The National Consumer Advisory Board (NCAB), a component of the National Health Care for the Homeless (HCH) Council, consists of homeless or formerly homeless persons who participate in governance and advocacy for HCH projects throughout the country. To gain insight into the concerns and needs of HCH clients, NCAB uses a method called “Consumer Participation Outreach” to engage people experiencing homelessness in dialogue about issues important to them. Using a survey tool created by NCAB, local Consumer Advisory Boards distribute questionnaires to individuals who have endured homelessness in their communities. NCAB uses the gathered information to develop its own advocacy agenda and advises the National HCH Council about the needs and opinions of homeless consumers.

Long engrained in the National Council’s mission is the belief that health care and housing are human rights. This principle guided the development of the fourth Consumer Participation Outreach project, initiated in June 2007. Questions were designed to evaluate consumer opinion and experience on access to health care, the relationship between health and homelessness, and solutions for ending homelessness. This report briefly summarizes the responses from that survey.

788 homeless persons from 19 cities participated in the survey.

ACCESS TO HEALTH CARE

23% of surveyed homeless participants report having been denied access to health care. The top three reasons for such denial were: 1. lack of health insurance, 2. no money to cover the cost of care, and 3. insufficient health insurance coverage. Of the participants who were refused access to health care, 80 individuals were denied care from a hospital, 43 from a private doctor and 21 from Health Care for the Homeless projects.

Other reasons included:
- No form of identification
- No address for billing
- Insurance plan did not cover drug rehabilitation treatment
- Not in health care plan network
- Not scheduling an appointment

One individual responded “I have never been refused treatment but at times the treatment I got was less then adequate, where I had to go to another hospital for treatment.”

Another participant reported “I was still drinking at the time and the insurance company considered a single beer as being an alcoholic.”
HEALTH AND HOMELESSNESS

“Being homeless has totally messed up my life. Sometimes I want to hurt myself or jump in front of a car. I have a lot of back pain and arthritis from the top of my neck all the way to my tailbone. Sometimes the pain is so unbearable that I have thoughts of hurting myself. I can’t do what I want to do anyway. Homelessness has a toll on my health. I’m depressed. I have anxiety. I really don’t want to do much.”

-Homeless participant (San Antonio, TX)

The experience of homelessness exacerbates health problems and causes illness. According to the Outreach results, 48% of surveyed participants felt that homelessness caused their sickness. Forty-five percent of the participants felt that homelessness worsened their overall health. Participants cited poor nutrition, bad hygiene, stress, depression, exposure to violence, and weather conditions, such as rain and extreme hot and cold temperatures, as reasons for exacerbated health problems.

- A participant from New York City expressed that “I had to sit in the shelter 24 hours a day. I’m diabetic and not able to get food to eat a proper diet.”

- One individual reported that there was “no way to clean or keep clean an infected finger.”

Improper hospital discharge of homeless patients is a noted problem nationwide. Two hundred and eighty participants reported being discharged to the streets after seeking medical attention from a hospital and 143 felt they were discharged prematurely.

SOLUTIONS FOR ENDING HOMELESSNESS

Approximately a quarter of surveyed participants (26%) felt that the most important health solution to ending homelessness was to provide people experiencing homelessness with housing. Twenty-four percent felt that access to health care was the most important solution to homelessness, with many respondents accentuating that health care should be available to everyone. Fifteen percent of respondents listed employment with a steady income as a leading solution to homelessness.

<table>
<thead>
<tr>
<th>Most Important Health Solution</th>
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<tr>
<td>• “Locate them a home. Everyone deserves a place to live, especially those with health problems.”</td>
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<td>• “A system of health care that takes priority on the fact of helping someone without the benefit of payment.”</td>
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<td>• “Give more care – as opposed to shelters, give them temporary housing.”</td>
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<td>• “Doctors who are willing to work with homeless people.”</td>
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<td>• “Universal health care!”</td>
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