

Community-Based Care for Homeless Individuals with Schizophrenia: Improving Mental Health and Urban Safety

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Abstract

Urbanization and social inequality have exacerbated to the growth of vulnerable populations who face difficulties accessing continuous mental health care. Among these groups, homeless individuals with schizophrenia represent a particularly high-risk population due to the chronic nature of the disorder and the instability of their living conditions. Untreated schizophrenia may lead to severe psychiatric symptoms, social isolation, and socio-environmental risks affecting both the individuals and surrounding communities.

This academic article explores community-based care approaches for homeless individuals with schizophrenia in urban environments. The article synthesizes existing knowledge on schizophrenia, homelessness, community mental health services, and behavioral incentive mechanisms to propose a conceptual framework for improving mental health stability and enhancing community safety.

The discussion emphasizes the imperative of integrating community networks, family support systems, and primary healthcare services to create sustainable care mechanisms for vulnerable populations. Community health volunteers, local leaders, and healthcare providers play critical roles in monitoring patient conditions, facilitating treatment continuity, and strengthening community resilience.

The article concludes that community-based mental health care, combined with collaborative governance and behavioral support mechanisms, can contribute to more effective management of schizophrenia among homeless populations while promoting secure and pluralistic urban communities.

Keywords: Community-Based Care, Schizophrenia, Homeless Population, Community Safety

Introduction

Mental health disorders are increasingly recognized as a significant global public health concern. Among these conditions, schizophrenia is a severe and chronic psychiatric disorder that affects cognition, perception, emotional regulation, and social functioning (World Health Organization, 2023). Individuals living with schizophrenia often experience difficulties maintaining employment, relationships, and stable living conditions, which may increase their risk of homelessness.

Homelessness itself is a complex social phenomenon inextricably linked to poverty, unemployment, lack of social support, and limited access to healthcare services. Previous studies indicate that individuals experiencing homelessness have significantly higher rates of mental illness compared with the general population (Fazel et al., 2014). In particular, schizophrenia is disproportionately prevalent among homeless populations, where unstable living environments make it difficult to maintain regular treatment and medication adherence.

In urban environments, untreated mental illness among homeless individuals can create multiple social challenges. These challenges include increased health risks for individuals, strain on healthcare systems, and heightened concerns about public safety within communities (United Nations, 2020). Urban communities with dense populations often face greater difficulties managing mental health crises due to limited coordination between healthcare services, social support systems, and local governance mechanisms.

Community-based mental health care has emerged as an important approach to addressing these challenges. Rather than relying solely on institutional treatment, community-based approaches emphasize the integration of healthcare services, community networks, and social support systems. This approach allows individuals with mental illness to receive continuous support within their living environments while promoting social inclusion and reducing stigma (World Health Organization, 2021).

The Khlong Toei community in Bangkok represents one of the largest and most densely populated urban communities in Thailand. The community has long faced challenges related to poverty, informal housing, and vulnerable populations, including homeless individuals experiencing mental illness. Addressing mental health issues in

such contexts requires collaborative efforts between healthcare providers, community leaders, families, and social welfare agencies.

This article explores conceptual approaches to community-based care for homeless individuals with schizophrenia and examines how integrated support systems can improve mental health outcomes and enhance community safety in urban environments. Addressing a gap in existing research, the study proposes an integrated community-based care framework that combines healthcare services, community participation, and behavioral support mechanisms to strengthen mental health stability and urban resilience.

Schizophrenia and Mental Health Vulnerability

Schizophrenia is a chronic psychiatric disorder characterized by disturbances in thought processes, perception, emotional responsiveness, and social behavior. Symptoms often include hallucinations, delusions, disorganized thinking, and impaired cognitive functioning. Without appropriate treatment and monitoring, individuals with schizophrenia may experience recurrent episodes that significantly affect their quality of life (World Health Organization, 2023).

Early diagnosis and continuous treatment are therefore essential for effective disease management. However, individuals living in unstable conditions, such as homelessness, often face substantial barriers to accessing mental health services. These barriers include financial constraints, social stigma, and limited availability of community-based mental health services (Fazel et al., 2014).

Homelessness and Urban Mental Health Challenges

Homeless populations experience multiple layers of vulnerability, including health problems, unemployment, and social exclusion. Mental illness is both a contributing factor to and a consequence of homelessness. Research indicates that homeless individuals are significantly more likely to suffer from severe mental disorders compared with the general population (Fazel et al., 2014).

In urban settings, the presence of untreated mental illness among homeless populations may lead to complex social challenges. Community members may experience concerns related to safety, public health, and social stability. Consequently, addressing

mental health issues among homeless populations is not only a healthcare priority but also a crucial aspect of sustainable urban development (United Nations, 2020).

Community-Based Mental Health Care

Community-based mental health care emphasizes service delivery within the local community rather than relying solely on institutional care. This approach promotes collaboration between healthcare professionals, families, community organizations, and local governance structures. According to the World Health Organization (2021), community-based mental health services can improve treatment accessibility, reduce relapse rates, and promote social reintegration for individuals with severe mental illness.

Community participation is therefore a key factor in supporting vulnerable populations. Community health volunteers and local leaders often play essential roles in monitoring patient conditions, providing emotional support, and facilitating access to healthcare services.

Behavioral Incentive and Social Support Mechanisms

Behavioral incentive strategies have been widely applied in health promotion and behavioral change interventions. These strategies are based on the principle that individuals are more likely to adopt positive behaviors when appropriate incentives or supportive environments are present (Thaler & Sunstein, 2008).

In the context of schizophrenia care, behavioral incentives may include structured support systems, medication reminders, social encouragement, and community monitoring. Such mechanisms can help increase treatment adherence and reduce relapse among patients living in unstable social conditions.

Toward Safer and More Inclusive Urban Communities

The integration of community-based mental health care with urban governance mechanisms can contribute significantly to safer and more inclusive cities. Collaborative governance frameworks involving healthcare institutions, local governments, community organizations, and civil society can strengthen urban resilience and promote sustainable development (Ansell & Gash, 2008).

When communities actively participate in mental health support systems, they become better equipped to respond to crises, support vulnerable populations, and foster social cohesion. These approaches align with global development frameworks that emphasize inclusive cities and healthy communities (United Nations, 2020).

Conceptual Framework of the Community-Based Care Model

Figure 1 illustrates the conceptual framework of the proposed community-based care model for homeless individuals with schizophrenia. The framework emphasizes the integration of healthcare services, community participation, and behavioral support mechanisms in order to promote treatment continuity and improve mental health stability. The model also highlights the role of community networks and collaborative governance in strengthening safety and resilience within urban communities.



Figure 1: Adapted from the concept of community-based mental health care (WHO, 2021) and behavioral incentive mechanisms (Thaler & Sunstein, 2008).

The conceptual framework illustrates the dynamic relationships among three core components: community participation, behavioral incentive mechanisms, and primary healthcare integration, which collectively contribute to mental health stability and community safety. Community participation, including the involvement of local leaders, families, and community health volunteers, functions as a foundational support system that enables continuous monitoring and social support for individuals with schizophrenia.

Behavioral incentive mechanisms act as reinforcing factors that promote treatment adherence and positive health behaviors through structured support, reminders, and motivational strategies. These mechanisms strengthen the effectiveness of community participation by encouraging consistent engagement with care processes.

Primary healthcare integration serves as a coordinating mechanism that connects community-based support with formal mental health services, ensuring continuity of care and early intervention in cases of symptom relapse. The interaction among these components creates a synergistic effect that enhances both individual mental health outcomes and broader community safety.

The development of this framework is grounded in community-based mental health care principles (World Health Organization, 2021), which emphasize person-centered and rights-based approaches, and behavioral incentive theory (Thaler & Sunstein, 2008), which explains how supportive environments can influence health-related behaviors. In addition, the model incorporates collaborative governance concepts (Ansell & Gash, 2008) to highlight the role of multi-stakeholder coordination in addressing complex urban health challenges.

Table 1 presents the key elements of the proposed community-based care model. The model integrates three primary components: community participation, behavioral incentive mechanisms, and healthcare service coordination.

Table 1 Elements of Community-Based Care Model for Homeless Individuals with Schizophrenia

Component	Description	Expected Outcomes
Community Participation	Involvement of community leaders, families, and community health volunteers in monitoring and supporting patients	Improved patient follow-up and social support
Behavioral Incentive Mechanisms	Use of motivation, reminders, and supportive environments to encourage treatment adherence	Increased medication compliance and reduced relapse
Primary Healthcare Integration	Collaboration between community networks and mental health service providers	Improved access to treatment and continuity of care
Community Monitoring System	Community-based tracking and support mechanisms for patients with severe mental illness	Early detection of symptom relapse
Collaborative Governance	Coordination among healthcare institutions, local government, and community organizations	Strengthened community safety and social resilience

Table 1 summarizes the key components of the proposed community-based care model. The integration of community participation, behavioral support mechanisms, and healthcare service coordination is instrumental in improving treatment continuity and enhancing mental health stability among homeless individuals with schizophrenia. Furthermore, collaborative governance among local stakeholders facilitates the reinforcement of community safety and resilience.

Conclusion

Mental health challenges among homeless individuals with schizophrenia constitute a multifaceted challenge that intersects public health, social welfare, and urban governance. Traditional institutional approaches alone fall short of addressing the complex nature of this problem. Community-based care approaches provide a robust framework for improving treatment continuity, enhancing mental health stability, and strengthening community safety. By integrating healthcare services, community networks,

and social support systems, urban communities can develop more inclusive mechanisms for supporting vulnerable populations.

Future initiatives should focus on prioritize fortifying collaboration between healthcare providers, community leaders, and policy institutions to create sustainable mental health support systems in urban environments. Such efforts will not only improve the quality of life of individuals with schizophrenia but also contribute to the development of safer and more resilient communities.

Contributions and Implications

This study advances existing knowledge by proposing an integrated conceptual framework that combines community-based mental health care, behavioral support mechanisms, and collaborative governance to address the complex needs of homeless individuals with schizophrenia in urban environments. Unlike prior studies that focus primarily on clinical or institutional approaches, this study emphasizes the integration of community participation and social support systems to ensure treatment continuity and enhance mental health stability.

Academically, the study contributes to the literature by offering a multidimensional framework that links healthcare services, community networks, and behavioral strategies within an urban context. Practically, the proposed framework provides guidance for healthcare providers, community leaders, and social workers in developing more effective and sustainable care systems for vulnerable populations. From a policy perspective, the findings highlight the importance of integrated urban health policies that foster collaboration among healthcare institutions, local governments, and community organizations to improve both mental health outcomes and community safety.

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