



HEALTH

Here's how university health centers are 'adopting' households to fight health disparities



Nada Hassanein

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When Marie Antoine was diagnosed with lupus and kidney failure, she was overwhelmed by the complexities of her illnesses.

But that changed when a team of health sciences students and a professor started visiting her home in North Miami Beach. With their help, the 57-year-old Hattian immigrant said she was able to make sense of the health resources available to her and finally understand "what's going on to my body."

"They will go through the lab results with me, and the professor explained what I needed to do to keep up with my health issues," Antoine said of the team from Florida International University, who helped her navigate a kidney transplant and recovery.

"I'm regaining my sense of life," she said.

At-home, holistic approaches to health care, such as FIU's Green Family Foundation Neighborhood Health Education Learning Program in Miami-Dade County, are increasingly being embraced to connect people in underserved communities with the medical help they need.

This week a new program, modeled on FIU's NeighborhoodHELP, is set to launch at Roseman University of Health Sciences in Nevada. Called Genesis, it will take a similar wraparound approach to treating families in underserved neighborhoods of color throughout Southern Nevada, addressing barriers to health care faced by uninsured, low-income or undocumented families.

The program will match families with interdisciplinary teams of social work, nursing and pharmacy students as well as nurse practitioners, who will work together for four years to assess health needs, make personalized household health plans and connect family members with medical and other service providers.

It's an approach at the heart of the university's philosophy and mission, said Roseman University of Health Sciences' Dr. Pedro Greer, who developed the FIU program and has been tapped to start the similar Genesis program.

"We're here to produce the best clinicians that also have the humility and the empathy to take care of a population," Greer said.

Part of a wave of community-based approaches to health care, experts say Genesis is particularly innovative because it combines home visiting with interdisciplinary care and trainees for a long term.

More: COVID-19 has taken many children's parents. Their relative caregivers face host of hurdles

"This is aligned with a movement that we are seeing in health care, that recognizes that interdisciplinary work, which really addresses patients' physical, social and behavioral health needs, is really necessary," said Dr. Laura Gottlieb, a physician and University of California, San Francisco professor of family and community medicine.

Gottlieb, a safety-net provider trained to treat and care for uninsured, Medicaid and other vulnerable patients, is leading multiple studies examining the integration of social and medical care services. She's a "big fan of home visits," and said while

they can't remove root influencers of health, like income security, they are valuable in specific ways.

"You have incredible opportunity to develop insight into the social conditions and circumstances that are shaping a patient's health when you go to their home," Gottlieb said. She added home visits can help teams understand barriers to a patient's ability to improve their health.

Public health experts know disparities stem from systemic inequities that interfere with health and quality of life of patients of color, who disproportionately suffer health problems and barriers to care. Close to a third of residents in Nevada's Clark County are Hispanic or Latino, 13% are Black or African American, 10% are Asian and 1% are Native American, according to U.S. Census estimates.

Sarah Szanton, a nurse practitioner and dean of the Johns Hopkins School of Nursing, said involving multiple professions can help to holistically address patients' issues.

"This interdisciplinary approach is really important because each discipline has a perspective and training," said Szanton, a health equity and social justice professor. And while establishing a home visit program can be expensive, "what we see in the home is really priceless."

Szanton pointed to similar programs like Johns Hopkins' CAPABLE, which sends a team of nurses, occupational therapists and maintenance workers for four months to aging adults' homes. The university's Daniels Inter-professional Education Scholars also encourages home-based community service projects between disciplines.

Szanton said programs like these can help stem future barriers to care as the health care system changes.

"The hospitals of the future will be smaller and smaller," she said, with just ICUs, operating and emergency rooms. "Everything else will happen in the communities,

so it's really smart to pivot to the community."

Henna Budhwani is a medical sociologist and professor at University of Alabama at Birmingham, which also has home visiting programs for specific groups such as moms and children. While home visiting can remove barriers like coordinating childcare and time off for health care, she said trainees need ongoing guidance and supervision.

"Experiential learning is a promising approach to sensitize students and develop their patient engagement skills. It should be done with care and consideration," said Budhwani, who specializes in public health inequities and is an affiliated professor at Florida State University.

More: What's the 'lived experience' of diverse Americans? A large-scale NIH survey is seeking the answer.

The Physician's Foundation released a survey last week that found 6 in 10 physicians lack the time and ability to address social factors that drive patient outcomes. Nearly 90% reported wanting to learn how to effectively address those vulnerabilities.

Greer said the mission of Genesis is to train providers to factor in social determinants of health, which are specific health-influencing vulnerabilities, like poverty and poor housing, while caring for a patient's illness.

Eventually, Genesis will expand to include medical school students. A college of medicine at Roseman, which will focus on community-based health, is in final stages of accreditation, said a spokeswoman.

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Luther Brewster, senior executive dean for community health innovation at Roseman and former director of FIU's NeighborhoodHELP, wants Genesis to close

distances between doctors and patients.

The goal, he said, is to cultivate awareness and train future doctors in preventative health, so they can help patients "well in advance of them arriving at the hospital's doors."

"What better way to do that than to bring doctors or future doctors into the homes of their patients?" Brewster said.

He gave the example of environmental health factors such as mold or infestations. Visiting a patient's home and seeing the issue firsthand is different than inquiring when they are in the office.

"You are a little more motivated to do something about it," he said. "And you will never forget that experience the next time you tick a box."

Reach Nada Hassanein at nhassanein@usatoday.com or on Twitter @nhassanein_.