

Access to Palliative Care for Toronto's Homeless

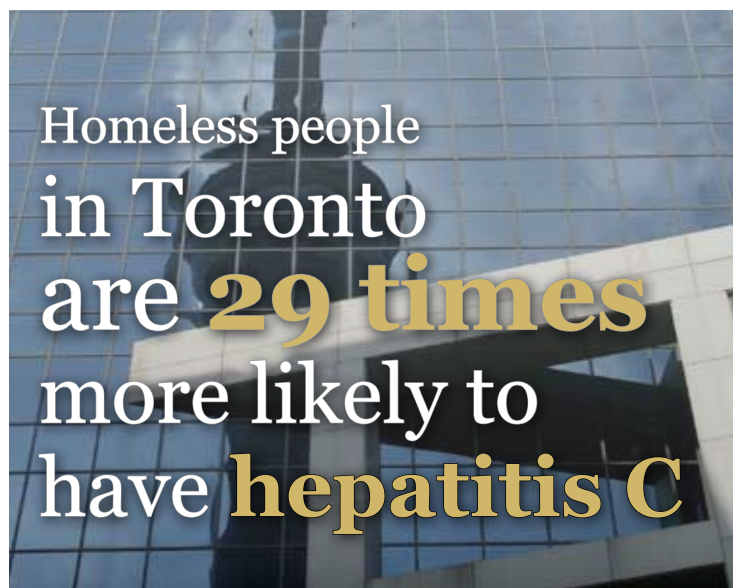
What you need to know

People who are experiencing homelessness in Toronto face a higher rate of chronic illness and death. They do not have enough palliative care services. Individuals require services programs in a variety of settings to support their end-of-life choices.

What is this research about?

Those who are homeless in Toronto have significantly higher than average death rates. They are 29 times more likely to have hepatitis C. They are also more likely to have heart disease, cancer and diabetes.

Those experiencing homelessness have less access to healthcare. Over 50% reported not having a family doctor. The realities of increased illness, lack of treatment and lack of access also affects their ability to access end of life services.



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KEYWORDS

Homelessness, end-of-life care, service access, shelters, chronic illness, Hepatitis, Toronto.

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ARTICLE SOURCE

Krakowsky, Y., Gofine, M., Brown, P., Danziger, J., & Knowles, H. (2013). Increasing Access—A Qualitative Study of Homelessness and Palliative Care in a Major Urban Center. *American Journal of Hospice and Palliative Medicine*, 30(3), 268-270.

What did the researchers do?

The researchers wanted to understand how to improve and increase access to end of life services for those experiencing homelessness. The study was set in Toronto.

The researcher interviewed 3 nurses and 4 outreach workers with between 3-9 years of experience. Each of the interviews lasted around 1 hour. The researchers highlighted key themes that had come out of all of the interviews.

ABOUT THE RESEARCHERS

Dr. Yonah Krakowsky is a Urology Resident at the University of Toronto.

Miriam Gofine is a researcher affiliated with Yeshiva University, New York, NY.

Pnina Brown is a researcher at McMaster University, Hamilton, ON.

Jana Danziger is an Occupational Therapist and Co-Founder of A Different Life in Toronto, Ontario.

Dr. Holly Knowles is a Lecturer with the Department of Family and Community Medicine, University of Toronto and is also affiliated with St. Michael's Hospital.

What did the researchers find?

Several themes and barriers emerged from the study. The participants felt that past bad experiences with healthcare prevented people from accessing services. Two examples of bad experiences are violations of trust and lack of harm reduction.

Staff who service homeless people are often not trained in end of life care.

They are unable to speak about death or understand the needs of someone who is dying. Those who are homeless express different wishes regarding end-of-life care.

Generally there are three different spaces that people request care: in a hospital, shelter, or on the streets. People make this decision differently.

HOW CAN YOU USE THIS RESEARCH?

There needs to be more programs that address the higher death rates. Housing first programs have been shown to reduce reliance on the healthcare system. They have also increased quality of life. If someone is dying, it is important that they be treated with dignity.

Service providers must be aware of the needs of those who are experiencing homelessness. Palliative care should be provided in a sensitive and flexible way. They also must work to increase trust by helping to fulfill clients' needs.

Health care workers should be trained in palliative care for this population. If they do not have the capacity, they should be aware of services that can provide this service. There should be an understanding that palliative care can be delivered in different ways. People have different priorities and needs. Spaces and funding should be made available for palliative care for those that are homeless. This should accommodate their choice of where and how to receive service. This decision depends on their wishes.

The Canadian Homeless Research Network (CHRN) has partnered with the **Knowledge Mobilization (KMB)** Unit at York University to produce Research Summaries on the topic of Youth Homelessness in Canada. CHRN focuses on education, networking and knowledge mobilization in order to move towards effective long-term solutions to homelessness.