

# Unhoused patients admitted to inpatient psychiatry at an academic, safety-net hospital: a cross-sectional study

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## Introduction

- 650,000 individuals experience homelessness in the U.S.
- High behavioral health burden: ~30% severe mental illness, ~25% substance use disorders
- Limited data on inpatient psychiatric populations
- **Study Aim:** Compare unhoused vs housed patients admitted to a psychiatric inpatient unit (PIU)

## Methodology

- **Design:** Retrospective cross-sectional + qualitative interviews
- **Setting:** 555-bed safety-net hospital (Denver, CO)
- **Sample:** 57,902 patients; 6,304 (10.9%) PIU
- **Quantitative:** EHR-derived housing, demographics, ICD-10 diagnoses
- **Qualitative:** Semi-structured interviews with unhoused PIU patients
- **Analysis:** Chi-square testing + thematic analysis

## Results

### Demographics

(Unhoused vs Housed)

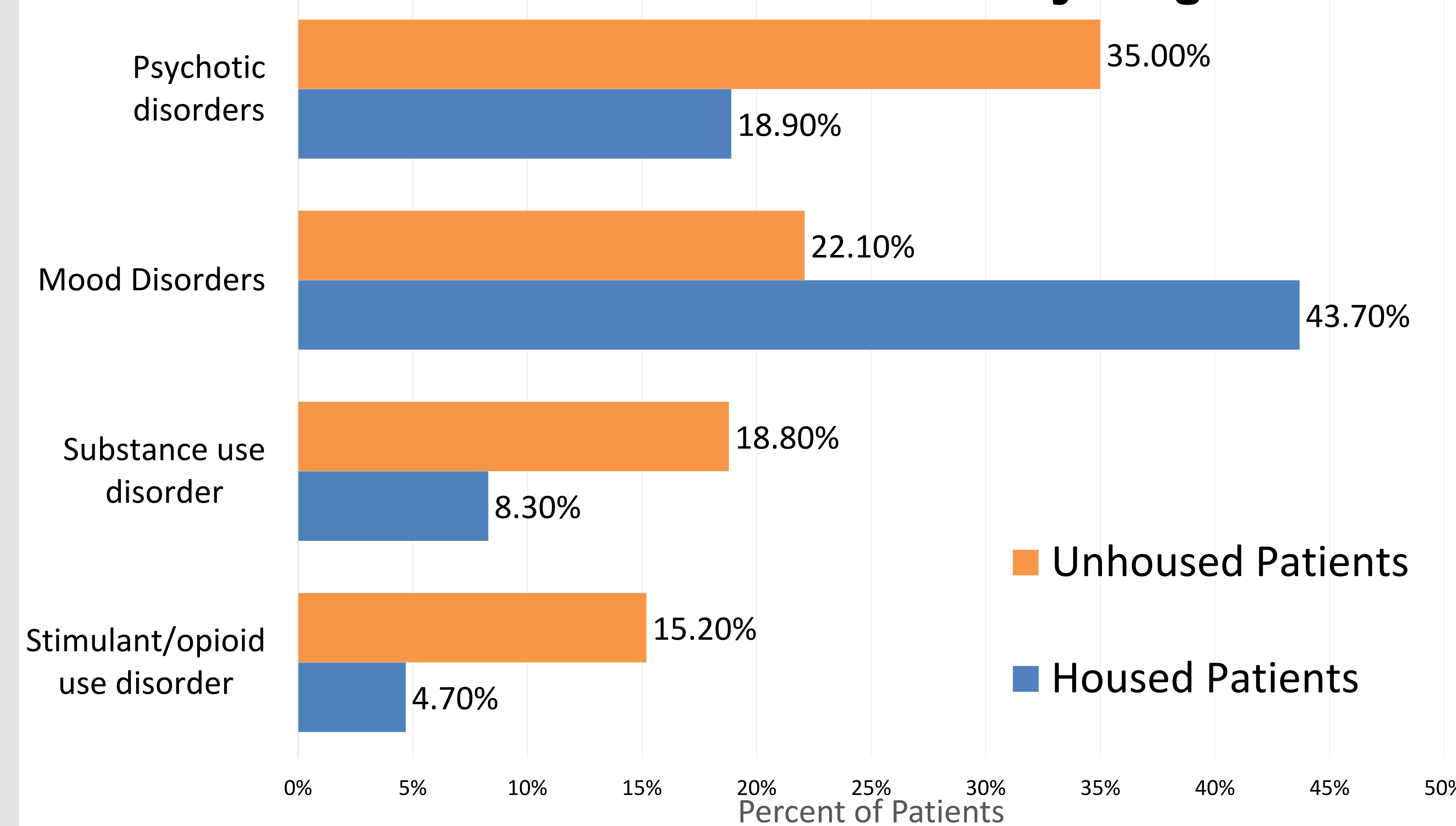
- Age: 40.2 vs 37.9
- Male: 67.0% vs 50.8%
- Black: 19.2% vs 12.1%

### Admissions

(Unhoused vs Housed)

- PIU: 32.8% vs 67.2%
- Non-psychiatric: 10.6% vs 89.4%

### Unhoused vs Housed Patient Primary Diagnosis



## Patient Perspectives

- Patients described positive, stabilizing experiences on the PIU, with challenges emerging primarily in the broader healthcare system.
- *"I do have a name"*
- *"They just see you as being homeless... just another person on the streets."*
- *"Once I leave the hospital... I have to figure out how to get a roof over my head."*

## Discussion/Conclusion

- Unhoused patients are overrepresented in inpatient psychiatry, with greater illness severity at presentation
- Unhoused patients show markedly higher rates of psychotic and substance use disorders.
- Barriers extend beyond access to include dehumanization, system-level barriers, and competing survival needs

## Future Work

- Develop a pilot transition-of-care intervention at Denver Health inpatient psychiatry
- Informed by patient perspectives to improve continuity and reduce rehospitalization

## Acknowledgements

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