Dr. Jim O'Connell has been providing medical attention to homeless people around Boston for the last 30 years. Dr. O'Connell was on Boston Public Radio Tuesday to discuss his new book, “Stories From the Shadows: Reflections of a Street Doctor,”

*Questions are paraphrased, and responses are edited where noted [...].*

**What exactly do you do?**

The city of Boston got a grant to deliver healthcare to homeless people back in 1985,
and I was recruited, conscripted is a better way to put it, to be the full time doctor for the program, which I planned to do just for a year or so and I've been doing it now for about 30 years. It is a wonderful city wide program with lots of doctors, nurse practitioners, physician's assistants, and social workers, and we do the clinics at most of the main shelters in town. We have clinics at Mass. General and Boston Medical Center, which are two real bases and a 104 bed respite program which is a step down hospital for homeless people who have nowhere to go after they have been really sick.

**When you began working with the homeless for the first time at Pine Street Inn, Barbara McInnis, the head nurse at Pine Street Inn, made you wash feet, why?**

She gave me a two month apprenticeship soaking feet. It was a remarkable time. It's where she taught me how to slow down. I was coming out of a fast paced world and you're never going to get anywhere with folks who have been scarred by life on the streets if you go fast. You have to take time to engage them. Soaking feet is biblical in its symbolism, but it reverses a power structure.

**Are homeless people readily seeking medical attention or do they tend to ignore their ailments?**

The rule we had to live by from the beginning was, if you have to wait for folks to come to you, especially if they are out trying to struggle to survive on the streets or in shelters, then by the time they come to you they are too sick. So, the goal was to get the doctors and nurses and everybody out to wherever they are. I think that in the long run it saves huge amounts of effort on the parts of emergency rooms and hospitals.

**Have we reached a point where we are tired now of hearing about helping the homeless? Is it ever really going to get better?**

There was an editorial in the “New York Times,” in the mid 90's, which talked about compassion fatigue about homelessness. I buy that we do get compassion fatigue, I think we try to work hard to resist that. Homelessness is a very complicated and seemingly intractable problem in many of our inner cities, particularly in big inner cities, and the solutions I think are complicated. Things we could do, like getting housing which is clearly a key issue for folks, but in addition to housing it's the services. If you look at homelessness, it is really a manifestation of abject poverty and if you're really gonna get rid of it we are gonna some day have to look at how you address the income disparity, how do you address poverty, and I don't think there is much relish or ability to do that now.

**How should we react when a homeless person asks us for money on the street?**

I dread that question. I have an answer that I have worked on. Barbara McInnis used to say, focus on one person. It is easier to say no to everyone as long as you say no not today. Look someone in the eye, find one person you can work on, give consistently to and strike up a relationship with. Her giving would be giving a cup of coffee or a Dunkin Donuts card. Getting to know people that way has its own reward, but it's a bit overwhelming when people come up to my car and ask for money. I have had to learn to say no not today, and learn to live with that and not feel guilty.”

Listen to all of Dr. Jim O'Connell's interview above.

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