

## Literature Review #2

**\*\*This review is organized more thematically, focusing on specific subgroups of individuals (LGBT youth, individuals, families) affected by mental illness and the different economic and policy factors influencing destitute conditions.**

### Paper #1

**Title:** (LGBT) Youth in New York City: Insights From The Field

**Authors:** Nicholas Forge, Geoffrey L. Ream (2014)

**Summary:** Forge and Ream (2014) focuses on the unique challenges faced by homeless LGBT youth in NYC, highlighting **significant health disparities and service discrepancies**. The study reveals that LGBT youth are at **more risk for victimization, sexual risk behaviors, and substance use compared to heterosexual youth**. Though LGBT-specific shelters and transitional living programs are there, a plethora of mainstream services neglect this population and lead to their further marginalization. The authors argue and emphasize the need for **more targeted interventions and increased capacity of LGBT-specific services** to effectively address the health needs of this vulnerable population.

### Methodologies:

1. NYC Health Service **Database Management & Analysis/Reports** from Homeless Advocacy Groups
2. Review of **Existing Literature, peer-reviewed journal articles, and systematic literature review**.
3. Real-time fieldwork, including **volunteering and consultancy roles** in LGBTQ+ homeless youth organizations in New York City.

### Goals:

1. To assess the health status and service of **homeless LGBTQ+ youth in NYC**.
2. To evaluate the **effectiveness of existing services and identify gaps** in service output.
3. To develop **potential improvements within service delivery** to better meet the needs of the target population.

### Results and Discussions:

- Homeless LGBTQ+ youth are **more likely** to experience **victimization, substance use, and mental illness**. A longitudinal study revealed that youth involved in health risk behaviors at intake often stopped their behaviors post-moving into a transitional program center—disputing the notion that **a majority of these youth already have experienced challenging addiction problems with drugs or alcohol**.

- **Service Gaps** are a pervasive issue amongst homeless LGBT youth intervention programs, resulting in inadequate support. One possible solution is **emergency shelters working with families to reintegrate youth and bring stability**.
  - **Possible partners:** colleges, universities (educational institutions, in general)
  - **Conflict with parental figures** was noted as the primary reason for homelessness in many cases. For example, at a NYC emergency shelter, 47/188 intakes cited ***non-abuse-related conflict with parents as the reason for homelessness***).

## **Paper #2**

### **Title: Homelessness and Mental Health in NYC: An Overview 1994 - 2006**

**Summary:** Valencia et al. (2011) provide a comprehensive overview of the intersection between homelessness and mental health from the mid-to-late 1990s to the early 2000s. The report, sourced from NYC Shelter System Register data (**\*\*\*this is available publicly on the city department website**), reveals alarming health disparities within the homeless/unhoused population. The authors primarily critique the crisis management approach of NYC's shelter system, which focuses more on immediate needs rather than addressing the root causes of homelessness. They advocate for a shift towards a holistic approach to reducing homelessness, focusing on mental health support and long-term solutions.

### **Methodologies:**

1. Analysis of NYC Shelter System Register data and primary reports on homelessness and mental health.
2. Literature review from peer-reviewed journals and citywide government reports.

### **Goals:**

1. To assess the health status and service needs of homeless LBGT youth in NYC.
2. Evaluate the effectiveness of existing services and identify gaps in service provision/suggest improvements.

### **Results and Discussions:**

- The homeless population in NYC exhibits higher rates of HIV/AIDs, tuberculosis, and substance use disorders. In 2006, NYC's homeless population was estimated to be ~40,000 for any single day.
  - $\frac{2}{3}$  hospitalizations were due to substance/alcohol use or mental illness. The death rate, itself, was twice of the NYC population, and the tuberculosis rate was 11x higher.
- Baseline Stats: 1994 - 2004, NYC shelters served around 416,720 individuals, including ~164,000 children. The majority came from impoverished areas, and many came from incarceration, streets, and hospitals. The majority were minorities, specifically African Americans.

## Paper #3

### Characteristics of Mothers and Infants Living In Homeless Shelters and Public Housing in NYC

**Authors:** Kathleen H. Reilly, Regina Zimmerman, Mary Huynh, Joseph Kennedy, Katharine H. McVeigh (2019)

**Summary:** Reily et al. (2019) focus on the **health outcomes of mothers and infants living in NYC homeless shelters compared to those in public housing.**

The study itself finds that mothers in shelters are generally more young and more likely to belong to a minority group. The infants are also predicted to have lower birth weights, be born preterm, require assisted ventilation, and be admitted to the NICU. These families are shown to be more likely to use Medicaid compared to public housing families.

#### Methodologies:

1. Matching of NYC Department of Homeless Services shelter addresses and NYC Housing Authority developments to the NYC Department of Health birth certificate data from 2008-2013.
2. Comparison of sociodemographic and health characteristics -> chi-square tests.

#### Goals:

1. To compare **health outcomes of mothers and infants in homeless shelters with those in public housing.**
2. To identify **health disparities and suggest policy initiatives** to address these disparities.

#### Results and Discussions:

- **Infants in homeless shelters** are more likely to have poor health outcomes, such as **low birth weight and preterm birth.**
  - 9.3% had low birth weight, and 13.2% were born preterm, compared to 7.6% and 10.4%, respectively, in public housing.
- Homeless mothers' infants were less likely to be ***breastfed (60.3 % vs 67.1%) and more likely to use Medicaid (89.5% vs 84.2%)***
- **Gestational Issues:** higher rates of gestational diabetes, gestational hypertension, and anemia during pregnancy were noted among mothers in homeless shelters.
  - **Solution:** There is a dire need for **evidence-informed support services targeting homeless infants and their mothers.**
  - Programs like the **Newborn Home Visiting Program (NHVP)**, which provides comprehensive support, can potentially reduce these health disparities.

## Paper #4

**Title:** The Age Structure of Contemporary Homelessness

**Author:** Culhane et. al (2013)

**Summary:** This paper investigates the **housing and neighborhood characteristics that impact the risk of homelessness in NYC**. The study aims to *identify specific factors that increase the likelihood of becoming homeless* and *provide insights for targeted interventions*.

### Methodologies:

1. Administrative Data: The researchers used administrative data from NYC, including **housing records, neighborhood characteristics, and individual demographics**.
2. Various statistical models assessed the relationship between housing neighborhood characteristics and individual demographics.

### Results and Discussions

- **Risk Factors:** **Poor housing conditions, high rent burden, and neighborhood crime rates** were found *to significantly increase the risk of homelessness*. The lack of affordable housing and social services further exacerbated the problem.
- **Policy Implications:** The findings emphasize the need for policies *that address housing affordability and neighborhood safety* to reduce the risk of homelessness. Hence, more calls are made for more significant investments in **affordable housing and community development programs**.

**\*\*This paper, however, needs more granular data to understand better individual experiences and the nuanced implications of different housing and neighborhood factors.**

- **Limited exploration of individual-level psychological factors and potential bias in administrative data/limitations in capturing the whole experience.**

**\*\*Further research** is needed to explore **long-term effects accurately**.

## Paper #5

**Title:** Hospitalization Costs Associated With Homelessness In NYC

**Author:** Salit et al. (1998)

**Summary:** Salit et al. examine the hospitalization costs associated with homelessness in NYC. It compares the **length of stay and reasons for hospital admission among homeless individuals and other low-income groups** *to estimate the excess costs due to homelessness*.

## Methodologies:

1. Researchers analyzed hospital discharge data for **18,864 admissions of homeless adults and 393,986 nonmaternity admissions of other low-income adults in NYC's public general hospitals during 1992 and 1993.**
2. **This paper adjusted for differences in length of stay for diagnosis-related groups, principal diagnoses, selected coexisting illnesses, and demographic characteristics.**

**\*\*Strength Here -> clear identification of cost drivers** associated with displacement/homelessness.

## Results and Discussions:

1. **Costs & Lengths of Stay:** Homeless individuals had ***significantly more extended hospital stays and higher hospitalization costs*** compared to other low-income patients. Substance abuse and mental illness were the primary reasons for admission among homeless patients.
2. The study found that **~52% of homeless admissions** were for treatment of substance abuse or mental illness, compared to **~23% for other low-income patients.** Additionally, **~20% of homeless admissions** were for trauma, respiratory disorders, skin disorders, and infectious diseases.

**\*\*\***More comprehensive data on disenfranchised populations' health status and service usage is needed to address their healthcare needs better.

**[Overall, this paper suggests further investigation into long-term cost savings of providing free housing and supplementary services to homeless individuals]**