

# Barriers to Care in Homeless Patients With Diabetes Mellitus

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## RESEARCH QUESTION

Is the primary barrier for diabetes management for patients experiencing homelessness in Fort Worth a lack of diabetes specific health education?

## BACKGROUND

True Worth Clinic is a John Peter Smith Hospital (JPS) clinic that primarily serves homeless patients. There is a robust diabetes education team that works to provide care to homeless patients with diabetes mellitus.

There are few studies assessing outcomes for homeless patients with diagnosed diabetes, despite evidence that homeless patients suffer from diabetes at about the same rate as the general public, which as of 2018 is approximately 10.5% of the U.S. population.

The research team worked with the medical staff at True Worth to create a survey that is currently being administered to patients coming into the clinic. The survey focuses on barriers to care that are unique for homeless patients managing chronic conditions, such as diabetes.

## METHODS

The goal of this survey is to quantify barriers to care that are unique for homeless patients managing chronic conditions, such as diabetes. This survey (some sample items shown on the right) has answer choices that were found in a literature review as barriers that homeless patients have to care in general, and barriers that diabetic patients who are not homeless have to maintain adequate blood sugar control. The survey was tailored to the specific patient population and was given to patients who met inclusion criteria and received care through the True Worth Clinic

The goal of the survey is to help to better understand the specific barriers that patients with diabetes at this clinic face. Having quantitative data on patient’s barriers to care will allow the True Worth Clinic to more effectively address the unique barriers that their diabetic patients face

### SAMPLE OF SELECT SURVEY ITEMS

1.	Has a healthcare worker ever talked to you about how to manage your diabetes?
2.	In the last 7 days have you checked your blood sugar: every day, most days (4-6), some days (1-3), or no days?
3.	Describe your response to the following sentence: "Diabetes has caused you to change the way you eat"
4.	Has anyone ever talked to you about the foods you should eat to manage diabetes, and their importance?
5.	Do you feel like you have access to those types of foods?
6.	If no, why not? Check all that apply: <ul style="list-style-type: none"> <li>You do not know where to get good, nutritious food</li> <li>You do not know what kind of food is good for diabetes</li> <li>You are unable to get the food you want due to a transportation issue</li> <li>You cannot afford quality food</li> <li>You do not have the equipment to cook and store good, nutritious food</li> <li>It is too difficult for you to eat good, nutritious food</li> <li>You do not want to eat good, nutritious food</li> <li>Other reason not listed here</li> </ul>
7.	Check each box where you estimate that you get at least 25% of your food per month: <ul style="list-style-type: none"> <li>Buy groceries from a grocery store (for example: Walmart, Target, etc)</li> <li>Buy groceries from a convenience store (for example: 7/11, QuickTrip, etc)</li> <li>Receive groceries from a food pantry</li> <li>Buy meals at a fast-food establishment (Wendy's, McDonald's, etc)</li> <li>Eat meals provided by a shelter</li> <li>Eat meals provided by a meal distribution service</li> <li>Other</li> </ul>
9.	Are any of the following consistent to you taking your diabetes medication. Select all barriers that apply: <ul style="list-style-type: none"> <li>You do not know how to get the medication</li> <li>You do not know how to use the medication</li> <li>You are unable to pick up the medicine due to a transportation issue</li> <li>You cannot afford the medicine</li> <li>It is too difficult for you to take the medicine properly</li> <li>You do not want to take the medicine</li> <li>You forget to take your medication</li> <li>You do not have a safe place to store your medication</li> <li>You do not have access to refrigeration to store insulin</li> <li>Other reason not listed here</li> <li>No barriers - you can take your medicine regularly)</li> </ul>

## RESULTS

There were multiple barriers that a majority of respondents, expressed in the management of diabetes while experiencing homelessness. Patients reported difficulty taking their prescribed diabetes medication, transportation to a pharmacy and forgetting to take their medication were the most common barriers. Additionally, among the patients who stated someone talked to them about food to eat for optimal diabetes control, only approximately half (54%) felt they had access to those types of foods. This showed that diabetes education was not the primary barrier for diabetes management.

## FUTURE DIRECTIONS

Understanding the specific barriers this patient population faces could help medical facilities properly address those barriers.

Once the quantitative data has specified which barriers are most limiting for patients, we hope that it will allow healthcare providers to tailor their approach to this patient population. Having quantitative data where there previously was none may also aid in decisions about where resource should be deployed and how targeted education can be used to improve outcomes, such as a lower HgA1c and a decreased rate of diabetic foot amputations.

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