Shelter-based intermediate care for homeless adults in Amsterdam: Characteristics and dynamics in the user profile between 2001–2008

This interesting manuscript provides a longitudinal descriptive overview of the characteristics of and health-related issues pertaining to sample of homeless adults who used an intermediate care facility. The major strength of the manuscript is its longitudinal approach. There are some concerns about, however, about the manuscript that undermine its importance and soundness. In addition, there are questions about the research approach. These concerns and questions are noted below.

Major Compulsory Revisions
Introduction:
1. The purpose of the narrative account of the experiences of a homeless man who needs intermediate care is not clear. While this account does provide an interesting introduction to the manuscript, there is no transition to the next paragraph that begins a description of the scope of the problem of homelessness among adults in Amsterdam. There is also no transition when the narrative of the homeless man’s experiences is returned to later in the Introduction section on page 5. Why this narrative is included in the manuscript should be very explicit for the reader.

2. Does the GGD serve all homeless people including families with children and adolescents or is it only for adults? More detailed information is needed about who among the homeless population is represented when the term “homeless people” is used. Authors may just want to focus on homeless adults when discussing services, population characteristics, and so forth in this manuscript.

3. A compelling argument for the significance of this manuscript was not provided. Specifically, why is it important to “contribute to the knowledge of shelter-based intermediate care use” in Amsterdam? What does this manuscript contribute to what is currently known about homeless adults? The Discussion section includes studies and findings that could be used to develop this argument for the Introduction section.

Method:
1. Were human subjects protections followed for the data collection by the GGD doctor? Only consent for contacting other care providers in the referral network
was described.

2. How exactly were the all the data collected? What were all the sources? How were reliability and validity determined? These methodological issues are not addressed well in the description of the data collection that was provided.

Results:

1. Were all the heroin users injecting drug users (IDU)? Finding that heroin users were more likely to be HIV+ is not surprising if they were given the prevalence of HIV infection among IDU.

2. One of the most important findings of this research is the changes over time in the homeless population served by the intermediate care facility; specifically, that the number of homeless people who use the facility has grown smaller but they have more severe physical health problems and more mental health problems including hard drug use. Clearly, there continues to be a need for this type of service even when a city, in this instance Amsterdam, provides more comprehensive services for homeless people. This finding and its implications are somewhat understated and could be highlighted more. For example, as was noted, this finding has implications for why this particular group of homeless adults is not able to move to or stay in more stable housing situations (63% who return to previous homelessness situations upon discharge).

3. Another important finding is that homeless people used other homeless people as a referral source for assistance almost as much as they used social agencies. What are the implications of this finding for the service sector?

Minor Essential Revision
Not applicable.

Discretionary Revisions
1. Some editing of the manuscript is warranted for typographical errors, grammatical errors, etc.
2. The term “homeless” is best used as an adjective and not a noun. We are describing people and want to try to avoid dehumanizing them whenever we can.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests.