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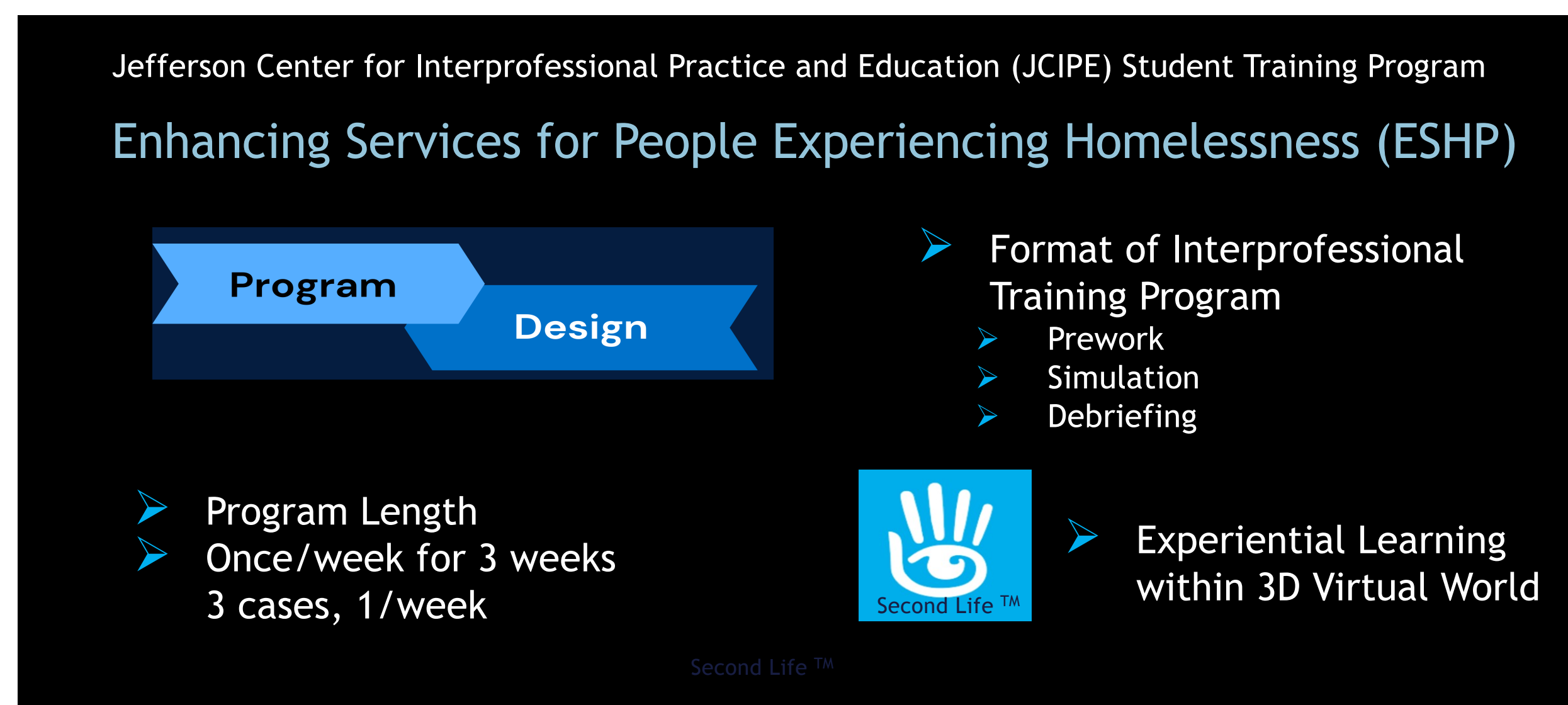
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Validation of the Factor Structure of the Health Professionals' Attitudes Toward the Homeless Inventory (HPATHI)

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Background

- Considerable stigma exists toward persons experiencing homelessness (PEH)—a vulnerable population at greater risk for health disparities. ^{1, 2}
- Many healthcare students begin their programs without interacting with PEH and with preconceived notions influenced by societal stigma.
- Interprofessional education programs, such as the *Enhancing Services for People Experiencing Homelessness* program below, have incorporated experiential learning into curricula to address student biases and develop understanding and compassion.
 - Educating students to understand issues that PEH face can help mitigate healthcare disparities.



However

- Evaluating the **effectiveness** of these interprofessional educational experiences requires **valid assessment of the attitudes, interest, and confidence of students from various professions about working with PEH.**
- The Health Professional Attitudes Toward the Homeless Inventory (HPATHI) is frequently used for this purpose, including for ESHP, but has several limitations:
 - Developed with a sample of medical students, overgeneralizing its validity for other health professions
 - Standard-practice psychometric approaches were not used to support its validity.
 - Final solution included several cross-loaded items.

Rationale for Cognitive Interviewing

Cognitive interviewing is a technique that identifies ways respondents interpret survey questions and apply those questions to their own lives, experiences, and perceptions. Through this process, cognitive interviewing can identify problems with questions and the way in which questions perform, so they can be improved.

Miller, et. al., 2014

Research Objective

Test the validity of the HPATHI and its purported subscales for use with various health professions.

Methods

Participants

- 11 students from 5 health professions: Medicine, Nursing, Occupational Therapy, Physical Therapy, & Public Health.

Cognitive Interviewing Procedure

- For each of the 35 original HPATHI questions (see Table 1):
 - Students responded to 7 questions at a time (in order).
 - Researcher conducted in-depth interviews to elicit participant input on all questions
- Audio recordings of the cognitive interviews were transcribed.

Qualitative Analysis Procedure

- A five-step qualitative analysis (see Figure 1) is in progress to evaluate each question's performance within the context of respondents' varied experiences and world views.

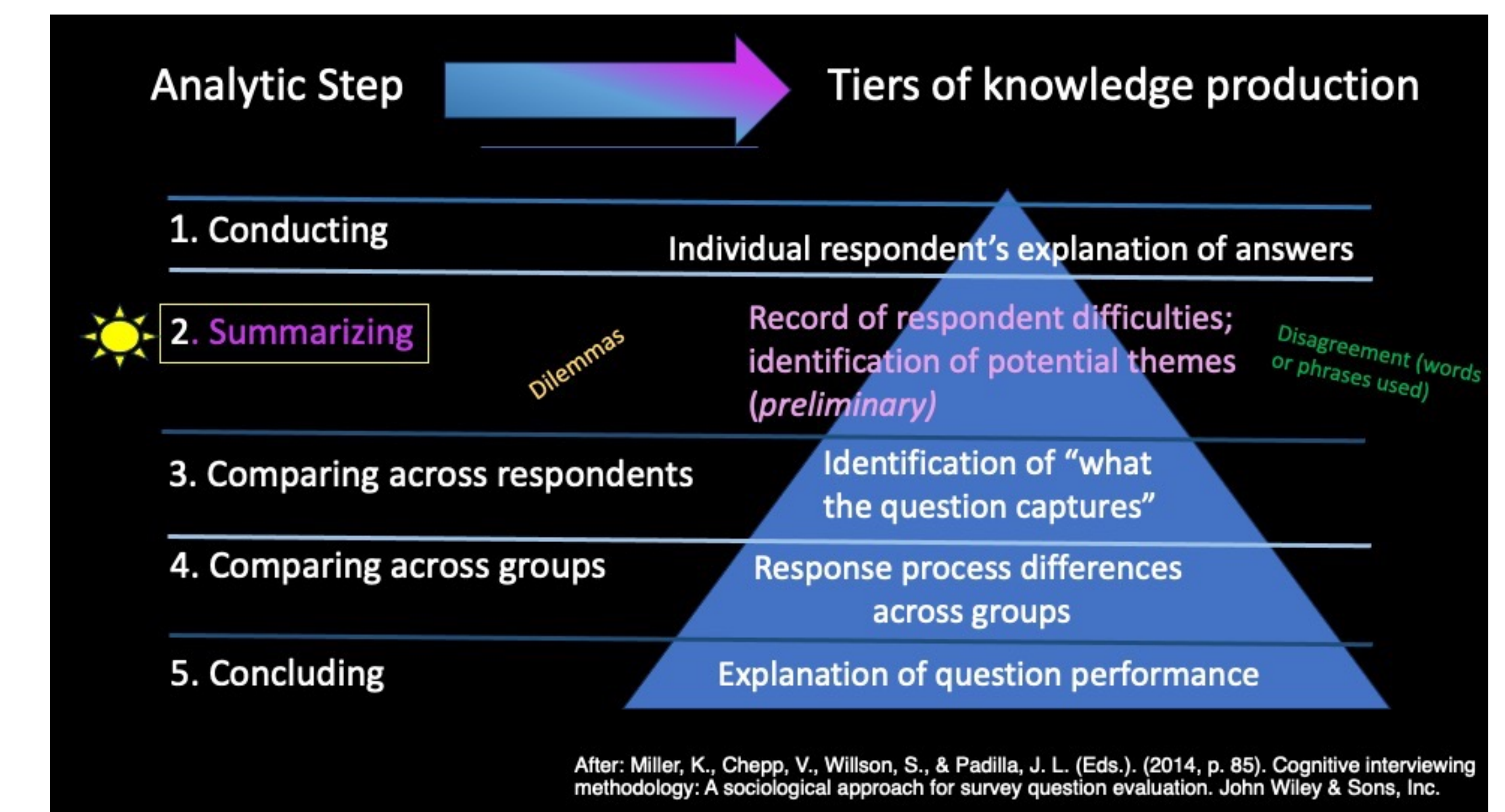
Table 1. Overview of Original 35-Item HPATHI

Subscale	# Items*	Example Items	Cronbach's Alpha
Personal Advocacy	9	21. "I enjoy learning about the lives of my homeless patients." 13. "Doctors should address the physical and social problems of the homeless."	.75
Social Advocacy	6	7. "Health-care dollars should be directed toward serving the poor and homeless" 8. "I am comfortable being a primary care provider for a homeless person with a major mental illness."	.72
Cynicism	4	6. "Homeless people are lazy." 7. I feel comfortable providing care to different minority and cultural groups"	0.72
None ^a	16	34. "I feel it is important to provide care to all socio-economic groups."	N/A

*Rated on 5-point Likert scale: 1 = "strongly disagree" to 5 = "strongly agree"

^a 12 items discarded *before factor analysis* due to high "[correlation] with other items...or that had item-scale correlations < .20"; 4 items discarded *after factor analysis* due to no loadings onto 3-factor structure or "adverse effect on the subscale's reliability" (Buck et al., 2005)

Overview of Analysis: Cognitive Interviews



Current Stage: Summarizing

- Become familiar with the data (listen to interview recordings)
- Synthesize data from each interview into a narrative summary, including
 - how and why participant interpreted each question as they did
 - how they put together their answers, including links to previous experience working with or learning about PEH
 - challenges or dilemmas when trying to answer the question
- Meet with analysis team to discuss

Next Steps

- Possible revisions to item phrasing informed by final results of the qualitative analysis of cognitive interviews
- Factor analysis will be conducted with data from large independent sample of health profession students (n = ~15 per item; N >= 525)
 - Exploratory factor analysis on 60% sample of data
 - Confirmatory factor analysis on 40% hold-out data

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