Bringing health care to the homeless

If the mountain won't come to Mohammed, then Mohammed will go to the mountain.

That's the underlying philosophy of a new program that brings general and mental health care to 5 Toronto hostels for the homeless and a detox centre. The Shared Care – Hostel Outreach Program is an initiative of the Centre for Addiction and Mental Health, the Queen Street Mental Health Centre and the Toronto Hospital.

Dr. Clive Chamberlain, vice-president of mental health programs at the Queen Street centre, says the program is vital because of the growing number of homeless people using hostels. Many of them have serious mental health and addiction problems, and are in poor physical health.

Most hostel workers do not have the skills to cope with these problems. At the same time, most hostel users don't have up-to-date health cards and can't apply for one without an address. As a result of this catch-22, they are shut out of mainstream health services. But even if they had access to the system, many homeless people are reluctant users because of previous experiences.

Chamberlain says these obstacles can be overcome by providing a user-friendly system within the hostels and at the detox centre. Each of the 6 sites has a nurse, an outreach worker, a part-time family physician and a consulting psychiatrist. Physicians are paid a salary, getting around the need for clients to have a health card to receive services.

The outreach worker strikes up a conversation with clients, identifying those who want or are obviously in need of health care. The nurse attends to immediate problems and is the link between client and family physician. The family physician consults with the psychiatrist on diagnoses and the prescribing of appropriate psychoactive

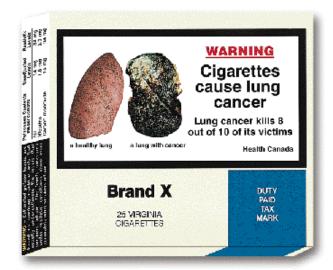
medications, or arranges an appointment with a psychiatrist.

"Having a visiting psychiatrist is highly desirable," says Dr. Robert Frankford, the family physician at the Seaton House men's residence. "It makes me feel better about how I practise, that I'm not working in total isolation. It's nice to be able to consult, get advice on prescribing practices, get help with psychosocial problems."

For many patients, says Chamberlain, receiving health care can be the first step toward getting back on their feet. Once stabilized on appropriate drugs for physical or mental health problems, good case management can lead to suitable housing and steer those who are willing into alcohol, drug or risk-reduction programs, and eventually provide help with finding employment. "These people especially require tailor-made solutions," says Chamberlain. "Off-the-rack solutions just won't work."

People who stereotype the homeless as people with inherent character weaknesses shouldn't be too smug, he added. "This program is important because any one of us is just a fine line [away] from the same fate through a piece of bad luck — losing a job or family and social supports, or bad health. We've seen doctors, lawyers, priests and nurses end up on the street for a variety of reasons. This can happen to anyone." — © Olya Lechky Toronto

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Six shockingly frank cigarette packages, including this one, were unveiled recently by the national Tobacco OR Kids campaign. It was launched by a coalition of more than 150 health organizations, including the CMA, that want the federal government to require the tobacco industry to adopt the packages. Results of a focus-group study released by Health Canada reveal that smokers want a "gloves-off" approach with respect to tobacco risks. The 6 packages feature photos of clogged arteries and mouth cancer, and information about addiction, child health and causes of death in Canada.