

Psychosocial Medicine Research Program

The Division of Psychosocial Medicine at Zuckerberg San Francisco General Hospital and Trauma Center has been involved in a variety of research projects. The majority of these projects have been designed to evaluate innovative clinical interventions in the public sector, to see if these interventions can reduce barriers to care and to see if these interventions can improve clinical outcomes in patients who have extensive and complex medical, psychiatric, substance abuse and psychosocial problems. These studies have included a randomized longitudinal treatment trial that compares the cost and clinical effectiveness of the Emergency Department Case Management program (EDCM) and usual care for persons with severe psychosocial problems who are high utilizers of medical services. The results of this randomized trial demonstrate that the EDCM model is a cost effective model for frequent users leading to clinically significant reductions in psychosocial problems. The EDCM model is now being replicated in Denver, Seattle, Washington, DC, Detroit, Camden, and Santa Clara, Alameda and Tulare Counties.

In addition, we have completed a randomized longitudinal treatment trial to evaluate the UCSF Trauma Recovery Center (TRC). The study was designed to evaluate clinical treatment outcomes of victims of violent crime who were randomized either to TRC services or the usual care. It also investigated barriers that existed in the health care system for victims of crime. The results of this randomized treatment trial demonstrated that active outreach and assistance can address disparities in access to victim services for disadvantaged populations and should be offered more widely to victims of violent crime. Based on these findings the State of California Legislature is currently sponsoring a bill to replicate the TRC model at several other sites in California.

An overarching goal of the Division of Psychosocial Medicine's research program is to not only contribute to evidence-based clinical practices, but to potentially influence public policy and to improve health care services for underserved populations in the public sector.

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