Health and Homelessness in London

Summary

60 Service Providers

100 People Experiencing Homelessness

London Ontario 2011

Health concerns faced by homeless people in London, Ontario are similar to those reported in the literature in other cities:

- Mental illness
- Addictions
- Dental concerns
- Pain
- Wounds/infection
- Chronic disease
- Acute injury

When asked to only identify their primary concern, mental health challenges outnumbered any other condition by nearly 2-1, followed by addictions and wounds.

25% of homeless participants identified mental health challenges as their primary concern.

Where Individuals Access Care

Participants access health care from a variety of including:

- Hospitals
- Primary health settings
- Social service agency-based care
- Community clinics
- Public Health
- Emergency services

More participants had accessed hospital care (37%) than a family doctor (29%). The next most common point of care was walkin clinics (20%).

Challenges Agencies Face in Providing Care

Agencies identified a number of challenges in providing care to individuals experiencing homelessness, including funding instability of programs they provided, barriers around identification, inability of patients to travel to required appointments, lack of electronic communication between agencies, and limited service hours. A common theme was that providers felt that homeless patients experienced negative attitudes and poor treatment at other agencies. This fits with the literature where relational barriers are commonly identified as the number one challenge by people with lived experience of homelessness.

Project Partners:











What Works Well in Accessing Care

Participants experiencing homelessness spoke readily to the things that they felt were being done well to meet their healthcare needs. The following are a list of helpful features of care:

- Many of the services are within walking distance of shelters and food providers
- Many of the providers have the relational skills needed to work with people experience complex challenges
- Services are often offered on a walk-in basis rather than requiring an appointment
- Healthcare providers are integrated into social service agencies where people are already gathering
- Many healthcare providers know how to overcome challenges around the lack of money to access care (for example medical supplies or prescriptions)
- Many providers have a knowledge of resources available beyond strictly healthcare needs

What Isn't Working for Homeless Patients

The list of challenges to accessing healthcare and maintaining health was four times as long as the list of what is working well, reflective of the poor health outcomes we see with this population:

- Although many staff have access to work-arounds, the basic requirements of access to care are still a challenge to many, including identification, medical records, transportation, and money
- Participants were frustrated with having to share the same intake information with every provider
- The need to meet the basic necessities of life trumps attending to medical needs. Without access to a livable income, too much time is consumed obtaining food, clothing, and shelter
- Participants had myriad examples of negative experiences with healthcare providers, feeling that these both prevented meeting an immediate need and limited to likelihood of seeking assistance in the future
- Addictions was a common concern to participants, with a recognition that experiencing an addiction
 precipitated limitations on access to care such as being banned from a facility or being unable to maintain
 sobriety long enough to access needed support
- Lack of access to a consistent, readily-available family physician was a common concern, with participants not wanting to use hospital emergency services or walk-in clinics, but having no other option available
- Relying on access to social services in general was perceived as being bad for one's health, and many bemoaned the lack of affordable housing and a living wage to move off of these services

Key Challenges

Healthcare that goes to where people are and that is available at hours that they are around.

Communication and information sharing between and among healthcare providers and social services.

Respectful, relationship-centred care by healthcare providers who have some understanding of the complex challenges faced by people when they are homeless.