINAHL), Pubmed, and Embase. Literature was also collected from the Scandinavian Journal of Occupational Therapy (SJOT) and the American Journal of Occupational Therapy (AJOT). When searching for articles, the focus was directed toward homeless adults with mental health issues in the United States. The following terms were used to search databases: “homeless,” “homelessness,” “homeless person,” “adults,” “occupation,” “occupational therapy,” “North America,” “America,” “American,” “United States,” “mental health,” “mental illness,” “marginalized populations.” To advance the search in-depth, “AND” or “OR” were added between terms to create phrases within the search.

Limitations

Occupational therapy is a practical approach to reaching specific populations and the support and barriers they encounter. Many of the studies reviewed were found to have sampling bias, sample size issues, lack of randomization, and lack of follow-up data collection beyond intervention. The limitations section of a mixed-methods study by Sharon A. Gutman et al. (2019) indicated that small sample sizes could not be generalized to the larger population of homeless adults. Another limitation included the geographical region where this study was conducted. This study examined housing in New York City, making the findings not generalizable to other regions due to contextual differences (Gutman et al., 2019). A handful of the studies were also conducted in Canada; these studies addressed social interactions' impact on homeless adults (Estrella et al., 2021; Nelson et al., 2015; Patterson et al., 2015; Skosireva et al., 2014). Findings in a longitudinal study conducted by Nelson et al. (2015) indicated that negative social contacts and isolation were associated with adverse changes in their participants. Being under the influence of continuous heavy substance use was associated with adverse changes in social participation (Nelson et al., 2015).

Nelson et al. (2015) found that hopelessness was another factor linked to negative changes in the quality of life of homeless adults. The internal thoughts of recovering addicts should be considered when providing care due to reported feelings of not being good enough. (Nelson et al., 2015).

Types of Articles Reviewed

A total of 30 articles were reviewed, and 14 were selected for further review. Of the 14 articles reviewed in-depth, four were level I studies (Gutman et al., 2019; Marshall et al., 2020; Skosireva et al., 2014; Vogel et al., 2017), one was level III (Chang et al., 2015), and seven were level NA (Estrella et al., 2021; Henwood et al., 2019; Merrymen & Synovec, 2020; Nelson et al., 2015; Patterson et al., 2015; Simpson et al., 2020; Van Oss et al., 2019). Other resources reviewed included opinions from experts in the profession (Grajo & Gutman, 2019; Gutman, 2021). See Table 1.

Table 1



Types of Articles Reviewed

Author	Study Design/ Level of Evidence	Research Purpose	Population
Chang, et al. (2015)	Cross-sectional longitudinal study Level 3	The effect of life skills intervention on chronically homeless individuals	Homeless adults from the Housing First and Housing Stabilization Programs
Estrella, et al. (2021)	In-depth semi-structured interviews Level NA	Explored critical characteristics of housing and support for those with TBI and MHSU from service users and providers	Service users (16) and service providers (15) for 31 total participants
Grajo & Gutman, (2019)	Opinions in the Profession article Level NA	Articulates the distinct value and need for functional literacy development with the clients served	Those with disabilities that affect the ability to learn
Gutman, et al. (2019)	Matched group controlled study Level 1	Occupational therapy for stress management interventions	Sheltered homeless adults
Gutman, (2021)	Eleanor Clarke Slagle lecture Level NA	Addressed the need for intervention services within these populations	Marginalized populations
Henwood, et al. (2019)	In-person interviews Level NA	The impact of homelessness on mental health and disease over time	237 adults from permanent supportive housing agencies
Marshall, et al. (2020)	Systematic Review	To understand existing interdisciplinary literature of the occupational experiences for homeless persons	Studies on homeless adults (18+) living in middle and low-income countries



	Level NA		
Merryman & Synovec, (2020)	In-depth semi-structured interviews Level NA	Provider perceptions of new OT services for homeless adults to assist effective allocation of resources	Providers from the organization Federally Qualified Health Centers (FQHC)
Nelson, et al. (2015)	Narrative interviews Level NA	Looked at supports and barriers to housing and how it impacts other areas of life. Compared two programs to see how participants fared over time	219 homeless adults across five Canadian cities who were involved in Housing First and treatment as usual programs
Patterson, et al. (2015)	Narrative interviews Level NA	Explored the supports and barriers with housing services formerly homeless adults with mental illness faced	43 homeless adults with mental disorders assigned to the Housing First program
Simpson, et al. (2020)	Interviews and focus groups Level NA	Explored the potential needs of young adults in transitional housing to promote occupational participation	Nine young adults and four staff members in a transitional living facility
Skosireva, et al. (2014)	Randomized control trial Level 1	Exploring perceived discrimination among homeless adults with mental illness in healthcare settings	Homeless adults with mental illness registered with Housing First programming
Van Oss, et al. (2020)	Survey Level NA	Understanding unmet needs and identifying resources for the homeless population to use	Homeless adults residing in an emergency shelter setting
Vogel, et al. (2017)	Randomized control trial Level 1	Explored chronic pain among homeless people with mental illness and how it impacted their daily lives	Homeless adults with mental illness

Synthesis

Theoretical Base



This critically appraised topic (CAT) was looked at through the perspective of the Person-Environment-Occupation (PEO) model to better understand how environmental factors impact occupational engagement for the homeless population. The literature provided evidence that people who have experienced homelessness revealed engagement in community participation as a goal. Community participation can be defined as “active involvement in activities that are intrinsically social, and either occur outside of the home or are part of a non-domestic role, such as work, social (outside of the household), and other community roles” (Chang et al., 2015, p. 11,365, para. 3). Findings from a cross-sectional quantitative study indicate that environmental factors and limitations in activities need to be addressed to strengthen occupational engagement in community participation and other aspects of life (Chang et al., 2015.) A person’s involvement in the community may be lower when mental health and substance abuse issues are present, which can be impacted by the surrounding environment of shelters and other housing facilities (Chang et al., 2015). In a qualitative study conducted by Henwood et al. (2019), 38% of participants disclosed that they experienced major symptoms of depression coupled with a report of alcohol or drug use problems in 26% of respondents. Henwood et al. (2019) concluded that the physical environment of housing facilities and shelters may need to be modified to create a better fit to suit the capacities of those experiencing homelessness conjoined with mental health issues.

Role of Occupational Therapy

Benefits

Occupational therapy practitioners analyze environments to adapt or modify activities for individual participation (Van Oss et al., 2019). Van Oss et al. (2019) explained that higher rates of mental illness are more prevalent within the homeless population. Through the role of occupational therapy, practitioners must recognize the importance of meaningful activities, the homeless community's need for a sense of belonging, the identity of the individual, and transformational growth (Marshall et al., 2020). In a qualitative study conducted by Merryman and Synovec (2020), the authors explored provider referrer perceptions of occupational therapy services for homeless adults in Federally Qualified Health Centers (FQHC). Merryman and Synovec (2020) emphasized the importance of occupational therapists understanding a client's functional cognition better in order to determine what supports the client needs to live safely and independently. Based on this knowledge, OTs can support homeless adults experiencing mental illness and guide them toward specific programs that will help them increase occupational participation in their meaningful activities and quality of life.

The Housing First program implemented throughout areas of Canada offers a practical approach to reducing homelessness, emergency room use, and hospitalization (Nelson et al., 2015). The program’s policies encompass a variety of principles that are related to homeless adults. Principles include consumer choice, recovery orientation, individualized and client-driven support, and social and community integration (Simpson et al., 2020). The Housing First program is closely related to the values of occupational therapy and interventions related to the profession (Simpson et al., 2020). The program provides the homeless population with resources beneficial to their occupational engagement within their community and offers participants access to many different treatments and social services. (Patterson et al., 2015).

Limitations of Services

The homeless population has disadvantages due to their unfavorable environments; their ability to participate in and perform desired activities throughout their daily lives is restricted (Marshall et al., 2020). Barriers to successful occupational fulfillment include limited



opportunities for housing, leisure, transportation, education, skill-building, employment, and more (Van Oss et al., 2019). It is difficult for homeless persons to find housing because of the high demand for housing, making it difficult for occupational therapy practitioners to access this population and provide services (Estrella et al., 2021). Limited experience and minimal opportunities to practice occupations were also identified as challenges for the homeless population (Simpson et al., 2020). Homeless residents may experience executive functioning difficulties that lead to impulsivity resulting in rash decisions to quit jobs, leave safe shelters, and other decision-making difficulties (Simpson et al., 2020). Chronic pain has also been more prevalent for homeless individuals who have a mental illness, resulting in interference with the completion of daily occupations (Vogel et al., 2017).

Another disadvantage that homeless persons experience is barriers within the healthcare system. In a secondary analysis of data from a randomized control trial, researchers reported that homeless persons with some form of mental illness experienced more discrimination within the healthcare setting and are 32 times more likely to report discrimination concerning mental illness or substance use (Skosireva et al., 2014). Homeless persons also reported that the shelter rules restricted their meaningful occupations and gave a sense of being trapped in homelessness (Marshall et al., 2020).

Current Occupational Therapy Interventions

Educational Programs

Studies have shown that the implementation of educational programs can positively affect homeless adults who have some form of mental illness (Gutman et al., 2019). Education training programs consist of topics including anger management and conflict negotiations, meditation and breathing techniques, diet and nutrition, exercise, leisure exploration, recreation, sleep, hygiene, wellness recovery action plan (WRAP) construction, safety planning for self-protection, drug and alcohol awareness, money management, vocational and educational skill training, housing applications, safe sex practices, boundary establishment and limit setting, and literacy training (Grajo & Gutman, 2019; Gutman et al., 2019; Gutman, 2021). Occupational therapists acknowledge barriers and intervene to create better occupational outcomes (Van Oss et al., 2019). Educational programs have led to fewer hospital readmissions and better management of symptoms related to mental health (Gutman et al., 2019). Low literacy rates have led to occupational deprivation since many occupations require reading skills (Grajo & Gutman, 2019). Occupational therapists have the ability to address literacy as it relates to the promotion of occupational engagement. In a systematic review by Marshall et al. (2020), meaningful activities like working, community involvement, and helping others were identified to lead to a better sense of belonging among the homeless population. According to Estrella et al. (2020), education and awareness training for communities, property managers, and landlords were beneficial when accessing the homeless population. This awareness focused on debunking the stereotypes that homeless people would not pay rent, damage property, and cause trouble with other tenants (Estrella et al., 2021).

Summary

Overall, 30 articles were reviewed, and 14 were chosen for further review. The articles included topics on the impact of services, access to programs, and the benefits that occupational therapy can provide. The following main points were found:

- Educational programs implemented within communities of homeless adults have a positive impact on occupational engagement (Grajo & Gutman, 2019; Gutman et al., 2019; Gutman, 2021; Van Oss et al., 2019).



- Environmental barriers lead to a lack of occupational fulfillment. People engage in meaningful occupations consistently throughout their life, and a lack of resources leads to poor outcomes (Chang et al., 2015; Henwood et al., 2019; Montgomery et al., 2016; Simpson et al., 2020; Van Oss et al., 2019).
- The prevalence of mental illness in homeless adults is important when considering environmental factors, social interactions, and quality of life (Chang et al., 2015; Gutman, 2021; Henwood et al., 2019; Skosireva et al., 2014; Van Oss et al., 2019).

The objective of researching this literature was to identify the relationship between homeless adults and their quality of life through occupational engagement and how it is impacted within communities. A literature review indicated the positive impact of educational programs and services that influence occupational engagement.

The Clinical Bottom Line

How does the implementation of educational programs for sheltered homeless adults ages 18 and older who have mental illness influence their positive occupational engagement and quality of life?

Based on the literature reviewed for this critically appraised topic, homeless adults continually face occupational deprivation. There is a lack of reimbursement for occupational therapy community-based interventions. This critically appraised topic aimed to explore how educational programs have impacted and influenced positive occupational engagement and quality of life for homeless adults with mental illness. To understand how the occupational engagement of homeless adults is being impacted, the PEO model was used to analyze the interaction between the person, environment, and occupation (Baptiste, 2017). The physical environment of housing facilities and shelters may need to be modified to create a better fit to suit the capacities of those experiencing homelessness and mental health issues. Environmental factors and limitations in activities need to be addressed to strengthen occupational engagement in several aspects of life. (Chang et al., 2015; Estrella et al., 2021 Gutman et al., 2019; Henwood et al., 2019)

Practitioners must recognize the importance of meaningful activities, the need for a sense of belonging, the identity of the individual, and transformational growth for homeless individuals (Marshall et al., 2020). Within the interprofessional team, occupational therapists can provide support to homeless adults experiencing mental illness by evaluating their environment to promote safety and independence. Occupational therapists can implement intervention methods to positively impact the quality of life of their clients. (Grajo & Gutman, 2019; Gutman et al., 2019; Gutman, 2021; Marshall et al., 2020; Merryman & Synovec, 2020; Van Oss et al., 2019) A major intervention technique found across research is the implementation of educational programming. Educational programming can be targeted toward a plethora of occupational areas of interest. Occupational areas of interest include anger management and conflict negotiations, diet and nutrition, leisure exploration, sleep, hygiene, wellness recovery action plans, overall safety, drug and alcohol awareness, money management, vocational and educational skill training, literacy training, housing applications, and several more. Occupational therapists can address literacy training as it relates to the promotion of occupational engagement, like applying for Housing First Programs that allow individuals to receive quick and easy access to housing and other training services (Grajo & Gutman, 2019; Gutman et al., 2019; Gutman, 2021; Marshall et al., 2020; Merryman & Synovec, 2020; Patterson, 2015; Simpson et al., 2020; Van Oss et al., 2019).



Implementation of educational programming aimed at various aspects of life is crucial for adults experiencing homelessness since mental health issues are eminently found within this population (Chang et al., 2015; Henwood et al., 2019; Skosireva et al., 2014). The sensation of hopelessness is overwhelmingly present in individuals of this population (Nelson et al., 2015). Overall, occupational therapy practitioners must increase their awareness and provide supportive services to homeless adults with mental illness.



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