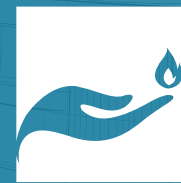


Health Centers & Public Housing



**NATIONAL
NURSE-LED CARE
CONSORTIUM**
a PHMC affiliate

This report provides an overview of the latest available national data for traditional public housing and the health centers that are specifically funded to serve residents and their families. The information below serves to equip both housing and health providers with data to support increased services, partnerships, and positive outcomes for residents across the country. [Click here to find a health center.](#)

Each year, the U.S. Department of Housing and Urban Development (HUD) reports demographic information about residents of public housing that can inform providers in the community about the needs of this population.

1,909,223

U.S. residents of public housing

71%

Racial/Ethnic
Minority

75%

Less Than \$20K
Annual Income

24%

Residents With a
Disability

The Health Resources and Services Administration (HRSA) supports health centers throughout the U.S. to address health disparities and provide comprehensive care to underserved patients. The Public Housing Primary Care (PHPC) program supports health centers that are in or immediately accessible to public housing locations. As of the 2018 Uniform Data System (UDS) Report, 107 PHPCs served 817,123 patients nationwide.

National Picture of Public Housing Primary Care Health Centers



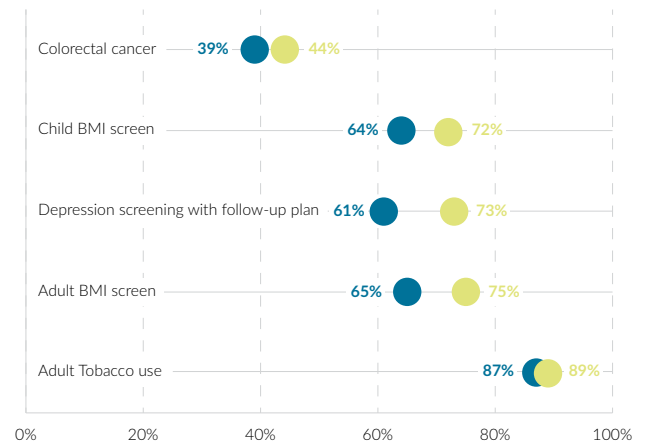
The map to the left depicts the 107 PHPC organizations in the United States. Per the UDS reporting requirements, award recipients are only counted at the organization level, meaning that this map does not depict individual sites serving residents of public housing. Rather, the map indicates the location of organizations that received Section 330i funding for one of more of their sites.

PHPC organizations provide comprehensive healthcare services for residents of public housing, their families, and the surrounding communities. PHPC providers offer important screenings, treatment, and patient-centered services, and respond to emerging community needs (like opioid use disorder services and treatment).

PHPC health centers have increased screenings between 2016-2018

Between 2016 and 2018, PHPC health center organizations made progress in increasing the prevalence of key screenings for adults and children. Each of these represents a priority area identified by HRSA.

PHPC screenings increased between 2016 and 2018

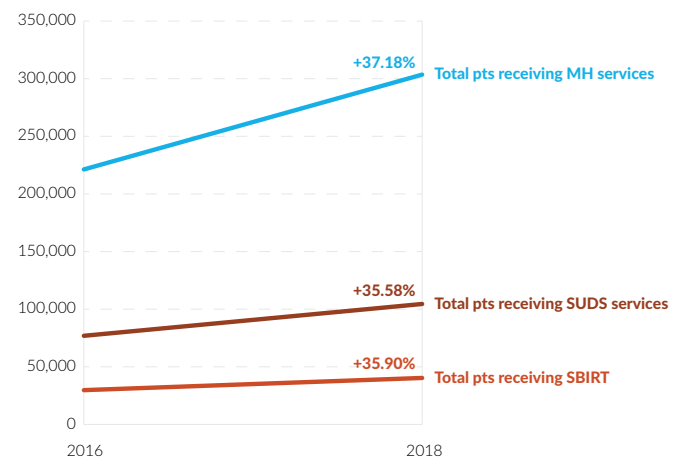


MH and SUDS services at PHPC organizations 2016-2018

Mental and behavioral health services at PHPC health center organizations increased considerably between 2016 and 2018. These increases may be linked to additional funding made available to address the opioid epidemic during that time. This chart depicts the growth of mental health (MH) and substance use disorder (SUD) services provided by PHPC organizations over the past two years of reporting. Increases in screening, brief intervention and referral to treatment (SBIRT), often administered by primary care providers, are also shown.

The staff providing MH and SUD services also increased to meet the need. These staff include psychiatrists, psychologists, licensed clinical social workers, other licensed providers (such as psychiatric nurse, family therapists, and psychiatric social workers), and other mental health staff (such as certified recovery specialists or any other provider). The total FTE for all staff in these categories at PHPC health center organizations increased 57% from 1255.12 FTE to 1970.59 FTE.

MH and SUDS services at PHPC organizations



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