

Serving the Underserved:

Medical Residents' Experiences Working with Ventura County's Backpack Medicine Program

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EXECUTIVE SUMMARY

- ❖ ***Research origins and goals:*** The research was conducted through a partnership between the Health Science Program at California State University Channel Islands (CSUCI) and Backpack Medicine. Interviews were conducted by students as part of their senior Capstone project. The main focus of the interviews was to gather data based on the experiences of those involved with Backpack Medicine and to learn about how they serve the homeless populations in Ventura County communities. The findings of the research were analyzed to pinpoint specific health issues within these communities, the work Backpack Medicine does to address these issues, and the work that they could be doing in the future.
- ❖ ***Research methods:*** Research included qualitative interviews conducted with seven participants, all with varying roles within the Backpack Medicine organization in order to provide a wide enough range of experiences.
- ❖ ***Initial and current involvement:*** Most of the members involved with Backpack Medicine have previous medical experience or have worked with the homeless population. Some have been in a position where they have seen how much those who are homeless struggled with health issues and social stigmas. In addition to the medical residents who provide medical care through Backpack Medicine, there is also support from law enforcement and drivers that take patients to appointments and others who address administrative aspects.
- ❖ ***Sources of satisfaction and challenge:*** Respondents felt satisfied when their patients returned for follow up treatment and/or continued to progress in their healthcare goals. Individuals that work in Backpack Medicine stated that some challenges they saw their patients deal with were motivation, the negative imagery on the homeless population, isolation from pandemic that extended to loss of jobs, and the difficulty of continuing to seek help.
- ❖ ***Future involvement:*** All interviewed participants stated that they want to continue their work with Backpack Medicine. Many wanted to add to their involvement and better the public's perception of the homeless population.
- ❖ ***Needed support and encouragement:*** Participants identified that resources and services must be more readily available to the populations they serve in order to properly care for their needs in the future.

Introduction: Homelessness and Healthcare in the United States

Homelessness is one of the nation's largest and most pressing social issues, with the US Department of Housing and Urban Development reporting that 580,466 people within the US were homeless on a single night in 2020 (U.S. Department of Housing and Urban Development, 2021). Individuals or families who do not have a definite, regular, and suitable nightly shelter, including those residing in emergency housing, temporary shelters, or areas not intended for occupancy, are considered homeless. People experiencing homelessness is not a new phenomenon within the state of California. The United States Interagency Council on Homelessness reports that “As of January 2020, California had an estimated 161,548 experiencing homelessness on any given day” (USICH, 2020), which accounts for more than a quarter percent of the homeless within America. During the point in time count conducted on January 28th, 2021 by the Ventura County Continuum of Care Alliance, the homeless population in Ventura County was recorded at 1,743 persons; however, this number only includes people in emergency shelters, hotels, and in emergency care or safe havens and therefore does not take into account other individuals who may not have been in those locations (Ventura County Continuum of Care Alliance, 2021).

People experiencing homelessness face many challenges when it comes to their health access and outcomes, such as receiving healthcare services, getting help for mental health issues, substance use or abuse problems, and so on. With complex social, physical, and mental situations, each person experiencing homelessness cannot be helped in the same way. Each individual case may require various services, and sometimes these can be hard to provide all at once, creating an issue for addressing people’s needs holistically. Many organizations around the country and within the state have recognized this issue and have been created to help fight this

problem. One such organization within Ventura County is Backpack Medicine. Backpack Medicine is part of the Ventura County Medical Center and works with local organizations to bring healthcare and social services to unhoused people in the county.

The Backpack Medicine organization is meant to meet individuals where they are, addressing the particular needs and situations of people who are homeless. The homeless populations served by Backpack Medicine experience a range of health and social issues that impact their ability to access care and achieve good outcomes. Studies have documented the range and root causes of many of these issues. In this study, conducted by students from California State University Channel Islands (CSUCI) under supervision of their professor, Dr. Lydia Dixon, the goal was to gather data based on the experiences of those involved with Backpack Medicine and to learn about how they serve the homeless populations in Ventura County communities. The findings of this study were analyzed to better understand specific health issues faced by these communities, the work Backpack Medicine does to address these issues, and the work that they could be doing in the future.

The following sections provide background information on the major health issues faced by the homeless, their barriers to care (including issues of trust and relationships with providers), and examples of successful interventions. The data reveal how Backpack Medicine is able to build long lasting relationships with patients and improve health outcomes for a population that has been marginalized from the traditional healthcare system.

Major Health Issues Faced: Homeless individuals face a unique set of health issues due to their unhoused status. Often, these health issues appear from circumstantial factors such as unhygienic facilities and crowded shelters that can lead to an increased risk of diarrheal disease and tuberculosis, due to an increased exposure to pathogens (Liu et al., 2020). Experiencing a

complete physical lack of shelter can exacerbate these health issues, as studies show that most deaths among the homeless occurred in cold weather with the cause of death being recorded as hypothermia (Romaszjo, 2017). A lack of housing also leads to a greater risk of individuals being immersed in substance abuse issues, including smoking, as well as contracting communicable diseases. Communicable diseases are also known as infectious diseases or transmissible diseases, which are illnesses that result from the infection, presence and growth of pathogenic (capable of causing disease) biologic agents in an individual human. Focusing on the root of these health issues and taking steps to help individuals' basic needs, such as housing, and physical needs, such as access to healthcare, is a crucial step in fixing the various health issues seen in the homeless communities.

Barriers to Care: However, barriers, or reasons people have trouble gaining access to care, are plentiful for the homeless population. Barriers to care are broken down into two primary categories: limited housing options and the inability to receive healthcare due to a lack of transportation. Roughly about 3 million people have a hard time finding shelter/housing and 9 million people experience hunger in the United States (Kushel et al., 2006). In terms of social requirements, homeless people expressed a lack of access to services that are often disregarded by mental health services which in turn made them feel abandoned and led them to believe that seeking help is pointless or that care facilities did not accept them. The homeless population experiences a number of obstacles to receiving basic care, including lack of insurance or sufficient income to cover copayments and difficulty scheduling follow-up (or receiving information about) appointments. Offering multiple services such as housing and supportive case management will lead to better health and stability in their lives. The stability that most homeless people need to fix and address are mental health issues, physical health, addictions, and more.

Breaking these barriers and providing what is needed for them will drastically improve health outcomes and decrease mortality rates.

Trust/Patient Relations: Unfortunately, offering medical services and housing support for homeless populations is not sufficient to fully reduce health disparities. Studies have shown that a lack of trust can thwart efforts to help the homeless, and that building trusting relationships is key to creating meaningful interventions. Trust is a very important factor when getting people experiencing homelessness to want to receive care. Without trust, patients will often feel as if they will be judged or taken advantage of in their visit. It is important for practitioners aiming to help the homeless to be aware of the barriers to trust, as well as how to break through them. Some of these barriers include cognitive reasons such as being fatalistic about their health, being in denial about their situation, presuming that whatever care they receive will be poor or discriminative, and blaming oneself for their illnesses and therefore not reaching out for help (O'Carroll & Wainwright, 2019). There are also emotional reasons that people do not have inherent trust in the medical system, such as being embarrassed or fearful of practitioner reactions, being hopeless when it comes to health outcomes, and having poor self-esteem (O'Carroll & Wainwright, 2019). Those feelings of mistrust may prevent some homeless individuals from avoiding medical care even when they need help.

Potential patients have often heard stories of how asking for help has landed their fellow homeless peers in trouble, either with the law or with the practitioners themselves, and often decide not to seek care for that reason. Practitioners who are able to break the barriers to trust often find that helping one person and gaining their trust will open the door to helping many others in the homeless community. Word of mouth is key in the trust of prospective patients, and while gaining it can be taxing and seemingly tedious, it is the only way to ensure the high

mortality rates of homeless persons begins to go down. Part of the reason trust is so broken between practitioners and their potential patients is due to the belief that many practitioners view the patient as a problem to solve, rather than as a human in need (Davenport, 2000). The patients may feel as though the practitioner is rushing them out the door in order to see their next patient in order to get the day done faster. They must be assured that this is not the case, and that they are there to guarantee the best care possible for the individual. It is also important to understand that these people need to be spoken to without large amounts of medical jargon, and in a way that is clear and concise that ensures they understand their potential conditions and the steps needed next.

Interventions: Successful interventions must take into account the primary health concerns and barriers to care, as discussed above. There are several interventions in place to help overcome homelessness and assist in treating the health issues that the homeless may have. Interventions should always include a holistic approach. Homelessness is not just one issue, but many issues that all play a part in why a person ends up homeless, which is why there needs to be a systematic approach to the problem that is homelessness. By providing better access to housing, health care, and nutritious food, homeless people can receive the support they need to get to a better place so they no longer have to live the way they do or that their lifestyle is made healthier and filled with less uncertainty (Kushel et al., 2005). Backpack Medicine does this by creating a systematic approach by offering different services when going out to homeless encampments. With this approach, they are able to reach more people in helping them with their specific needs tailored to each individual.

Methods

This research project was conducted as part of a Senior Capstone course in Health Science at California State University, Channel Islands (CSUCI) by a group of students under the guidance of their professor, Dr. Lydia Dixon. The students used qualitative research methods to learn about the experiences of Ventura County's Backpack Medicine staff as they serve local homeless populationsⁱ. The goal was to understand how Backpack Medicine addresses specific health issues among these populations, and to identify ways that the community can better support their efforts.

To begin developing themes and focal points in our research, student researchers read and reviewed peer reviewed articles and Ventura County reports. Students discussed themes, then collected, read and reviewed a second wave of sources. Once the current research was reviewed and noted, the students began their communication with the Backpack Medicine team. A list of willing participants was provided by Backpack Medicine, and students reached out with a recruitment email to set up convenient meeting times.

The primary data collection method for this research was through semi-structured interviews conducted on Zoom with staff and medical providers who work with Backpack Medicine. Students started the interview by reviewing information regarding privacy, describing how participants' responses would be used, and asking for verbal consent for participants. Students also asked permission to record participants' on Zoom to have a better record of transcripts to use for data analysis.

The interview questions were developed by students, based on their reading of the literature and in consultation with Professor Dixon and were approved by the CSUCI IRB office (Study IO5605) and all students completed necessary training in research ethics. All research

participants were asked identical questions in identical order, although open ended questions were utilized to provide each group with unique responses personal to each of the interviewees. In addition, students asked follow up questions that varied depending on the participant, their background, and their expertise. Upon the completion of all interviews, the transcripts of each individual question were copied into the same document, where research students were able to compare and reflect upon each question individually. Themes were extracted from question groupings and were cross examined with the earlier literature. After quotes and references were collected that best aligned with the given questions, responses of Zoom interview participants were then utilized. This was kept under several word documents to better analyze each question in comparison to data.

Lastly, students grouped question responses by topic into subject areas, which comprise the findings section of this report. These sections were formed by incorporating all interview questions into themes and analyzing the responses within each theme. Sections were refined and organized in a manner that allowed for a clearer understanding of our findings and their meaning. The following sections go into detail about these findings; the conclusion section builds on these findings to point to broader connections and recommendations.

Findings

This section presents the main findings of this research project. It is divided into the themes identified through interview data, which include: the professional backgrounds and experiences of the Backpack Medicine staff; the work that the Backpack Medicine organization does; the main health issues faced by the homeless populations they serve; and the role and impact of their community outreach efforts.

Professional Backgrounds of Backpack Medicine Staff

This subsection describes the backgrounds, experiences and motivations of the staff and physicians that work for and with Backpack Medicine.

Occupations: When looking at the organization Backpack Medicine and its role in serving the Ventura County community, it is important to understand that there are professionals with a variety of backgrounds and occupations working together. Included in the group of respondents interviewed in this project were an addiction treatment counselor, a community service worker/brand ambassador, a behavioral health planner, and four physicians, all of whom practice family medicine within Ventura County. Among the physicians, two help manage the Backpack Medicine' program and the medical residents that are part of that program. The wide variety of professional backgrounds and expertise across its staff allows Backpack Medicine to provide multiple layers of care such as physical health services, mental health services, and social services that help connect patients with housing services.

What drew them to work with Backpack Medicine: One of the questions in this study sought to understand how and why these diverse professionals came to work with the population Backpack Medicine serves. With such a variety of specialists working for this organization, individuals' stories of how they came to work with the homeless varied, though many revolve around the shared goal of wanting to help others, especially those experiencing homelessness.

The physicians who provide the direct care to the homeless in Backpack Medicine came into this line of work in a variety of ways. One of the physicians practicing family medicine had been working within this community through one of the local hospitals in the area and was also working at the Skid Row Medical Clinic. Not all of them started out their careers working with the homeless, however. One physician was actually a traveling musician who got inspired to go

back to school through working at a men's homeless shelter as a case manager and resident supervisor. That experience helped him realize the needs of this population. Another physician had a deep passion for science that pushed them into this career path. One physician described how they had originally attended school for political science, but then became a dialysis technician; this led them to attend medical school and they have been practicing since. Having diverse backgrounds of their caregivers allows Backpack Medicine to tackle issues from different angles.

Other staff members described a range of life and professional experiences that led them to work with Backpack Medicine. All except one had previous experience working with homeless populations, ranging from homeless shelters to other medical clinics like Skid Row Medicine Clinic. It is clear from our findings that the participants have a drive to help others and felt that working with Backpack Medicine would gratify that drive.

Not surprisingly, the majority of these professionals have had a lot of experience working with this population even before working with Backpack Medicine. The Addiction Treatment Counselor explained that their primary goal was to work with those who lacked resources, which is why they are so fond of Backpack Medicine; not only does it help people, but it connects them to services through other agencies such as Salvation Army, Turning Point, local churches, and law enforcement. Another physician described how, once they learned about the health disparities the homeless face, they wanted to do something to help, and Backpack Medicine presented a way to do that.

Helping others was not the only motivator to work with Backpack Medicine, however. One physician expressed that they were motivated to work for Backpack Medicine because they felt it would be a good career, as it is constantly changing and therefore they need to adapt and

constantly learn new things. He also described the satisfaction he got from working with diverse populations as an additional motivator.

Challenges and Successes of Being Part of Backpack Medicine

This subsection describes research findings related to the challenges and successes of the Backpack Medicine program, as well as the impacts of this work on the staff and physicians.

Building Rapport: Gaining patients' trust can be difficult in any medical situation, but this process can be especially hard with the homeless population served by Backpack Medicine. When asked about how they establish trust and build rapport with their patients, participants described various strategies that they employ, which they learned from their experiences working in related fields over time. They emphasized that building trust with patients takes time and noted that patience was a key attribute needed for this line of work. One participant noted that, "Most people will not even talk to you the first 3 weeks." However, they explained that this initial resistance fades once people see what Backpack Medicine can do. The participant went on to explain that what often happens is that "one person will get treatment and then it will kind of snowball." Another respondent described this process of building trust as similar to planting a seed. They said that this process entails "making the first contact and letting the people see them and what they do, also letting them know exactly what they do and what they can do to help but ensuring that the people have a choice and autonomy. They also try to help the patient understand that they can only meet them where they are at, and they will have to put in effort to improve."

Part of the process of building rapport involves approaching patients in ways that do not scare them off. Participants explained that many patients were nervous about or distrustful of law enforcement or government agencies, which could make them less likely to seek help. When

Backpack Medicine arrives with a whole team of partner organizations that includes law enforcement and government programs, they have to be especially careful to put potential patients at ease. One way that respondents do this is through treating each individual as a human being and by being honest with them from the start. One respondent emphasized that they do not “sugarcoat” anything with their patients, but rather they are direct and clear about what they can do and the fact that it is up to the patient to follow or not follow the recommended treatment plan. However, respondents emphasized that they also approach patients with kindness. One physician described how she greets potential patients by saying, “I’m here to help you. What can I help you with today?” She explained that “We know it is intimidating when the whole team shows up, so our main focus is for one person to make a connection. We have to recognize that it’s okay if we personally aren’t making the connection and to let someone else make that connection.”

Respondents reported that, overall, homeless patients trust and appreciate the members of Backpack Medicine. They also noted that whenever the Backpack Medicine team comes out to serve the community, the patients are excited to see them. Building trust is a critical aspect of any work with homeless populations, and it is evident that Backpack Medicine is able to be so effective in part because of their ability to build trust.

Impact on Patients and Staff: Physicians and staff members working with Backpack Medicine face many challenges in their work, yet they also feel pride when they see the positive outcomes among their patients. When asked about the impact when serving patients in Backpack Medicine, staff and physicians provided many heartwarming stories. Of course, not all patient stories participants told were positive. The physicians mentioned that many of their patients do

not come back and/or experience a drug or alcohol relapse. This can be difficult for the Backpack Medicine team to learn about, though they continue to reach out to offer assistance.

Participants noted that their patients are often coping with challenging situations related to their housing, substance abuse, and health concerns. Often these situations exacerbate each other. For example, one physician described a man who they treated for emphysema (lung infection) due to unsanitary needles being injected into the veins, a practice which played a big part in the infection. Unfortunately, the patient never followed up with the doctor, which led to him being hospitalized six months later with botulism (a condition caused by toxins produced from bacteria). The patient is now doing much better and receiving the right medications and does follow up with the doctors to reduce opiate cravings.

Participants described how, when dealing with substance abuse, some patients fall back into it after treatment, which worsens their health conditions. The physicians and other Backpack Medicine staff cannot force patients to stay on track; ultimately it is up to the patient. However, Backpack Medicine's goal is to provide all the resources possible for their patients. Participants noted that the experience of coming into contact with patients suffering from different kinds of conditions leads them to learn new things about the patients, which continuously helps them to stay motivated and improve their services.

On the other hand, positive patient stories left participants feeling reinvigorated and reinvested in the work. For example, one participant told the powerful story of a woman in her 30s who sought help from Backpack Medicine to hopefully receive the right care regarding her alcohol and drug addictions that had previously led to many hospitalizations. After working with Backpack Medicine and receiving the right services, she later found a steady job, married happily, had her first child, and is gladly living a healthy lifestyle.

Impact on the Residency Program: Participants described many impacts of the Backpack Medicine and the Ventura County Family Medicine Residency Program on medical residents' training and professional goals. For example, one respondent explained that it gives the people in these programs a sense of what is going on in the neighborhood and a glimpse into what patients go through on a daily basis as a result of homelessness. This also teaches students by sending them out into the community to help and care for those who are unable to go to a hospital and offers them a lot of experience dealing with patients. Another respondent discussed that the county residency program has done an excellent job of preparing doctors to work in a variety of settings, including hospitals and clinics. The program educates clinicians on how to treat any patient who walks through the door. Community health rotation allowed them to learn about what's out there, such as Backpack Medicine. They learn how to diagnose and treat disease, but there are other elements at play, such as a lack of transportation and food at home, that contribute to the homeless population's illnesses. Backpack Medicine provides onsite access to the type of care that an aspiring family physician wants as the organization is able to meet a person at the place that they are located and helps them provide and get close to the core of full spectrum family medicine.

Most Common Services: Participants described a range of health and social services that were most commonly used by Backpack Medicine patients. Multiple respondents stated that housing support was the number one service that the homeless were looking for. One respondent in particular mentioned that this led the state to realize that housing is one of the first steps in helping people, because without housing they cannot adequately take care of their other needs, including their health. Another respondent noted, however, that despite the urgent need for housing, it continues to be an extremely limited resource. The other most common services their

patients need are related to mental health and addiction counseling. Counseling can help people overcome past trauma or mental and emotional blockages, so that they can minimize stress and anxiety, avoid emotional triggers, build healthy relationships, and make positive choices regarding their health and safety.

Specific Health and Social Issues Faced by Patients

The following section describes the primary health issues faced by the patients served by Backpack Medicine and how the providers deal with those specific issues. While the below list does not contain every issue, how Backpack Medicine does deal with these issues is holistic and individual to each patient.

Major health issues and their causes: Respondents were asked to describe the major health issues that have affected the local underserved population. They gave a range of issues, including substance abuse disorders, mental health conditions, physical ailments, and chronic conditions that affects the funding that goes into the services dedicated to these populations. One member of Backpack Medicine spoke of how much of the population returned to drinking and drug use amidst the loss of their employment. Another respondent quotes, “many struggle with substance abuse and the stigma behind being homeless...” For this reason, seeking help is much more difficult and many leave before treatment is completed.

When asked about the root causes of the major health issues affecting patients served by Backpack Medicine, respondents described how many different social and individual issues can compound to impact patients’ mental and physical health. These issues are developed either in childhood or later in life. For example, some patients deal with extreme traumatic experiences that take them down the path of addiction. This trauma is often not dealt with and patients do not

have the resources to seek psychological help and treatment. Leaving home at a young age and becoming homeless was another stronger factor that led much of the population to turn to alcohol and drugs. Others cite isolation as a cause, being detrimental to their mental health and creating a false sense of identity with these communities, making them reluctant to receive care or skeptical of those who offer it.

Mental Health Issues: As stated by many respondents, people dealing with mental health complications do not develop disorders overnight. It is a series of issues that lead the homeless to where they end up. Addressing mental health & substance abuse issues entail a multitude of different treatments that differ from those who suffer from physical health issues. Addressing mental health issues requires immense amounts of patience, trust, and knowledge to determine the patient's current condition and considerations of personalized treatments. Issues with substance abuse require similar medical interventions that also address mental health issues. Rehabilitation, counseling, and alcoholic/drug anonymous meetings help immensely with substance abuse. As one respondent mentioned that sometimes they also offer a chemical solution to help with the withdrawal symptoms. Backpack Medicine provides services tailored to help those with mental health & substance abuse problems. How Backpack Medicine intends to improve these situations would be to provide better access to resources such as mental health and substance abuse organizations as well as health screenings to ensure the health and safety of these communities.

Chronic Conditions: Chronic illnesses require different strategies in order to get patients to follow up and manage their conditions. These strategies entail a mixture of time and honesty from the providers to make sure that each person understands their condition and how to manage it. However, providers must explain things in a way that does not scare patients into not getting

their needed treatment. Because chronic illnesses do require such long term management, Backpack Medicine staff also try to help the homeless in setting up health insurance in order to make sure they can monetarily get their treatment taken care of and remain covered. They also might set them up with a bed at a homeless shelter where they can receive further assistance. By having a stable place to sleep, they are able to receive the warmth and security to help themselves get better. While respondents stated that only ten percent of homeless patients do follow up, those who do show that Backpack Medicine is making a difference. Beyond the direct care that they offer patients, Backpack Medicine works as an introduction to what medical care can do for the homeless community.

Follow-Up Care: Follow up care is also difficult to manage with the homeless population. As one respondent said, “they do not have stable homes; they do not have reliable transportation, so how can we expect them to get the care they need when they do not have these things”. Most do not pursue follow up care as a result of this reasoning. Sometimes the solutions that they are expected to follow are not realistic. Some people also just do not want the follow up care. As one respondent mentioned, “they want the quick fix and then to get back to it.” For those that do, Backpack Medicine tries to keep those thoughts in mind when providing referrals for follow up care. The respondents also noted that there should also be a more detailed follow up process for patients who come in for the first time seeking treatment and how providers could ensure the recurring treatment of patients, especially those that are dealing with more chronic conditions or with patients who require more time with health professionals. Ensuring that these patients have a safe space with these organizations and know that they are being cared for and can trust these services are also a main focus to continue maintaining the trust of the communities.

They also receive help from some outside organizations to assist with follow-up care. For example, respondents mentioned that Hope Urgent Care helps set up follow appointments. Hope Urgent Care gives patients times and locations and even sets up transportation to bring them to the clinic for their follow up care. One respondent described them as being “angels” for the work that they do. Others mentioned the Ventura County Family Medicine Clinic as a place where homeless individuals can also receive follow-up care. Police officers also work with Backpack Medicine by transporting people to the hospital as well as by making sure they get the necessary care they need to manage their specific conditions. Not a lot of patients do seek out follow up care, but the ones that do are given resources to help get them to that care.

Success of Program: For Backpack Medicine, they gauge success based on feedback & prosperous interventions that improved the health of people who receive their services. For example, during the interview a doctor stated that most patients who continued to seek interventions until they fully recovered saw improvements in their life. Meanwhile, those who attained minimal treatment normally never make a full recovery and return to poor habits or are not seen again by the organization. Trust, time, and understanding can lead to positive outcomes. Data shows that doctors who have more one-on-one time with patients help promote trust and better outcomes with recovery, but this is not standard in our society. Interventions can only be useful when the patient truly wants the help. Providers cannot force anyone into accepting care, so having the determination to improve their lives is extremely important in a patient. Unfortunately, patients whose interventions were unsuccessful are often not seen again, therefore, it is vital to see consistent growth from programs dealing with individual care. Lastly, the biggest factors that make interventions successful are providing good quality preventative care, housing, addiction medicine, and mental health resources. Attempting to provide all these

interventions to patients is what makes Backpack medicine to be considered a successful program.

Social Needs of Patients: Patients with social impediments that struggled during early development and that experienced difficult family lives have a much more strenuous process to secure a stable job. The surrounding environment for people has a large impact on their ability to change because they find themselves stuck in a rut and when seeking help from the community a lack of compassion can be un motivating. Reverting back to the stigma, there are many who believe that these individuals are beyond help and that much of the treatment that people offer will all be in vain. A respondent said, “...many think that they are homeless because they didn’t work hard enough or they got themselves into drugs or they were hanging out with the wrong person, basically as if they brought it upon themselves.” Fearing being judged, the homeless population would rather not go into these programs for how the public or the individuals working in this organization would see them. Many complications arise for individuals preventing them from even being willing to seek out help. Fortunately, Backpack Medicine locates these people in need of help in hopes to provide timely, quality, and diligent services & treatments. The process of aiding and assisting this socially impaired population takes time as another Backpack Medicine respondent said, “..it’s not just something they can fix in a few days, it’s complex social and mental issues that have been happening over the course of years...” Feeling welcomed and not being judged keeps them returning and seeking the help they need and since their mindset is due to public opinion that they are “at fault” and “unworthy” of this help also affects their ability to move forward.

Perception of Community Needs and Broader Issues

COVID-19 Pandemic: Due to the timing of this research project, students were interested in learning about the specific needs and experiences of the population served by Backpack Medicine during the COVID-19 pandemic. They asked participants to describe how the pandemic impacted the patients they serve. This isolation of the early lock-downs due to the pandemic dealt a large blow to the population because it made it even harder for them to seek help. Additionally, many people were impacted by the lack of social interactions. The limited social interaction prior to the pandemic that many homeless people experience had already created a sense of isolation within this community; the pandemic made the isolation worse and ultimately affected many patients' mental health. Part of the mental health stress came from fear about the virus. Many patients expressed their fear of catching the virus. During the time before vaccines were available, patients had a hard time feeling like they could stay safe.

This pandemic also created a less secure work environment for many people, causing worry about losing employment. Loss of employment during the pandemic sometimes caused a ripple effect, leading some who lost their jobs and/or homes to resort to alcohol and other substances to find some type of solace in their time of hardship.

When asked what more could be done to help the homeless stay well during the pandemic, participants emphasized the need to make more services readily available to patients. Some of the services participants emphasized that patients needed during this time were treatment plans, additional housing opportunities, educational programs that teach the patients more about how to care for themselves properly; additionally, they noted that patients also needed information about *how* to find the care and resources needed.

How Backpack Medicine has changed community perception of homelessness: When asked about the impact Backpack Medicine has had on the broader Ventura County community's perception of the homeless population, participants unanimously stated that their work has had a positive impact. This positive impact directly affects how treatment for patients and the services to provide them have become more accessible than they would without Backpack Medicine. Of course, Backpack Medicine is not alone in helping and bringing attention to the needs of the homeless population in Ventura County. Respondents described a variety of other agencies that also help serve the homeless population. These agencies address basic human needs as well as behavioral, mental and physical health issues. Many of these agencies work directly with Backpack Medicine at times as well. The local police departments assist in client outreach by implementing a specific and special task force that works in helping provide services to the homeless population. The police department adds additional support in directing people to the proper resources they need such as pop-up clinics or organization meetings such as those focusing on substance abuse or mental health. Other nonprofit organizations, such as the Salvation Army, assist with providing these services to Backpack Medicine patients, including clothing, shelter, and meals. Backpack Medicine tries to broaden the agencies they partner with in hopes to reach patients that are in need of other forms of care such as programs that provide a safe place for women who are victims of abuse or programs that focus on those who deal with addiction.

When asked about what participants wished that the broader community had better understood about the patients that they serve, a common theme was that they wished people would understand that their patients are not lesser than and that they are just human beings who have been dealt a bad hand and need their basic needs met. Further, participants want the

community to recognize that the population they serve is often dealing with trauma on a daily basis. This trauma makes it a more complex situation to deal with as they must work with these patients with a great deal of compassion and patience and being ignorant towards them only worsens their condition and how they see themselves. It is a long process to get their patients back on their feet and start to live in better conditions and receive the proper care they need. The participants emphasized the need for more empathy towards their patients and everything they are going through.

Conclusion

Backpack Medicine's homeless patients face a variety of health and social obstacles that limit their capacity to receive care and achieve positive outcomes. Many of these problems have been studied to determine their scope and basic causes, but it is through organizations like Backpack Medicine that some of these difficult issues can be addressed in practice. Backpack Medicine is able to develop lasting relationships with patients and improve health outcomes for a population that has been left out of the standard healthcare system through their dedication, empathy, community relationships and resources offered.

A key takeaway from our interviews with Backpack Medicine staff is the importance of understanding that the homeless population varies significantly when it comes to their needs, and the approaches to care must be dynamic and multifaceted to truly provide adequate support. For individuals who sleep in harsh conditions daily, are unsure about where their next meal will come from, or for those who struggle with severe drug and alcohol addiction, visiting a doctor's office for a yearly checkup or an emergency room with acute ailments, will solve very few of their problems. In the beginning, Backpack Medicine consisted of a physician visiting patients with just a backpack and little else. After spending quality time listening and learning the needs

of the homeless community, Backpack Medicine and the Ventura County Family Medicine Residency Program have dedicated themselves to addressing the wide array of concerns this community faces.

Vulnerable populations have a difficult time trusting those around them. Backpack Medicine has discovered that taking extra time to build patient trust, as well as to meet the patients where they are at, is a vital piece of the puzzle to offering adequate care to the homeless. The respondents mentioned that many of the homeless would not talk to them for the first three weeks, but after treatment was agreed to by one person, a snowball effect occurred after that. By showing these individuals that you are there to support them, and you will continue showing up week after week, regardless of the outcome, a foundation of trust can be built that was not previously possible in an emergency room setting. This program finally gives our homeless population the time and attention they need to begin healing.

Discussion of Implications/Recommendations: The next stage would be to expand the reach of Backpack Medicine and similar programs, and to tie these programs in more with other local mental and behavioral health services such as housing, transportation, medicine, food shelters, testing locations, and treatment centers. These services are quite valuable to folks who do not have access to the internet and merely require assistance. Having outreach, such as follow-ups, is critical in assisting the homeless in getting back on their feet. Furthermore, expanding assistance in areas where there is a high concentration of homeless people can improve their quality of life. Since many people do not follow up with their doctors and end up in the hospital again, services like Hope Urgent Care, which organizes times and provides rides, are critical.

Limitations: A disadvantage of this study was the small sample size, which was due to a lack of willing participants. The provision of housing for the homeless was a critical component. When COVID-19 was originally implemented, many hotels and shelters were closed, making this a big difficulty. Limitations such as social engagement with individuals have been tough to overcome due to the pandemic. Fear and tension were among the effects. Sheltering high-risk patients can lower fatality rates and improve outcomes. With the cost of housing continuing to rise, the homeless will face more challenges. If a patient keeps making appointments and coming in for care is getting their life back together, consistency growth has an impact on others. In these specific initiatives, maintaining trust in others leads to favorable outcomes. It is critical to continue to develop one-on-one interactions with patients and inform them of the steps they must take. Increased favorable health outcomes can be achieved by expanding services and continuing to offer care for the homeless.

Next Steps: For future research, conducting several suggestions that dives into a closer look into a certain topic will give a better understanding and provide a stronger outcome. Providing research that addresses undetermined aspects such as adding questions to get into the specifics. Diving more into questions on specific topics like substance abuse and mental health can propose in depth answers and framework for future studies. Addressing limitations such as increasing sample size will provide researchers with new findings and better context. Larger sample sizes provide accurate descriptions whereas conducting a small sample can compromise the conclusion given from the studies. Additionally, having another round of interviews will help attain new information as well as allow for better understanding of the study. Since this study was conducted on Zoom, student researchers found it tough to connect with the respondents on a personal level so perhaps in the future, we could have field visits and doctor visitations with

those from the Backpack Medicine organization. If Backpack Medicine expanded their services to different locations, we could have contrasting outcomes. Different areas may serve different services compared to Ventura County, for example, where this study was conducted.

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Appendix A: Recruitment Sheet for Staff/Volunteers

Title: Serving the Underserved: Medical Residents' Experiences Working with Ventura County's Backpack Medicine Program

Principal Investigator: Dr. Lydia Dixon, California State University, Channel Islands

Co-PIs will recruit potential patient participants by asking them the following:

Hello, I am a student researcher from California State University, Channel Islands. I am doing a research project with the Backpack Medicine program.

Would you be willing to participate in a study about the healthcare needs and experiences of the community and about the work that Backpack Medicine does? We are trying to help the program serve the community.

Your participation would entail a 10–20-minute interview and we could complete it on zoom. May I tell you more about the study to see if you are interested or have any questions?

If person says “no,” student thanks them for their time and moves on.

If person says “yes” or has further questions, student presents consent form, reads through it, answers any questions, and asks if they consent.

If they say “no,” student thanks them for their time and moves on.

If they say “yes,” student documents verbal consent and begins interview.

Appendix B : CONSENT FOR PARTICIPATION IN RESEARCH

Title: Serving the Underserved: Medical Residents' Experiences Working with Ventura County's Backpack Medicine Program

Principal Investigator: Dr. Lydia Dixon, California State University, Channel Islands

Introduction: The purpose of this form is to provide you information that may affect your decision as to whether to participate in this research study. The person performing the research will answer any questions you may have. If you decide to be involved in this study, this form will be used to record your consent.

Purpose of the Study: You are invited to participate in a research study about how the Backpack Medicine program serves community needs. The researchers will be asking questions about the communities served by Backpack Medicine as well as about the process of providing care among those communities.

What will you be asked to do? If you agree to participate in this study, we will ask you to participate in an interview that might range from 10-20 minutes where we will ask you about your experiences working with the communities served by Backpack Medicine.

We will only audio record your interview if you agree. Recordings assist researchers in transcribing interviews. Any audio recordings will be stored securely and only the research team will have access to the recordings. Recordings will be kept indefinitely.

What are the risks involved in this study? The risks involved with participation in this study are low and may include an invasion of privacy. Information that is obtained from you in connection with this study will remain confidential. We will assign you a code so you cannot be identified.

What are the possible benefits of this study? Your responses will help improve the services offered by Backpack Medicine and will add to broader understandings about the healthcare needs of our community.

Do you have to participate? Your participation in this research is voluntary. You may decide not to participate at all or, if you start the study, you may withdraw at any time. Withdrawal or refusing to participate will not affect your relations with Backpack Medicine.

Will there be any compensation? You will not receive any type of payment for participating in this study.

How will your privacy and confidentiality be protected if you participate in this research study? Your privacy and the confidentiality of your data will be protected by assigning you a code so you cannot be identified. All computer files will be password protected.

Whom to contact with questions about the study? Prior to, during, or after your participation you can contact the primary Dr. Lydia Dixon at: lydia.dixon@csuci.edu. For research-related problems or questions regarding your rights, you can contact the Institutional Review Board at (805)-437-8808 or at scott.perez@csuci.edu.

Verbal Consent. You have been informed about this study's purpose, procedures, possible benefits and risks. You have been given the opportunity to ask questions before you sign, and you have been told that you can ask other questions at any time. You voluntarily agree to participate in this study. By giving verbal consent, you are 18 years or older and you are not waiving any of your legal rights.

_____ Participant gives verbal consent to participate.

_____ Participant does NOT give verbal consent to participate.

_____ Participant agrees to be recorded.

_____ Participant does NOT agree to be recorded.

Name of Participant

Date

As a representative of this study, I have explained the purpose, procedures, benefits, and the risks involved in this research study.

Print Name of Person obtaining consent

Signature of Person obtaining consent

Date

Appendix C: Semi-Structured Interview Guide for Backpack Medicine

Staff/Volunteers

This is a semi-structured interview. The following general topics will be discussed with participants (potential follow-up, specific questions are listed below the general themes):

- Professional role and educational trajectory
 - How did you come into this career? What motivated you to do this work? Did you have previous experience working with homeless populations?
- Major health issues affecting local community, especially underserved populations
 - What do you think is at the root of these health and/or social concerns?
 - What more could be done to help the homeless stay well during the pandemic?
- Experience working with Backpack Medicine
 - What steps do you take to gain a patients trust and help meet their needs?
 - Tell us about the patients served by Backpack Medicine or through the Ventura County Family Medicine Residency Program, or about one patient that made an impact on you.
 - How do you think that Backpack Medicine and/or the Ventura County Family Medicine Residency Program affect medical residents training and professional goals?
- What services get used the most that Backpack Medicine offers? For example, mental health, first aide, medications, substance abuse, housing support, etc.?
 - In what ways is it different to address mental health and substance abuse issues than physical health issues?

- How do you help people with chronic health conditions? How do you follow up with patients who need long-term support?
- How do you know when your interventions have been successful? Are there examples of times they have not been successful?
- Other services that help underserved populations locally
 - What are other agencies that work with the community you serve and how do they meet the community's needs?
- The medical and social needs of the patients they work with
 - What do you wish that the broader community understood about the patients you serve? Do you think that Backpack Medicine's work has helped change the perception of homeless populations locally?

ⁱ We would like to thank the Backpack Medicine staff and medical providers who graciously gave us their time for this project.