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Title

Access to COVID-19 Information in the Unhoused Population

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INTRODUCTION

As of 2019, there were 567,715 Americans without housing, and California reported the largest unhoused population in the country.¹ In the past 2 years, the rate of unhoused people in California has risen 16%, which is the second highest in the country.¹ Many reports have shown that the unhoused population is particularly vulnerable to infectious disease epidemics and pandemics due to lack of control of their surroundings, disproportionate resource allocation, and broken communication.² While there have been many initiatives started to try and combat these inequities, there is little research about communication and the dissemination of information to the unhoused population.³ As the guidelines for COVID-19 are constantly changing, there is a need for a better system of communication within this vulnerable population to ensure that they receive timely, accurate updates to help reduce their risk of contracting or spreading COVID-19.

OBJECTIVES

- Identify where the unhoused population obtains COVID-19 information
- Identify what information sources the unhoused population perceives as trustworthy

METHODS

Students of the Med Encampment Project identified a sample of 200 unhoused individuals, including those in encampments and temporary hotel placements, and administered a 20-minute survey that included information on demographics, social history, and their access and utilization of various resources. A third of individuals surveyed also completed a 30-60-minute structured interview on their experience with COVID-19 and how the pandemic has impacted their life. The two interview questions that we chose to review were:

- “How did you first hear about it (COVID-19)?”
- “Who do you trust to provide information about COVID-19?”

We reviewed the 65 transcribed interviews and categorized their responses into generalizable categories including: News, medical personnel, family/friends/word of mouth, etc. Data was analyzed using descriptive statistics.

RESULTS

Figure 1: Demographics of Interviewees

Age	
Range	24-68
Average	53
Sex	
Male	49%
Female	51%
Ethnicity	
NH White	44%
NH Black	17%
Mixed	19%
Native American	6%
Hispanic	5%
Other	8%
Veteran Status	
Yes	8%

Figure 2: How did you first hear about COVID-19?

Of the interviewed population, 48% said the news, 26.0% said their family members/ friends/ word of mouth, 13% said medical personnel, 12% did not answer the question, and only 1 participant cited the California Homeless Union as being their first source of COVID-19 information. Reviewing the transcribed interviews, a participant said that they only heard about the pandemic because “All of a sudden there were no restaurants open in the whole darn neighborhood. There’s nowhere to eat.” Many of the interviewed, only had access to the news for brief periods of time-for some because their phone was inadequately charged, others overheard someone else’s radio, and others were staying with a friend who had a TV.

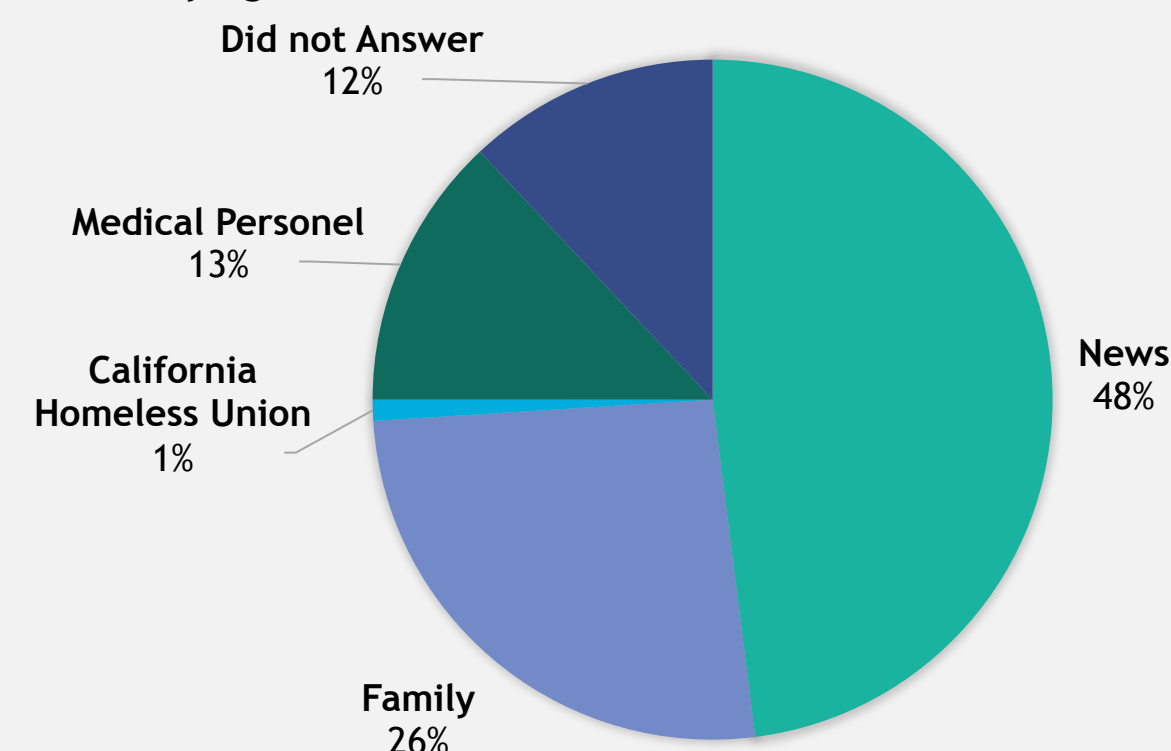


Figure 3: Who do you trust to provide information about COVID-19?

When asked about who they trust to provide them with information, 25% said medical personnel, 23% said the news, 17% said no one, 8% said family, and 22% did not answer. Interestingly, when looking at those who cited the news as their primary source of information, only 50% also stated that they trust the news. Whereas in those who stated their primary source as medical professionals, 75% also stated that they trust medical professionals to provide information about COVID-19.

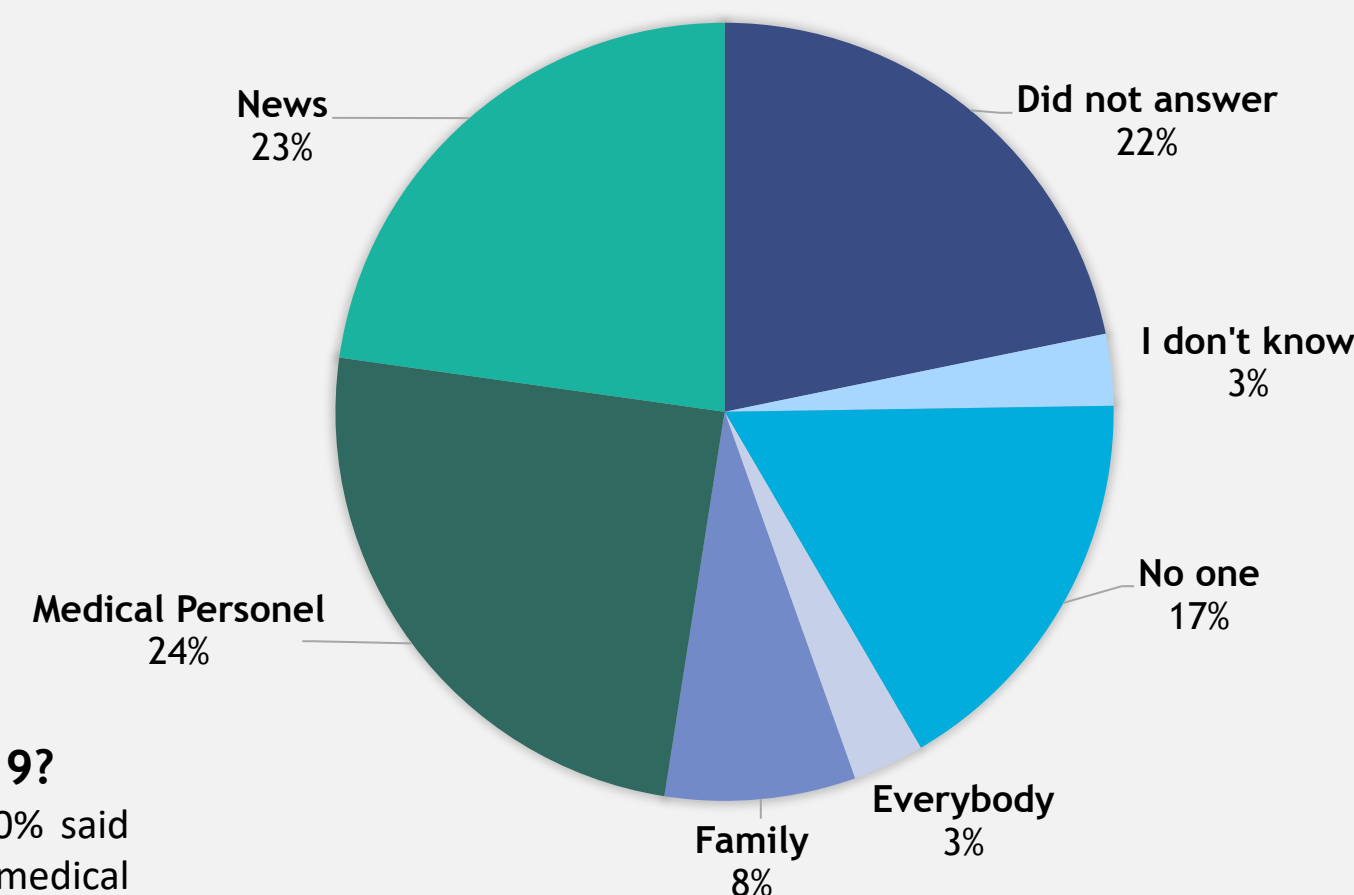


Figure 4: Access and utilization of resources

Of the interviewed population, 39% were living in encampments, while 61% were in temporary hotel housing due to the pandemic. Of those living in encampments, only 36% had access to electricity, while 100% of those living in the temporary hotel housing had electricity access. Universal use of face mask and hand sanitizer was 84% and 83% respectively. And on average interviewees endorsed 7 close contacts with a median of 4 within a 24-hour period.

Housing	
Encampment	39%
Temporary Hotel Placement	61%
Electricity	
Encampment	36%
Hotel	100%
Overall	75%
Face Mask	84%
Hand Sanitizer	83%
Average 24-hour contacts	7

CONCLUSIONS

- ❖ Unhoused individuals are a vulnerable population during the pandemic, given that they often cannot effectively quarantine. Our population reported an average of 7 daily contacts. Therefore, for their personal safety, access to updated pandemic information is of the utmost importance.
- ❖ Of those living in the encampments, only a third reported access to electricity. This affects the routes of information people are able to use, with a significant portion of our population utilizing their social circle and word of mouth as their primary source. This can also delay information dissemination. For an example several of our interviewees shared that they only found out about COVID-19 when local stores and restaurants began to close down.
- ❖ Because access to a news source is variable, it is important to find other, more reliable means of communication to disseminate updated COVID-19 information.
- ❖ Medical professionals are a trusted source of information and there is a need for a greater presence with those living in encampments.

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