

Background

- Medical students across the US have participated in street medicine extracurricular activities to provide healthcare for homeless people (HCH), but few formal curricula exist.
- Street medicine extracurricular activities are common in medical schools.
- Some formal curricula at other medical schools to provide healthcare for homeless (HCH).
- These curricula are standalone electives or a part of family medicine clerkship.
- Wolverine Street Medicine (founded 2017) at the University of Michigan Medical School offered in 2021 a medical student-initiated curriculum.
- Near-peer model of learning and mentorship
- Validated tools exist to determine practitioners' perceptions of homeless individuals, such as Health Professionals' Attitudes Toward the Homeless Inventory (HPATHI) (supplementary material).

Methods

Needs Assessment

- 118 graduating medical students surveyed in needs assessment.
- Majority of students ill-equipped to provide HCH outside of traditional settings.
- Prompted development of elective due to protected time, didactic components, and codified institutional support.

Elective Development

- "Street run": trip made by WSM members and HCH students and faculty to homeless shelters to provide care.
- "Street run" is the foundation of the elective. Commonly asked questions in street runs were identified.
- Web-based series of didactics created based on these questions to provide foundation (supplementary material).
- Independent elements, with real-time opportunities to apply knowledge, and journal club at end of elective.
- Also, elective students tasked with preparation of four "car-talks": teaching pearls to share with everyone on street runs.
- Adjunctive clinical experiences offered to elective student: care delivery at homeless shelter, post-hospitalization recuperative care program, observation experiences with a supportive housing agency, and additional seasonal opportunities such as health fairs.
- Target audience of elective was upper-level medical students post-clerkships (M3 and M4).
- Multiple opportunities to reflect and debrief throughout course: students encouraged to engage other learners for debrief.
- Policy module in course demonstrated how to advocate for policy changes in government.
- Met core competencies of UMMS and followed specified learning objectives (Table 1).

Data Analysis

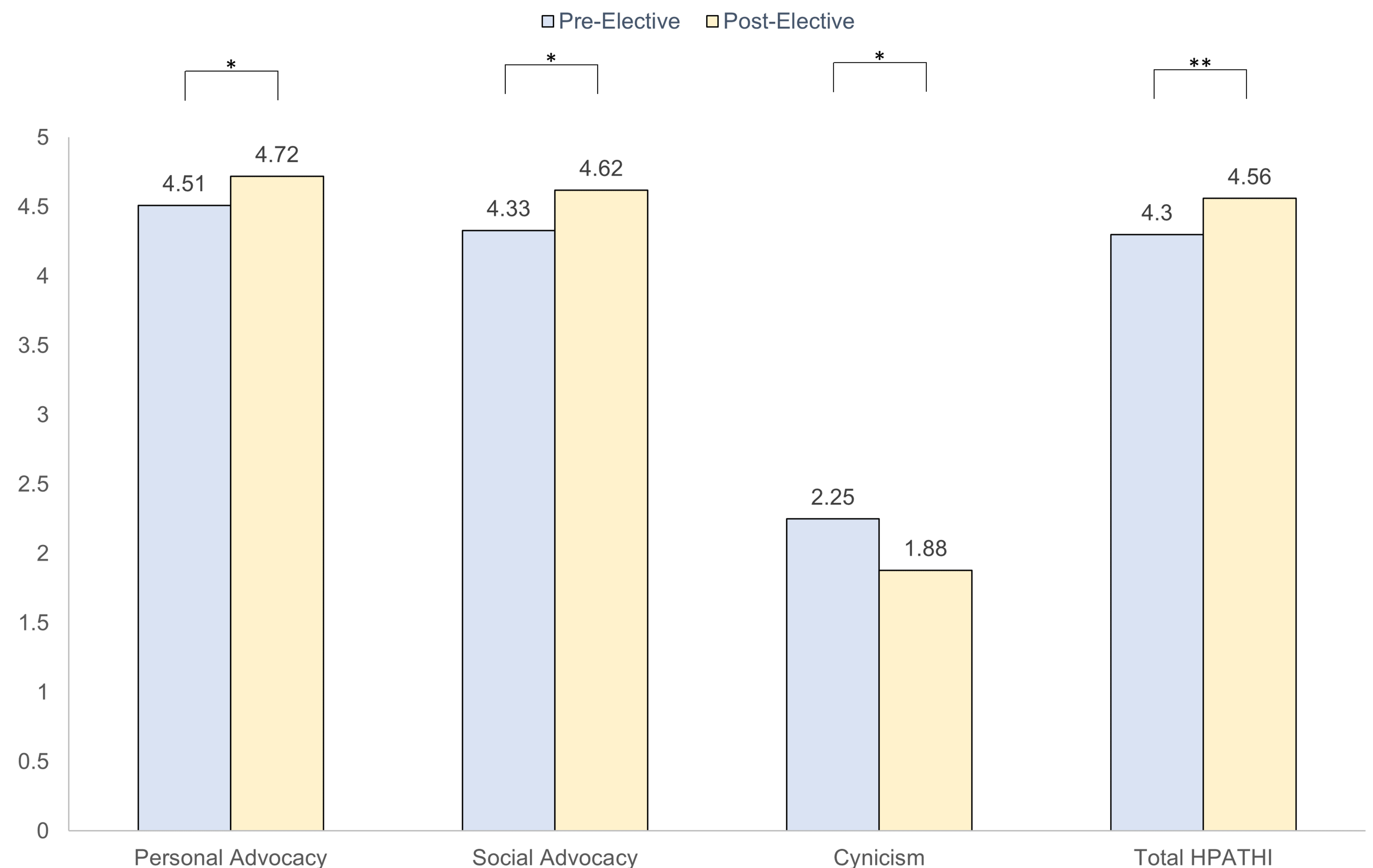
- HPATHI administered pre- and post-elective: personal advocacy + social advocacy + cynicism (cynicism was reverse-coded) (Figure 1).
- Single-factor ANOVA on HPATHI results.

Table 1. HCH Elective Learning Outcomes

1. Identify the role of social determinants of health in the presentation of medical needs specific to underserved populations and apply this knowledge in the provision of healthcare to homeless persons
2. Develop greater empathy in patient interactions and practice the delivery of care in home and community settings that meet the patients where they are
3. Design a project with the goal of making a long-term and sustainable contribution to the Wolverine Street Medicine student organization and their efforts in addressing health disparities induced by homelessness
4. Recognize the interdependence between clinical and non-clinical care providers in addressing health care for homeless persons
5. Independently assess patients about whom case workers place medically-related consults, and practice generating a plan of care before staffing with the patient's primary care provider
6. Prepare and lead a scholarly discussion on a topic related to healthcare for homeless persons for an audience of interested clinical and pre-clinical medical students

Results

Figure 1. Pre- and Post- Elective HPATHI Average Scores



Discussion

- Successfully developed and implemented this Healthcare for Homeless (HCH) elective at UMMS.
- Small but significant improvements in attitudes toward homeless people and HCH work.
- Protected time to do service-learning.

Limitations

- Limitation of 1 student per month with our partnerships, thus small sample size.
- Few HCH electives at peer institutions making validation with other institutions' programs difficult.
- Sample selection as those interested in course may be those more prone to changing opinions about HCH.

Next Steps

- Continued administration of HCH elective at UMMS.
- Continued collection of surveys for students taking elective.
- Refining and expanding curriculum to cover more elements of HCH.
- Broadening of course to include more students.
- Administration of HCH elective at other medical schools with associated pre- and post-surveys.
- Continued HCH work broadly to improve attitudes toward HCH.