

Foreword

John Lozier



This important manual responds to disturbing realities. Each year millions of our neighbors lose their homes, and many seek refuge in crowded emergency shelters or on the streets. There they are exposed to deadly communicable diseases such as tuberculosis, hepatitis and influenza, and to other grave health threats such as infestations or frostbite. Their personal health deteriorates, and the threat of epidemic spread of communicable disease always lurks.

The health care system is ill-equipped to deal with the challenge of homelessness. The vast majority of homeless people – like 46 million other Americans – do not have health insurance, hampering their use of ‘mainstream’ health care providers. Primary care clinics for indigent people generally operate beyond their capacity, are not well-located to serve people staying in shelters, and are not prepared to deal with the complex conditions often presented by homeless people. The public health system, which made great strides in the 20th century by eliminating unhealthy living conditions, seems ill-equipped to contend with the teeming shelters that are a throwback to the 19th century.

Since 1985, intrepid health care workers have been developing interventions intended to improve the health of homeless people. Beginning with a 19 city demonstration effort funded by private foundations, and continuing now with federal funding to 161 grantees throughout the country, the Health Care for the Homeless (HCH) Program has worked diligently to assure that homeless people have access to primary care, substance abuse treatment, mental health and dental services, case management and supportive services. These local projects, which now reach about 550,000 homeless people per year, emphasize outreach and have established an important presence in numerous emergency shelters.

The original version of this manual was produced by the Boston Health Care for the Homeless Program in response to needs its workers observed in shelters. Because the danger of contagion is so great in shelter settings, it is crucial that shelter staff and guests be able to recognize communicable diseases, know when to seek medical assistance, and understand disease transmission and infection control. This edition has been expanded to help clinicians, shelter providers and homeless people cope with a somewhat broader range of health problems frequently associated with homelessness, including non-communicable medical conditions such as frostbite and hypothermia. It also contains a new exposition of the successful approaches to management of chronic diseases developed through the Health Disparities Collaboratives in which numerous HCH projects are participating.

By preparing this manual and making it available nationally, our visionary colleagues in Boston continue their long tradition of protecting displaced individuals and the public from potentially lethal health problems that can flourish in congregate living settings. With them, we hope and work for a day when the miseries of mass homelessness will be unknown and the right to health care will be realized for everyone.

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The National Health Care for the Homeless Council is a membership organization consisting of HCH projects, the HCH Clinicians’ Network, and the National Consumer Advisory Board. Additional resources are available at www.nhchc.org.



Foreword

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The health care of homeless persons requires an integration of medicine and public health. One person living in a shelter or on the streets who contracts influenza or tuberculosis requires expert medical care. Just as important is a well coordinated public health plan to prevent and control further illness and suffering among this very vulnerable and impoverished population.

The Commonwealth of Massachusetts established the country's first state board of health in 1869, and our state has long been an innovative leader in addressing the major public health epidemics of the past century, including measles, polio, rheumatic fever, syphilis, and tuberculosis. Our Department of Public Health understands the need for working closely with academic teaching hospitals, universities and medical schools, community health centers, and the myriad non-profit organizations that are dedicated to the direct care of our poorest neighbors.

In the bitterly cold winter of 1998-1999, more than a dozen homeless persons died tragically on the streets of Boston and Cambridge. We viewed this tragedy as a public health crisis and convened a monthly working group comprised of officials from city and state agencies, shelters and human service providers, the police and emergency medical services, street outreach workers, medical and mental health teams, substance abuse experts, advocates and homeless persons, and many others. This remarkable group worked collaboratively to identify those at greatest risk for death on the streets and to design appropriate services. In the four years since that time, we have seen a marked decline in the number of deaths due to hypothermia on the streets of Boston. This is a testament to the commitment of literally hundreds of dedicated persons working together to overcome the immense obstacles to health faced by those who are struggling to survive on our streets and in our shelters.

This second edition of the Manual continues to underscore the critical importance of providing health care to those living in crowded shelters and offers very practical approaches to controlling and treating the major communicable and other diseases that are seen all too commonly among homeless individuals and families. I am proud to share in this innovative endeavor.

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