

# Beyond the Medical Model: Managing Diabetes and Chronic Disease through a Social Determinants Lens

Wednesday, May 16, 2018





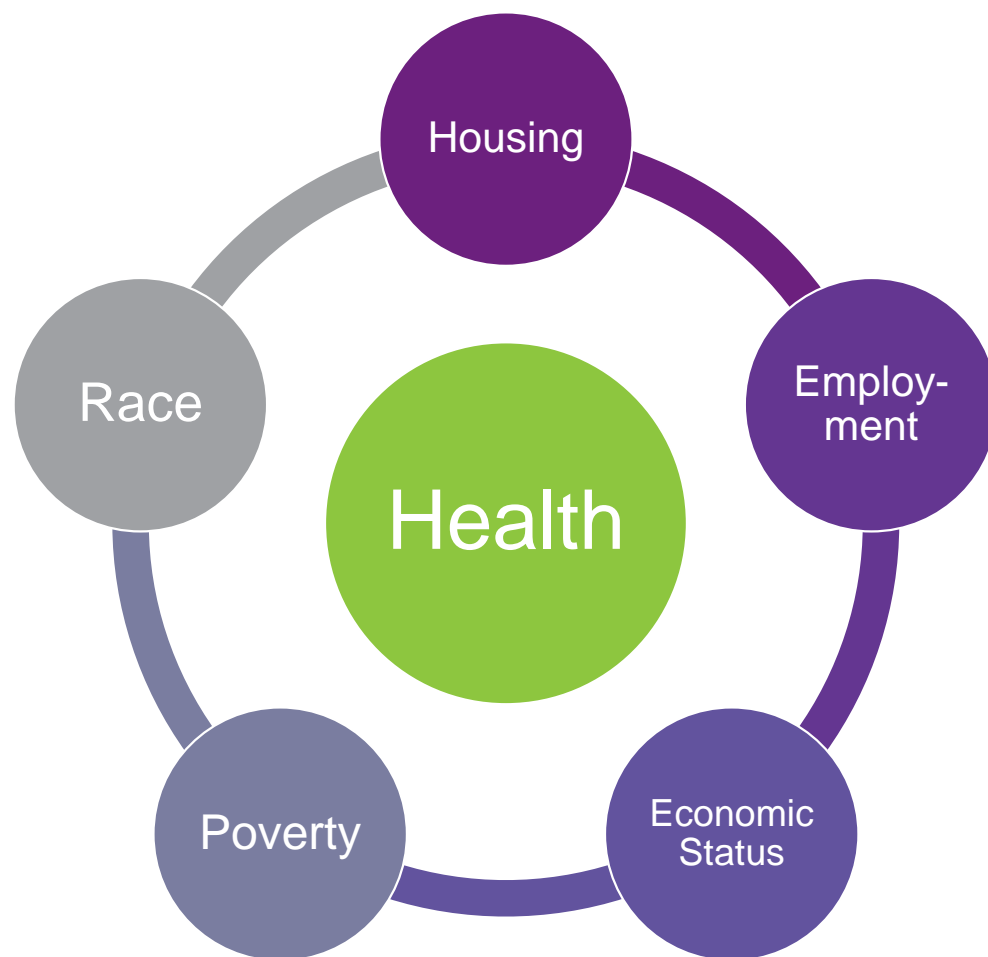
# Housing is Healthcare



- Poor health puts one at risk for homelessness
- Homelessness puts one at risk for poor health
- Homelessness complicates efforts to treat illnesses and injuries

“...circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.”

- World Health Organization



What is  
Supportive  
Housing?

**Permanent**  
**Affordable**  
**Independent**  
**Tenant-Centered**  
**Flexible**  
**Voluntary**



# Introduction to Partnerships

- The past few years have brought new regulations, funding opportunities, and priority shifts
- Result has been a game changer for health, housing, and supportive services for vulnerable populations
- The ACA has expanded access to care for many vulnerable populations
- New opportunities to meet the health needs of this population via partnerships between health and housing sectors



# Benefits of Partnership

## How Housing helps Health Centers:



- Care Coordination
- Broad Reach
- Development of Collaborative Systems

## How Health Care Helps Housing



- Outreach Ability
- Access to Healthcare Delivery
- Increase Preventative Care

# Health Center + Housing Models



## On-Site Health Center

Health Center (e.g. FQHC) is co-located with single site supportive housing.

Works well with a high-need population



## Off-Site Health Center

Patients can live in either single site/scattered site housing

Increases clients connections beyond housing into the community

Proximity and transportation are important



## Mobile Services Model

Provides healthcare out of a clinic and in the community

Works with both single and scattered site housing



**Supportive  
Housing  
Learning  
Collaborative**

# Themes

What We've Learned

# Barriers

Client Level

Staff Related

Systemic

# Barriers

## Client Level

- Not a high priority when dealing with profound competing priorities
- Lack of understanding of the disease
- Limited options for healthy foods
- Distrust of health care system – as result of a mental health or general distrust
- Medication adherence
- Hopelessness or inevitability when friends and family have diabetes or died from associated complications

# Barriers

## Staff Level

- For those without experience, diabetes seems complicated and confusing. Some diabetes symptoms mimic those of a mental health challenge
  - Particular challenge for those without a health/clinical background
- Lack of training/uncomfortable with discussing diabetes with tenants
- Navigating your role as a housing provider
- Being creative around engagement

# Barriers

## Systemic

- Fragmented health care system that doesn't address whole-person care needs. Current system not patient-centered.
- Lack of trust/perceived miscommunication with health care system
- Social determinants such as transportation, food insecurity and costs of healthy food
- Insurance coverage inconsistencies
- Long waits in waiting rooms
- No income/SSI
- Access to safe places to engage in physical activity

# Opportunities

Tenant Level

Staff Related

Systemic

Successful Interventions

# Opportunities

## Tenant Level

- Attending doctor visits with tenants to help ensure they are getting
- Building relationships with clients and taking their concerns seriously
- Going grocery shopping with tenants to help understand ingredients
- Medical liaisons that assist with health education and med management
- Empowering tenants to self-manage diabetes
- Effective care coordination

## Staff Related

# Opportunities

- Motivational Interviewing; Harm Reduction
- Having an onsite nurse



## Systemic

# Opportunities

- Promoting conversations about housing and health

# Opportunities

## Successful Interventions

- NP on site to help with building bridge between housing and health; home visits
- Healthy cooking classes
- DEEP program
- CDSMP/ Stanford Model
- Peer support
- Community Health worker models
- Walking groups
- Linkages with Farmer's Markets. Markets accepting EBT
- Certified Diabetes Educators
- Partnerships with local nursing school programs

# Housing as a Hub for Vulnerable Populations

- Tenants of supportive housing have a high burden of chronic health conditions, with mortality rates that are 3-4X higher than the general public
- Health care becomes “relevant” with housing
- Housing is a key factor for health promotion, but alone is insufficient

---

# THANK YOU!

---



stay connected



[csh.org](http://csh.org)

# Discussion