

The Efficacy of Mobile health Clinic for the Homeless and people live in Shelters.

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Background

This project's purpose is to provide sanitary, humanitarian, and educational support to homeless individuals.

Materials and Methods

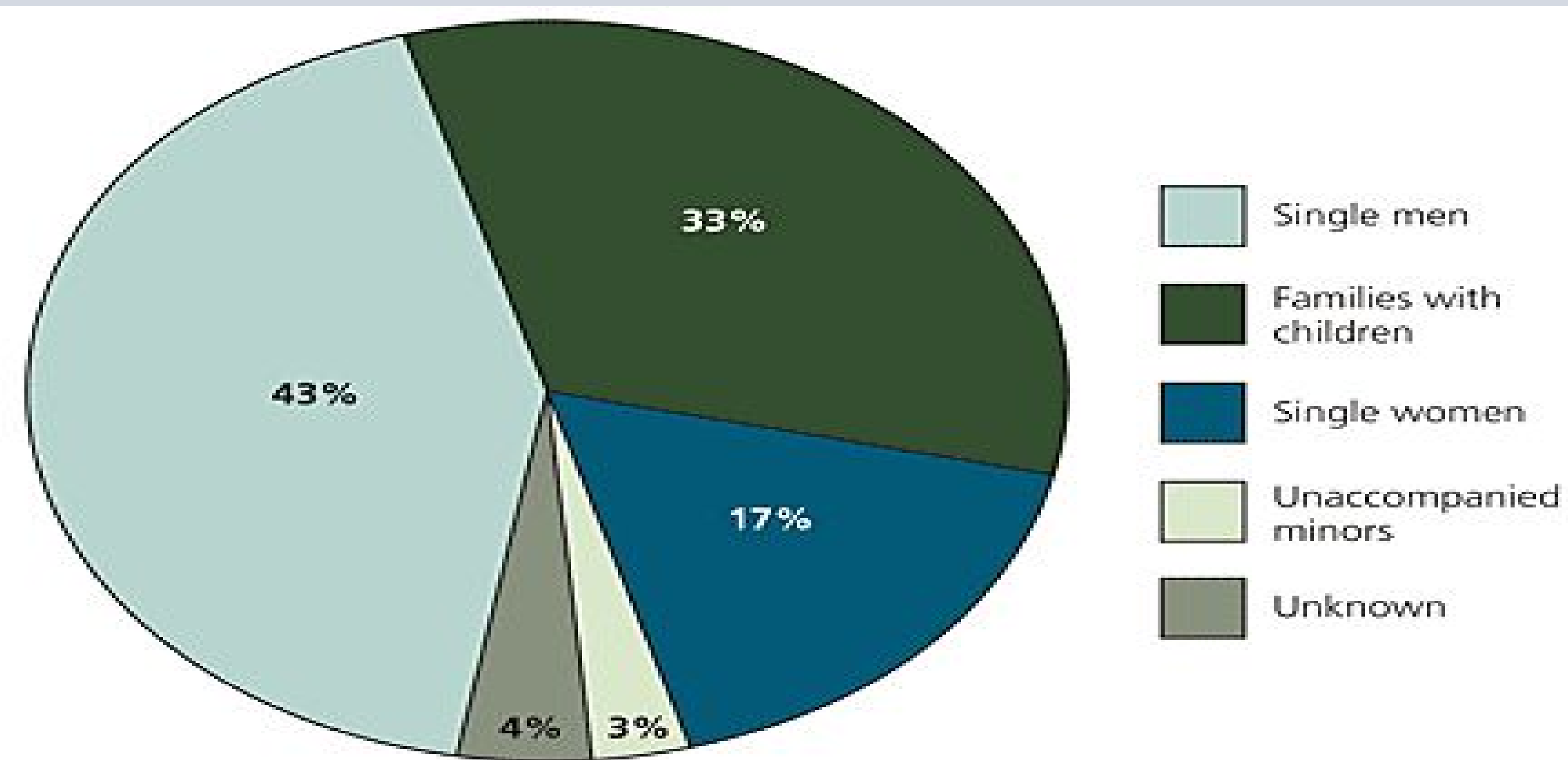
→ use the mechanism of mobile health clinic.

Rationale

→ Mobile health could Impact this population's health outcome by bringing health care to them instead of going to the provider's office.

Homelessness' Current state and Data In the US

→ Approximately 17 people per 10,000 experience homelessness each day (Stasha, 2022).



→ This pie chart represents families, women and men that are homeless and how much of the homeless they make up in the United States.

Framework

→ This paper was based on literature review of several research studies that was conducted to analyze the living conditions of adult individuals who reside in shelters or who live on the street

Targeted Population



PICO

→ Can mobile health services be more effective at managing diseases and promoting optimal life in homeless population living in shelters versus regular visit to primary care provider's office?

Barriers face the Targeted population

→ Lack of access to adequate food and protection, and limited resources and social services.

→ Financial and physical comfort or shelters.

Common problems in this population

→ Mental health problems, Hypertension and Cardiac diseases, Diabetes, Infectious diseases and sexually transmissible diseases.

Project 's Aim

→ Disease prevention, early screening, and health promotion.

Interventions

→ Provide mobile health clinic to shelters and homeless camps.
 → Provide means of transportation to specialist referrals.
 → Encourage medications compliance,.



Results and Conclusion

→ Health improvement among participants due to medication compliance
 → Increase adherence to primary care provider's appointments up to 80%.
 → Decrease rate of infectious diseases by 30% among participants.
 → Slight increase in sobriety and decrease in substance abuse by 10% among participants

References

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