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Mental health, HIV and rapid tests of homeless people: a cross-sectional study

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ABSTRACT

Aim: to analyze aspects related to mental health, HIV infection and rapid tests for HIV, syphilis and hepatitis of people living on the streets. **Method:** cross-sectional study with 100 people in a street situation in Casa da Acolhida and in the Specialized Reference Center for this population. The instruments applied were: sociodemographic; vulnerability to HIV, syphilis and tuberculosis; SRQ scale 20 on mental disorders; Beck Scales Hopelessness, Anxiety, Depression; Resilience; Hamilton Depression; and Vulnerability to HIV/AIDS Questionnaire. In addition, rapid tests were carried out for HIV, syphilis, and hepatitis B and C in order to track the prevalence of these diseases. **Results:** the presence of depression, anxiety, hopelessness, and drug use was observed. Anxiety has influenced depression and hopelessness, and drug use is related to hopelessness. They presented HIV 5%, syphilis 29%, hepatitis B 1% and absence of hepatitis C. **Conclusion:** The results show the need to develop specific strategies for this population.

Descriptors: Homeless People; Mental Health; Communicable Diseases.

INTRODUCTION

Street people are visibly present in large capitals and are characterized by weaknesses related to the biopsychosocial context, such as diseases related to mental health, chemical dependence and transmissible infections, such as HIV, tuberculosis, syphilis and hepatitis. Moreover, they become excluded in the daily life of society, and have difficulty accessing health care, re-entering the labor market and establishing family ties⁽¹⁾.

The strategy established in Brazil to recover this population occurred through the construction of support houses and specialized centers for street people, which are composed of trained and qualified staff to solve, reduce data, educate, and refer according to their needs.

As for communicable diseases, these people are characterized as key populations and require special attention from health professionals with a focus on education aimed at preventing behavior that is vulnerable to illness and injury⁽²⁾.

In this sense, the population in a homeless situation becomes fragile and deserves a focused look at the recovery of physical, psychic and social well-being, from the perspective of non-judgment, and from the reintegration into society from committed activities carried out by trained people, who are able to find the correct methodology for each case.

AIM

To analyze aspects related to mental health, HIV infection, tuberculosis, syphilis, and hepatitis of homeless people.

METHOD

This cross-sectional study was carried out between February and May 2018 at the Casa da Acolhida for People in Homeless Situation and at the Reference Center for the Homeless Population (*Centro de Referência Especializado para População em Situação de Rua – CREAS POP*), in João Pessoa, Paraíba, Brazil.

The sample consisted of 100 people in street situations. To calculate the sample, 95% confidence and 5% of the error margin were used, using the Statdisk 11.1.0 Software. Homeless individuals aged 18 years and over, with verbal communication skills, which were not consuming drugs or alcoholic beverages at the time of data collection, were included. Those that were aggressive and were not registered at the data collection sites were excluded.

Data were collected through the following instruments: sociodemographic, data on vulnerability to HIV, syphilis, and tuberculosis; SRQ scale 20 on common mental disorders; Beck's Hopelessness Scale; Beck Anxiety Scale; Beck Depression Scale; Resilience Scale, Hamilton Depression Scale, and HIV/AIDS Vulnerability Questionnaire. Rapid tests for HIV, syphilis, hepatitis B and C were carried out to verify the prevalence of these diseases. Before the tests were carried out the research volunteer was welcomed and advised by a nurse/researcher about what the disease is, prevention, methods of contagion, and treatment. For those with positive outcome there was post-test counseling and referral to the referral hospital done by the researcher and psychologist/social worker at the data collection site. It is worth mentioning that people with positive serology were unaware of their serological situation. The research was approved by the Research Ethics Committee with CAAE 79486517000005176.

RESULTS

It was found that 74% consume drugs, 30% had minimal depression, 44% had mild, and 26% had moderate. As for hopelessness, 17% presented severe, 26% moderate, 28% mild, and 29% minimal. Anxiety reached 37% at the minimal, 38% mild, 20% moderate, and 5% severe. It is emphasized that anxiety influences depression and hopelessness, and that drug use is directly related to hopelessness. HIV was present in 5%, syphilis in 29%, hepatitis B in 1% and absence of hepatitis C was detected.

DISCUSSION

The presence of illnesses or manifestations related to impaired mental health becomes worrisome in the context of street people, as it can lead to suicide and increase drug use. In this way, the individual is more exposed to vulnerable behaviors that can increase the rates of transmissible infections and the sense of correctness⁽³⁾.

CONCLUSION

It was identified that the conditions of vulnerability experienced by the homeless population involve psychosocial issues that generate physical and emotional suffering, which poses a greater risk to health. It is a unique strategy to provide assistance and care from the perspective of early detection of illness and disease prevention. It is necessary to insert nursing in this context, identifying diseases and promoting health.

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