Research Brief:

Staff Perceptions of Homeless Veterans’ Needs and Available Services at Community-Based Outpatient Clinics

Overview:
- Substance use, unemployment, and mental illness were perceived as the primary causes of homelessness for veterans in rural areas among rural staff members of VA Community Based Outpatient Clinics (CBOCs).
- Rural CBOC staff members perceived non-VA service centers as better resources for non-health related services.
- Rural CBOC staff members reported major differences in service availability and culture, stating that homeless veterans in rural areas had access to fewer accessible services and were more likely to be self-reliant.
- Rural CBOC staff members rated dental care, substance use services, transportation assistance, and job training among the highest unmet needs of homeless veterans in rural areas.

Study:
This study involved a survey of staff members at 30 rural Community Based Outpatient Clinics (CBOCs). CBOCs are VA-staffed community centers that offer a variety of services centered on primary care that may include mental health treatment and care coordination. In some locations, CBOCs also house homeless coordination personnel to help veterans in rural areas who are experiencing or at risk of homelessness. The study included CBOCs connected to the VA Medical Centers in Alexandria, Biloxi, Durham, Houston, Jackson, Little Rock, Muskogee, Oklahoma City, and Shreveport that were in areas categorized as rural or highly rural.

The researchers looked to staff members of these CBOCs for their perceptions of the needs of and services for homeless veterans in rural areas because of the CBOC staff members’ unique position as primary access points to VA care for many of these veterans. Researchers sent the anonymous survey to all CBOC staff members at the identified locations. The survey instrument included a combination of Likert scale, multiple choice, demographic, and free response questions. Of the 529 eligible staff members, 296 responded to the survey.

Findings:
Of the 296 CBOC staff members who filled out the survey, 254 reported contact with homeless veterans; these respondents made up the study sample. These survey respondents were fairly diverse professionally, with representation from administrative positions through doctors and psychologists. Demographically, the survey respondents were more homogenous, with the majority of responses coming from white women. Over 50 percent of survey respondents stated that they grew up in a

NVTAC Insights:
Although the researchers noted that research is sparse on healthcare and non-healthcare related services for homeless veterans in rural areas, this study gives some insights on the perceived need for and availability of job training and employment services in rural areas. From this survey, we can learn that, at least among rural VA staff members, community-based providers play a pivotal role in supplementing the care offered by the VA through CBOCs or other local healthcare providers. The CBOC staff believe that, although more health services are needed, they are the best providers of those services on the local level. At the same time, they recognize that job training and employment supportive services like transportation and clothing are best provided by their community partners, like HVRP.
rural area. Each month, 63 percent of respondents encountered one or two homeless veterans, while the rest encountered three or more homeless veterans. The majority of respondents noted differences in services and culture for rural homeless veterans. They stated that homeless veterans in rural areas had fewer accessible services and that rural culture made them more self-reliant and less likely to seek services.

When asked about major unmet needs of the homeless veterans they served, 80 percent of respondents noted the need for dental care, 71 percent listed substance use services, and 63 percent listed mental health care. Although they felt that additional health care services were needed, these survey respondents noted better availability of health care in their CBOC when compared to other local services or VA Medical Centers. Major reported non-healthcare needs including transportation, job training, and clothing. Respondents noted that community-based providers had greater availability of job training services and associated supportive services.