



Scan to know paper details and  
author's profile

# Psychosocial Variables Affecting the Behavior of Street Inhabitants in Five Panamanian Shelters

*Miguel A. Cañizales M & Francisco J. De León O.*

## ABSTRACT

To test these hypotheses, we propose to conduct a quantitative study, with a non- experimental, cross-sectional and correlational design. The objective is to analyze the relationship between psychosocial factors and the behavior of homeless people in Panama, using observation, a structured interview, the MEC and a mental examination protocol as instruments. The sample will be composed of 160 homeless people from the John Paul II Center in Panama. It is expected to find a correlation between psychosocial factors and behavior, which would support the null hypothesis and reject the alternative hypothesis.

**Keywords:** street dwellers, psychopathological behaviors, psychosocial factors, drug use and mental health status.

**Classification:** LCC Code: HV4506.P3, RC475.5

**Language:** English



Great Britain  
Journals Press

LJP Copyright ID: 573355  
Print ISSN: 2515-5786  
Online ISSN: 2515-5792

London Journal of Research in Humanities and Social Sciences

Volume 23 | Issue 20 | Compilation 1.0



© 2023. Miguel A. Cañizales M & Francisco J. De León O. This is a research/review paper, distributed under the terms of the Creative Commons Attribution-Noncommercial 4.0 Unported License <http://creativecommons.org/licenses/by-nc/4.0/>, permitting all noncommercial use, distribution, and reproduction in any medium, provided the original work is properly cited.



# Psychosocial Variables Affecting the Behavior of Street Inhabitants in Five Panamanian Shelters

Miguel A. Cañizales M<sup>a</sup> & Francisco J. De León O.<sup>o</sup>

## ABSTRACT

*To test these hypotheses, we propose to conduct a quantitative study, with a non- experimental, cross-sectional and correlational design. The objective is to analyze the relationship between psychosocial factors and the behavior of homeless people in Panama, using observation, a structured interview, the MEC and a mental examination protocol as instruments. The sample will be composed of 160 homeless people from the John Paul II Center in Panama. It is expected to find a correlation between psychosocial factors and behavior, which would support the null hypothesis and reject the alternative hypothesis.*

**Keywords:** street dwellers, psychopathological behaviors, psychosocial factors, drug use and mental health status.

## RESUMEN

*Para probar estas hipótesis, se propone realizar un estudio de tipo cuantitativo, con un diseño no experimental, transversal y correlacional. El objetivo es analizar la relación entre los factores psicosociales y la conducta de las personas en condición de calle en Panamá, utilizando como instrumentos la observación, una entrevista estructurada, el MEC y un protocolo del examen mental. La muestra estará compuesta por 160 personas en condición de calle del Centro Juan Pablo II en Panamá. Se espera encontrar una correlación entre los factores psicosociales y su conducta, lo que apoyaría la hipótesis nula y rechazaría la hipótesis alterna.*

**Palabras clave:** habitantes de la calle, conductas psicopatológicas, factores psicosociales, consumo de drogas y estado de la salud mental.

## I. INTRODUCTION

In this article we identify the psychosocial variables that affect the category of -appearance and behavior- of people living in street situations in Panama. By psychosocial variables we mean those factors that affect the emotional and social well-being of people, as well as their ability to adapt to the environment. Likewise, we analyze the behavior of street dwellers as an expression of social vulnerability, which are complex and multidimensional phenomena, impacting both the material conditions and the subjective perceptions of people, who assume an adaptation to their low self-esteem and precarious living conditions (such as addictions, lack of health care and poor self-control).

Patrício et al. (2019) point out that street dwellers are a vulnerable population facing multiple adversities (such as poverty, exclusion and discrimination) and violence in their daily lives. They also present high levels of psychological problems such as depression, anxiety, stress, suicidal ideation, loss of meaning in life, insomnia, social isolation, drug use and sexual abuse. This contributes to the presence of psychopathological factors in street dwellers. A social problem observed in many cities is that of street people, who are pejoratively referred to as "piedreros" (in Panama). These people usually have a neglected and marginalized appearance, which makes them the target of discrimination and rejection.

With this research we intend to explore some emotional and social factors that may influence the psychopathological behavior of street dwellers. This situation is detrimental to them and to those around them.

This study will make visible and raise awareness about some psychological and social risks that deteriorate the quality of life of street dwellers.

## II. METHODOLOGY

### 2.1 Sample

We investigated the social and psychological profile of the people housed in this center. For this, we will use the non-probabilistic purposive sample, composed of 160 adults who have been housed in a period from May 18, 2018 to May 18, 2023 (five years), within the five shelters that the institution has had, located in: La Chorrera, Calidonia, Santa Ana, San Miguel and Río Hato.

### 2.2 Instruments

Three instruments were used to assess the degree of lucidity or compromise of consciousness, especially with regard to the difficulty in waking up and responding to external stimuli: A structured interview, Lobo's Mini Cognitive Examination, (1999) and a Mental Examination Protocol. These are detailed below:

### 2.3 Structured Interview

Includes: Place of birth, date of birth, age, schooling, place of residence, occupation, period of residence, reason for leaving, drug-related problems, start of drug use, last time of drug use, tolerance or dependence.

### 2.4 Mini-Cognitive Examination (MEC or MMSE)

In this category of instruments it was demonstrated that the constructive validity of the MMSE is good, when compared with other scales and diagnostic measures, such as the one performed with the Diagnostic and Statistical Manual of Mental Disorders DSM-IV (Diagnostic and Statistical Manual-IV, of the American Psychiatric Association, 2000).

### 2.5 Acosta, (2009, p. 322-324) Indicates:

"Short tests... usually yield important results on a specific population. In this case the population is the polydrug user, and its application was intended to establish the existence of a

deterioration in cognitive processes..... In summary, the Mini-Mental test is useful as a screening test because it yields results on the impairment of functions at a general level; however, in these cases, it is of vital importance to use an extensive neuropsychological evaluation battery to specifically determine the altered area".

*In the same sense, Aznar, (1999): points out:*

The experts now consulted also endorsed the "feasibility" and "content" validity of the SCM. The following previous existing data from the original Spanish standardization support the "construct" validity of the instrument: "concurrent validation" against psychometric instruments or independent clinical tests; discriminative capacity between "organic" and "non-organic" pictures; and validation against external parameters, including the EEG. The results of the test-retest reliability calculation of the SCM, under the demanding conditions of the study, were satisfactory. The majority of individuals fall in the high, normal, range of performance on the MEC, but there is sufficient scatter in the scores and the reliability coefficient was, for the MEC-35:  $kw = 0.637$  ( $95\%CI = 0.596-0.678$ ;  $z = 12.655$ ;  $p < 0.01$ ).

### 2.6 Mental Examination Protocol

In this evaluation it is necessary to perform a mental examination to obtain information regarding possible degrees of impairment of judgment, intelligence, memory, mood, and others. These are aspects that are part of the evaluation of the mental state of a person and it is necessary to know how to identify and analyze them.

This protocol discriminates according to the exploration of the mental status evaluation that reflects some characteristics of higher cortical functions, such as abstract thinking.

## III. RESULTS

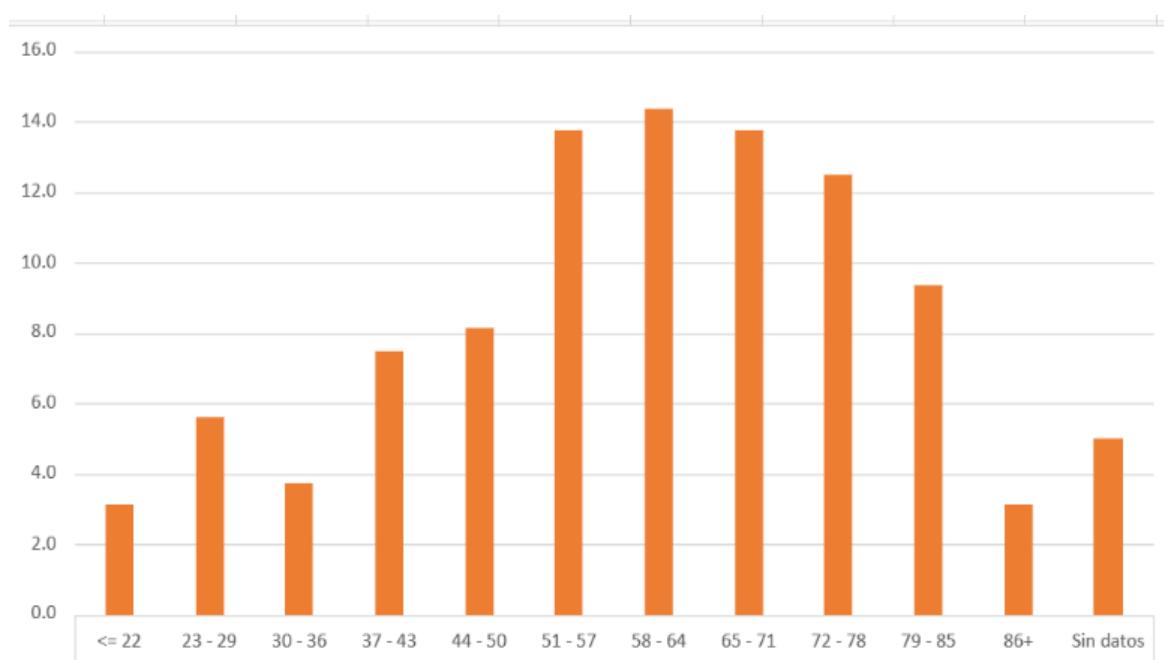
The results obtained from the data analysis are shown below.

### 3.1 Description of results obtained in the Structered Interview

Figure 1 shows the distribution of ages in a range of seven years, from the highest to the lowest number of statistical results, 58-64 years represented 23 people (14.4%), 51-57 years and 65-71 years represented 22 people (13.8%), 72-78 years represented 20 people (12.5%), 79-85 years represented 15 people (9.4%), age 44-50 represented 13 persons (8.1%), age 37-42

represented 12 persons (7.5%), no data represented 8 persons (5.0%), age 30-36 represented 6 persons (3.8%), age 23-29 represented 9 persons (5.6%), and age 86 and older and age 22 and younger represented 5 persons each (3.1%).

This indicates a higher percentage of people in the 51+ age range than in the 50+ age range in the shelters of the John Paul II Center.

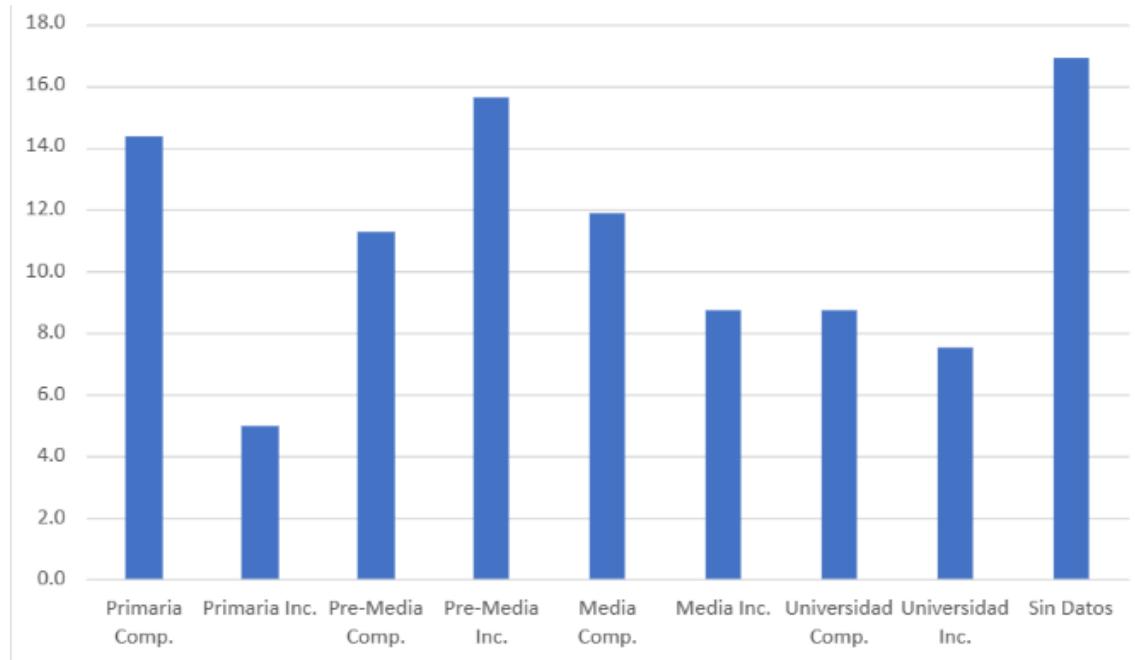


Source: *Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters*.

*Figure 1:* Graph of age distribution over a seven-year range

Figure 2 shows the distribution of the level of schooling from the highest to the lowest number, No data represents 27 persons (16.9%), in the level up to Pre-medium not completed it represented 25 persons (15.6%), in the level up to Primary completed it represented 23 persons (14.4%), in the level up to High School completed it represented 19 persons (11.9%), at the level up to Pre-media completa represented 18 people (11.3%), at the level up to Media no completo and Universidad Completa represented 14 people each (8.8%), at the level of Universidad no completo represented 12 people (7.5%), and at the level of Primaria no Completa represented 8 people (5.0%).

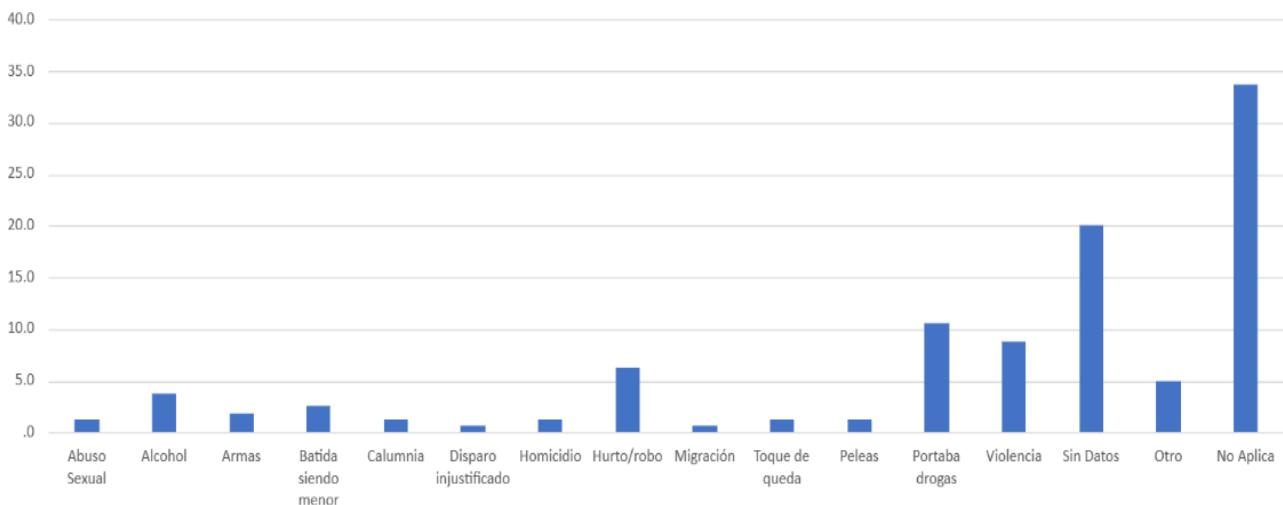
This indicates a high level of people who did not complete school. It is observed that the people in this sample have a very low level of schooling.



Source: *Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters*.

*Figure 2:* Graph of Schooling Level Distribution

Figure 3 shows the distribution of the reasons for arrest from highest to lowest number, with 54 persons not arrested (33.8%), 32 persons (20.0%) in the category of No data, 17 persons (10.6%) in the category of Carrying drugs, 14 persons (8.8%) in the category of Violence, 10 persons (6.3%) in the category of Robbery or Theft, 8 persons (5.0%) in the category of Other, 6 persons (3.8%) in the category of Alcoholism (3.8%), 4 persons (2.5%) in the category of Weapons Carrying (2.5%), 4 persons (2.5%) in the category of Raiding while under age (2.5%) in the category of Weapons Carrying (2.5%). 0%, in the category of Alcoholism corresponded to 6 persons (3.8%), in the category of Batida while under age corresponded to 4 persons (2.5%), in the category of Carrying Weapons corresponded to 3 persons (1.9%), in the categories of Sexual Abuse- Slander- Homicide- Pandemic Curfew-Street Fighting corresponded to 2 persons each (1.3% each category), and the categories of Unjustified shooting and Migratory Status corresponded to one person each (0.6%).



Source: *Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters*.

*Figure 3:* Graphs of the distribution of Reasons for Detention

#### IV. INFERENTIAL STATISTICS FOR THE CATEGORY "APPEARANCE AND BEHAVIOR". CORRELATION

*Hypothesis:*

*Hypothesis Ho:* There are no psychosocial factors that influence the behavior of a homeless person in Panama.

$$H_i: r \neq 0$$

*Hypothesis Hi:* There are psychosocial factors that influence the behavior of a homeless person in Panama.

$$H_o: r = 0.$$

- Statistical test: chi cuadrado
- Level of confidence:  $\alpha 0.05$

*Region of rejection:*

- Reject  $H_o$        $p \leq 0.05$
- Accept  $H_o$        $p > 0.05$

*Table 1:* Appearance and behavior vs. diagnosed mental illnesses

Pruebas de chi-cuadrado			
	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	13.756 <sup>a</sup>	17	.684
Razón de verosimilitud	19.545	17	.298
N de casos válidos	147		

Source: *Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 13.756, with a degree of freedom of 17, and a p-value of 0.684, we observe that there is a negative correlation since its

significance level is greater than 0.05, so there is sufficient evidence to accept the  $H_0$ , which coincides with the fact that these psychosocial factors do not influence the behavior of a person in street conditions in Panama.

*Table 2:* Appearance and behavior vs. Alcohol tolerance

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	3.628 <sup>a</sup>	2	.163
Razón de verosimilitud	3.586	2	.166
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters.*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 3.628, with a degree of freedom of 2, and a p-value of 0.163, we observe that there is a negative correlation since its

significance level is greater than 0.05, so there is sufficient evidence to accept the  $H_0$ , which coincides with the fact that these psychosocial factors do not influence the behavior of a person in street conditions in Panama.

*Table 3:* Appearance and behavior vs. Cigarette tolerance

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	2.536 <sup>a</sup>	2	.281
Razón de verosimilitud	2.506	2	.286
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters.*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 2.536, with a degree of freedom of 2, and a p-value of 0.281, we observe that there is a negative correlation since its significance level is greater than 0.05, so there is sufficient evidence to accept the  $H_0$ , which coincides with the fact that these psychosocial factors do not influence the behavior of a person in street conditions in Panama.

*Table 4:* Appearance and behavior vs. Marijuana tolerance

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	9.171 <sup>a</sup>	2	.010
Razón de verosimilitud	9.963	2	.007
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 9.171, with a degree of freedom of 2, and a p-value of 0.010, we observe that there is a positive correlation since its

significance level is less than 0.05, so there is sufficient evidence to accept the  $H_i$ , which coincides with the fact that these psychosocial factors influence the behavior of a person in street conditions in Panama.

*Table 5:* Appearance and behavior vs. Cocaine tolerance

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	5.830 <sup>a</sup>	2	.054
Razón de verosimilitud	6.343	2	.042
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters.*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 5.830, with a degree of freedom of 2, and a p-value of 0.054, we observe that there is a negative correlation since its

significance level is greater than 0.05, so there is sufficient evidence to accept the  $H_0$ , which coincides with the fact that these psychosocial factors do not influence the behavior of a person in street conditions in Panama.

*Table 6:* Appearance and behavior vs. Compulsive gambling

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	7.824 <sup>a</sup>	2	.020
Razón de verosimilitud	8.477	2	.014
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 7.824, with a degree of freedom of 2, and a p-value of 0.020, we observe that there is a positive correlation since its

significance level is less than 0.05, so there is sufficient evidence to accept the  $H_i$ , which coincides with the fact that these psychosocial factors influence the behavior of a person in street conditions in Panama.

*Table 7:* Appearance and behavior vs. Occupation

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	37.874 <sup>a</sup>	40	.566
Razón de verosimilitud	46.363	40	.226
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters.*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 37.874, with a degree of freedom of 40, and a p-value of 0.566, we observe that there is a negative correlation since its

significance level is greater than 0.05, so there is sufficient evidence to accept the  $H_0$ , which coincides with the fact that these psychosocial factors do not influence the behavior of a person living on the street in Panama.

*Table 8:* Appearance and behavior vs. Cognitive impairment

	Valor	gl	Significación asintótica (bilateral)
Chi- cuadrado de Pearson	7.090 <sup>a</sup>	2	.029
Razón de verosimilitud	7.574	2	.023
N de casos válidos	147		

*Source: Psychosocial Variables that Influence the Behavior of Street Inhabitants in Five Panamanian Shelters.*

Due to the inclusion and exclusion criteria, there were 160 data collected where 147 records of persons obtained were completed. According to the chi-square value of 7.090, with a degree of freedom of 2, and a p-value of 0.029, we observe that there is a positive correlation since its significance level is less than 0.05, so there is sufficient evidence to accept the  $H_i$ , which coincides with the fact that these psychosocial factors influence the behavior of a person in street conditions in Panama.

## V. DISCUSSION

The statistical hypothesis establishes that there are psychosocial factors that influence the behavior of a homeless person at the John Paul II Center in Panama City.

Our findings contrast with those of De León and Cañizales (2021), who reported that most of the participants showed inadequate appearance and behavior. Likewise, we differ from the survey data of Ayano et al. (2017), which indicated that a high

percentage of people presented some psychotic or schizophrenic disorder.

The results of this research are related to those of Grandón et al. (2018), who noted in their studies that more people had dropped out of education. They also mentioned that the majority of homeless people with mental health problems did not recognize their condition. In addition, they coincide with those of Alvarado (2017), who found that street dwellers in the municipality of Facatativá were mostly people who had left school at an early age, and that most people were affected mainly by marijuana use, followed by other substances.

## VI. CONCLUSION

This research has made it possible to analyze the factors that influence the behavior of people living on the streets who are cared for at the John Paul II Center. It has been found that tolerance to marijuana consumption, gambling habits and cognitive impairment are relevant factors that affect the appearance and behavior of these people; however, it has not been possible to establish a causal relationship between psychosocial factors and the category of Appearance and behavior- in a generalized way.

Within the sociodemographic variables, we also found that there is a high level of school dropout and There is a high frequency of people who have accepted to be housed in this institution, most of whom are over 51 years of age and older.

Since there is a higher percentage of people who do not have a mental diagnosis, it can be interpreted that this category of -diagnosed mental illnesses- does not influence the appearance and behaviors of these people.

Similarly, as there is a high frequency of people who do not apply (or do not consume) in alcohol tolerance, cigarette tolerance, cocaine tolerance and occupation are presented as not influencing the appearance and behavior of these people.

The results presented in this article are specific to the category of Appearance and behavior, so other items such as thought content process, mood,

thought processes and content, and others are not emphasized.

## REFERENCE

1. De León, F. y Cañizales, M. (22 de septiembre del 2022). Relación Entre el Deterioro Cognitivo y el Consumo de Alcohol, Cocaína y Marihuana en Adultos Varones del Albergue Juan Pablo II. REDEPSIC, 1(2), 63-82.
2. Organización Mundial de la Salud (17 de junio del 2022). Salud Mental: Fortalecer nuestra respuesta. Recuperado de: <https://www.who.int/es/news-room/fact-sheets/detail/mental-health-strengthening-our-response>.
3. OECD (2021), Fitter Minds, Fitter Jobs: From Awareness to Change in Integrated Mental Health, Skills and Work Policies, Mental Health and Work, OECD Publishing. Recuperado de: <https://doi.org/10.1787/ao815dof-en>.
4. Grandón, P., Vielma-Aguilera, A., Siprian, Elvis., Bustos, C., y Saldivia, S. (4 de junio del 2018). Caracterización de las personas en situación de calle con problemas de salud mental, que se encuentran en la Región del BíoBío. REV CHIL NEURO-PSIQUIAT, 56(2), 89-99.
5. Maitta, I., Cedeño, M., y Escobar, M. (Marzo del 2018) Factores biológicos, psicológicos y sociales que afectan la salud mental. Revista: Caribeña de Ciencias Sociales, Recuperado de: <https://www.eumed.net/rev/cariibe/2018/03/factores-salud-mental.html>
6. NIDA. (Marzo 22). La adicción y la salud. Recuperado de: <https://nida.nih.gov/es/publicaciones/las-drogas-el-cerebro-y-la-condulta-la-ciencia-de-la-adiccion/la-adiccion-y-la-salud>.
7. Nieto, C., y Silvia, H. (2015). Definiciones de Habitante de Calle y de Niño, Nila y Adolescentes en Situación de Calle: Diferencias y Yuxtaposiciones. Acta de investigación psicológica UNAM, 5(3), 2162- 2181.
8. Álvarez, M., Durango, C., Carvajal, Y., Pinzón, M. y Gómez, X. (15 de noviembre del 2021) Caracterización del proceso de resocialización de personas en habitación de calle, desde la intervención del Trabajo Social en el Albergue de necesidades especiales y enfermedades infectocontagiosas de la Alcaldía de Medellín

en 2021. Institución Universitaria tecnoógica de Antioquia Facultad de Educación y Ciencias Sociales.

9. Vargas, P. (2012). Resocialización de habitantes de la calle. Trabajo Universitario de Periodista. Universidad Javeriana.
10. Sosa, D. (5 de octubre del 2018). Las consecuencias físicas y mentales del consumo de drogas. Recuperado de: <https://www.lavidalucida.com/las-consecuencias-fisicas-y-mentales-del-consumo-de-drogas.html>
11. Rodríguez, E. (9 de octubre del 2018). ¿Cómo afecta el consumo de drogas a la salud mental de los adolescentes? Recuperado de: <https://lamenteesmaravillosa.com/asi-afecta-consumo-drogas-la-salud-mental-la-adolescencia/>.
12. Mashal, K. (2022). Trastornos por el uso de sustancias. Recuperado de: <https://www.Msdmanuals.com/es-es/hogar/trastornos-de-la-salud-mental/trastornos-relacionados-con-sustancias/trastornos-por-el-uso-de-sustancias>.
13. National Institute on Drug Abuse (2020). Las drogas, el cerebro y la conducta: bases científicas de la adicción. Institutos Nacionales de Salud. Departamento de Salud y Servicios Humanos de Estados Unidos.
14. D. Salado, A. D. (2017). Psicofisiología Humana (1ed.). Universidad de Panamá.
15. American Psychiatric Association. (2014). Guía de consulta de los criterios diagnósticos del DSM-5. Panamericana.
16. Alvarado, Y. (1 de junio del 2017). Descripción de Factores Psicosociales de los Habitantes de Calle del Municipio de Facatativá: Proyecto de Pasantía. Universidad de Cundinamarca, Facultad de Ciencias Sociales, Humanidades y Ciencias Políticas.
17. Grandón, P., Vielma, A., Siprian, E., Bustos, C. y Saldivia, S. (2018). Caracterización de las personas en situación de calle con problemas de salud mental, que se encuentran en la región del BíoBío. REV CHIL
18. NEURO-PSIQUIAT 2018. 56(2), 89-99.
19. Zabala, J. (2021). Factores de vulnerabilidad cognitiva de la permanencia en calle: desesperanza y derelicción. Límite, Revista Interdisciplinaria de Filosofía y Psicología. 16(2), 1-20.
20. Ministerio de Economía y Finanzas (2020). Pobreza e indigencia por ingreso. Segundo Encuesta de Hogares. Recuperado de: <https://www.mef.gob.pa/wp-content/uploads/2021/03/MEF-DAES-Pobreza-e-Indigencia-por-ingreso-2019.pdf>.
21. Grupo Banco Mundial (2023). El Banco Mundial en Panamá. Panorama general. Recuperado de: <https://www.bancomundial.org/es/country/panama/overview#1>.
22. Díaz, P; García, T; Martínez, M, & Varela, M. (2013). La entrevista, recurso flexible y dinámico. Investigación en educación médica. 2(7), 162-167.
23. Huenupil, S (2018). La observación participante: fases ventajas y desventajas. Psico-educación comunitaria. Recuperado de: <http://saulmirandaramos.blogspot.com/2018/06/laobservacion-participante-fases.html>.
24. Acosta, J. C. (2009). Perfil del MINI-MENTAL en policonsumidores de 25 A 50. Psicogente, 12(22), 316-325.
25. Álaba, J. A.-O. (2011). Evaluación breve del estado cognitivo de la demencia en estadios avanzados: resultados preliminares de la validación española del Severe Mini-Mental State Examination. Revista Española de Geriatría y Gerontología, 46(3), 131-138.
26. Monroe, T. y. (2012). Uso del Examen Folstein Mini Mental State (MMSE) para explorar problemas metodológicos en la investigación del envejecimiento cognitivo. Eur J Envejecimiento, 9(3), 265-274.
27. Castro, M. y. (2014). Compendio de Instrumentos de Medición IIP-2014. Universidad de Costa Rica.
28. Folstein, M. F. (1975). Mini-Mental State: A practical method for grading the cognitive state of patients. J. Psych. Res., 12(3) 189-98.
29. Lobo, A. y. (1999). Revalidación y normalización del Mini-Examen Cognoscitivo (primera versión en castellano del Mini-Mental Status Examination) en la población general geriatrica. (112), 767-774.
30. Katzman, R. (1999). Marco conceptual sobre activos, vulnerabilidad y estructura de Oportunidades. En Activos y estructuras de oportunidades estudios sobre las raíces de la vulnerabilidad social en Uruguay, (pp. 7-36).

Comisión Económica para América Latina y el Caribe, CEPAL. Recuperado de: <https://www.cepal.org/es/publicaciones/28663-marc-o-conceptual-activos-vulnerabilidad-estructuras-oportunidades>.

31. Patrício A., Silva R., Araújo R., Silva R., Nascimento G., Rodrigues T. y Leite, M. (2019). Common mental disorders and resilience in homeless persons. *Revista Brasileira de Enfermagem*, 72(6), 1526-1533. Recuperado de: <http://dx.doi.org/10.1590/0034-7167-2018-0541>.

32. Aparicio, N. (2020). Afectaciones a la salud mental: La próxima pandemia. Destino Panamá.<https://destinopanama.com.pa/2020/07/13/afectaciones-a-la-salud-mental-la-próxima-pandemia/>.

33. Moyano, E. (2010). Salud mental en indigentes: Problemas clínicos. Centro de Salud Mental de Majadahonda. Recuperado de: [www.jano.es](http://www.jano.es).

34. Ayano, G., Assefa, D., Haile, K., Chaka, A., Solomon, H., Hagos, P., Yohannis, Z., Haile, K., Bekana, L., Agidew, M., Demise, S., Tsegaye B. y Solomon, M. (2017) Mental, neurologic, and substance use (MNS) disorders among street homeless people in Ethiopia. *PubMed Central*, 16(40), 10.1186/s12991-017-0163-1. PMID: 29176996; PMCID: PMC5693477. Recuperado de:<https://www.ncbi.nlm.nih.gov/pmc/article/s/PMC5693477/>.

35. Ramírez, R., Correa, M., Velásquez, J., Álvarez, M., Franco, J. y Celis, M. (2011). Características sociodemográficas y trastornos mentales en niños y adolescentes habitantes de la calle en un centro de atención social de Medellín, Colombia. *Medicina Universidad Pontificia Bolivariana*, Medellin, Colombia. 30(1), 21-29. Recuperado de: <https://www.redalyc.org/pdf/1590/159022489004.pdf>

36. Torres, Y., Posada, J., Bareño, J. y Berbesí, D. (2010). Trastornos por abuso y dependencia de sustancias en población colombiana: su prevalencia y comorbilidad con otros trastornos mentales seleccionados. *Revista colombiana de Psiquiatría*. 39(1). Recuperado de: [http://www.scielo.org.co/scielo.php?pid=S0034-74502010000500003&script=sci\\_arttext](http://www.scielo.org.co/scielo.php?pid=S0034-74502010000500003&script=sci_arttext).

*This page is intentionally left blank*