# Women's Homelessness 2023 REPORT

# Hamilton Healthcare Provider Outreach Team Asset Mapping





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## Hamilton Healthcare Provider Outreach Team Asset Mapping

Prepared for

Greater Hamilton Health Network

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### **Executive Summary**

People experiencing homelessness may have different healthcare needs as well as barriers that prevent them from accessing healthcare in traditional ways (e.g. transportation). Further, impacts of health and homelessness can be greater for women, trans, and gender diverse people (Hwang et al., 2010). In the City of Hamilton, there are many organizations which provide outreach healthcare services to homeless populations to try and reduce these gaps. The purpose of this report is to create an asset map of healthcare outreach services which provide care to women, trans, and gender diverse people to better understand the current strengths, gaps, and opportunities for improvement when it comes to providing healthcare to this vulnerable population.

We identified organizations providing healthcare outreach services primarily through previous partners of the Greater Hamilton Health Network, and internet searches of the Hamilton Public Health website and the Hamilton Public Library Redbook; two other organizations were identified by cross referencing with an alternate asset map created by the Social Navigator Program team in Hamilton. Organizations were contacted for an interview, and information from these interviews was used, or information found online was used for those who did not respond.

11 programs across eight organizations were included in the asset map. We found that there was a variety of services offered with little duplication. A few gaps are noted by the research team, such as few services being offered on weekends, and some missing services, including reproductive health services like contraception, and foot care. We also found a high degree of collaboration between teams which emphasizes the current strength of existing services and the need to know what programs are available to ensure collaboration and the practice of referring to more appropriate services continues to be effective.

Overall, Hamilton has many services aimed at homeless populations to meet their healthcare needs, but current gaps may be considered when developing future outreach programs, or when designing outreach events.

#### Definitions

**Homelessness** – there is no universally agreed upon definition of homelessness, but we will use the definition provided by the Canadian Observatory on Homelessness, which states "Homelessness describes the situation of an individual, family or community without stable, safe, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it" (Gaetz et al., 2012). This definition is

inclusive of those who live unsheltered, in emergency shelters, and provisionally accommodated, or are at risk of homelessness.

Women - an inclusive term that refers to anyone who identifies as a woman.

**Trans-** a term used to describe a person whose gender identity does not correspond with the sex registered for them at birth (Gender Spectrum, 2019).

**Gender diverse** – a term used to describe people who experience gender outside of a binary system. This may include people who identify as gender-nonconforming, non-binary, genderqueer, and many other identities (Gender Spectrum, 2019).

### Introduction

Overview and Scope

The Greater Hamilton Health Network (GHHN) is an Ontario Health Team that collaborates with local health and social service organizations to provide health-related services to members of the Greater Hamilton community. GHHN has several priority populations, which includes vulnerable groups such as homeless people and more specifically women and gender diverse people experiencing homelessness. One initiative led by GHHN is Women's Health Days (WHDs) which bring providers together several times a year to provide services to this population.

The homeless population has some unique health needs, but also may use healthcare services differently. Outreach services may provide the opportunity to address these health needs while meeting people where they are and reducing barriers such as transportation. The GHHN has asked the McMaster Research Shop to create an asset map of available healthcare outreach providers in the Hamilton area. Asset mapping allows one to keep track of key services available within a given community (Mahoney et al., 2021). Creating this asset map will help the GHHN better understand what healthcare outreach providers are available in the Hamilton area, while also highlighting the needs of the Hamilton community and what services are missing. It may also show opportunities for collaboration and coordination between existing services.

#### **Research Objectives**

The objective of this report is to create an asset map of healthcare outreach teams in Hamilton serving homeless women and gender diverse people, to understand what each team does (i.e., the services they offer), as well as where, when, and how often they conduct outreach. Based on this asset map, we make recommendations for efficiency and communication of strategies amongst outreach teams.

To address this objective, the two research questions and sub questions are:

- 1. What healthcare outreach teams are offering services in Hamilton? For each team:
  - What services are they providing?
  - What populations are they providing services to?
  - Where are they providing services?
  - How are services being provided (i.e.. Volunteers vs staff, what times, what resources do they use, etc.)?
- 2. Are there overlaps or gaps in the services being offered? If so, what are they?

#### **Report Organization**

This report outlines the inclusion criteria for this asset map, methods used to identify the services included, and limitations to the work. We then present a summary of healthcare outreach services and discuss major themes. Finally, we make recommendations based on the identified strengths, gaps, and opportunities.

### Methodology and Limitations

#### Methodology

In order to create this asset map, the research team identified and interviewed relevant healthcare outreach providers in the Hamilton area, using information from these interviews to a table summarizing information about the services.

Our goal was to identify all existing healthcare outreach services in Hamilton that deliver services to homeless or underhoused adult women and gender diverse individuals. Outreach was defined as services where organizations went out into the community to deliver services, and includes programs which operate on foot or by vehicle (e.g. bus, van), shelter outreach programs (where an organization brings their services to specific shelters), and programs where a support worker is meeting a specific client in their community. For the purposes of this report, outreach does not include services such as drop-ins or clinics based out of an organization's space. We included programs which

applied more broadly, for instance healthcare outreach aimed at all unhoused people and not only women.

#### Identifying Potentially Relevant Healthcare Providers

In the initial stages of identifying potential providers for this asset map, our team used the list of providers who attended the Women's Health Day event in July 2022 1, the Hamilton Public Health website2, the Hamilton Public Library (HPL) Red Book3, and individual provider outreach websites.

The previous GHHN report1 identified 23 services offered at the Summer 2022 Women's Health Days events. This list of services was cross-referenced with the City of Hamilton Public Health website2, which lists 18 categories of public health services offered by the City of Hamilton. We combined these lists and grouped services and service categories to develop a comprehensive list of potential service categories to guide our search for services to include in this report (see Appendix A).

We used this list of healthcare service categories to guide and organize research on healthcare outreach providers in Hamilton. We used the Hamilton Public Library (HPL) Red Book, a list of social service and community resources in Hamilton,3 was to identify potentially relevant healthcare outreach programs. The 'Area Served' category was restricted to Hamilton and surrounding areas. We searched each of the nine categories within the HPL Red Book using identical criteria, and then we further investigated each service identified was then further through online searches to understand the services they provide, and the population served. In total, 66 potentially relevant healthcare outreach teams, organizations and/or services were identified by the research team. We reviewed each service was to ensure it met the criteria of providing outreach services, serving primarily unhoused populations, and serving women or gender diverse individuals. After this review, as well as further consultation with the team's community partner, we narrowed down the list of services contacted for interviews to 13 programs from seven different organizations.

#### Interviews

We contacted each of these healthcare outreach providers via email and invited them to take part in a 15-30 minute Zoom interview to learn more about their outreach services. Organizations who did not respond were contacted by our team up to three times. Three organizations, representing six programs, did not respond, so we used information available online for these groups.

We interviewed providers from seven different programs using a standardized interview template (see Appendix B). Interviews took place on Zoom, and were recorded, and transcribed using Otter.ai and Zoom Cloud transcription software. We took relevant information from each interview for the asset map and organized it in a standardized way to allow us to compare between programs.

During the Interviews, we asked providers about services they collaborate with and asked for suggestions of other services to contact for this project. Through this process we identified additional programs which we searched online for more information about to identify whether they fit our criteria.

Additionally, in February 2023, we were made aware of an asset map developed by the Social Navigator Program in Hamilton. This visual map includes many community resources such as shelters, food banks, and drop ins to name a few (Hamilton Community Resources, 2023). Our list of services was compared against the list of Outreach Supports identified for this asset map. Through these two sources, three new services were identified. Information available online was used for these groups.

A full list of programs and information sources for each program is summarized in Appendix C.

#### Limitations

One limitation of this type of work is the frequent change in services offered within the city. As mentioned by some interview participants, funding and grants may affect which services are offered and to what extent (e.g. number of staff hired). Due to this known limitation, readers should be aware that this information reflects information collected between November 2022 and March 2023, and information may need to be updated for future use.

In addition, several of the providers expressed that they provide a wide range of services based on an individual's needs. Although our goal was to only include healthcare related service, some services were multidisciplinary and offer services beyond this scope; for example, one organization provides lunches and harm reduction supplies as part of the same outreach program.

Further, for the services that were not able to be interviewed, we had to rely on publicly available information found online. This information may be more likely to be out of date or incomplete. For instance, the number of staff was not often available online.

### Findings

In total, 13 outreach programs across nine organizations were included in the final asset map (see Table 1). Hamilton Urban Core was originally identified and contacted for an interview but did not respond. During the following internet search, we did not find information specifying that any of their programs were targeted towards unhoused folks, so information on these programs was removed.

The Social Navigator Program asset map identified that Interval House has a mobile Violence Against Women Worker. No information was available online about this service, and was therefore left out. The map also identified Mission Services as providing Harm Reduction Outreach program, but on their website, a post from September 2022 indicated that they are only working based on referrals (including self-referrals), and therefore was removed as this did not meet our criteria for "outreach" ("Updates to Addiction Services," 2022).

Organizatio n	Program Name	Services Offered	Populatio n Served	Priority Populations	Times	Service Modality	Service Area	Staff	Approximat e Reach
Hamilton Public Health Services	Mobile Van	Harm reduction (supply distribution, naloxone distribution, education) STBBI Testing General First Aid (i.e. wound care) *flu		Unhoused women Substance use Women involved in sex work Youth M sex with M Recently/pas t incarcerated	Wednesday s (during the day) Thursdays (11am - 3pm) Monday to Sunday (7- 11pm)	Mobile Van	All of Hamilton, mainly downtown	Public Health Nurse & Mental Health Outreach Staff Two Public Health Nurses Two AIDS Network Staff, plus Volunteers	
	duri	vaccination during flu season			Twice a week (9am- 1pm)	Communit y Clinic	Wesley Centre		
				Fridays (1- 4pm)	Communit y Clinic	AIDS Network			
				Third Thursday of the month (runs for 3 hours)	Communit y Clinic	Notre Dame Shelter			
	City of Mental Hamilton Street addiction Outreach Connection Program Connection with inpatient and outpatient mental health and addiction support Other supports (e.g. Clothing, hygiene,	Youth (aged 16-23)		Monday to Friday (8:30am- 5pm), other times as needed	On foot	All of Hamilton, mainly downtown	Two outreach workers (seconded from other community organization s)	2-7 referrals per week	
		mental health and addiction support Other supports (e.g. Clothing,		Shelter drop ins	All of Hamilton, not focused on encampments	Public health nursing team sometimes joins for acute mental health needs	15 active clients on caseload at a time		

#### Table 1: Healthcare outreach services in Hamilton, ON.

		housing assistance, service navigation, etc.)							
Hamilton Public Health Services (continued)	Dental Health Bus	Dental Emergencies	Hamilton residents with no formal dental insurance		Mondays (8:30am- 4:30pm) Tuesdays (8:30am- 4:30pm) Wednesday s (8:30am- 4:30pm) Thursdays (8:30am- 4:30pm) Fridays (8:30am- 4:30pm)	Dental Bus	Central Memorial Recreation Centre Dominic Agostino Riverdale Community Centre Neighbour2Neighbo ur East Kiwanis Boys and Girls Club Norman Pinky Lewis Recreation Centre	Two dentists, plus support staff	approximatel y 150 clients per month
Good Shepherd	HOMES (Housing with On-site, Mobile and Engagement Services)	Housing support	Folks who are homeless or at risk of being homeless that have a mental health issue that is serious and persistent	Women involved in sex work LGBTQ+ population (in particular trans community) Indigenous community	Available 24 hours a day	Meet people where they are at	All of Hamilton	Dedicated staff, and director	10 people per year Total tenant load of 900 people
Canadian Mental Health Association	Peer Support & Street Team	Mental health and addictions supports Nursing care	People who use substance s, age 16 and up		Thursday morning Thursday	Shelter outreach Shelter	Carole Anne's Place (YWCA) Willows Place	Registered Nurse Peer Support Worker Peer	20-30 people per week
		Provide lunches and harm			afternoon Tuesday and Fridays	outreach On foot	All of Hamilton, specifically target encampments	Support Workers Peer Support Workers	100 lunches/wee k

		reduction supplies							
		Primary Care Services	People on probation or parole					One registered nurse	
St. Joseph's Healthcare Hamilton and Hamilton Health Sciences	Hospital2Hom e	Health care management (e.g. getting a health card, scheduling specific medical appointment s, connect to community services)	Difficult to serve adult patients with health issues (e.g. mental health issues, chronic health issues, personality disorders)		Working hours (8am- 4pm)	Meet people where they are at	All of Hamilton, mostly downtown	Two front line workers Manager	case load of 15-30 clients
		Drop in DBT Group			Once a week	Residentia I Care facility		Two front- line staff co- facilitate	
						Online, Zoom			
Hamilton Police Services (Crisis Response Team)	Social Navigator Program/ Rapid Intervention and Support Team (RIST)	Refer and support people to existing services Wound care Drug dispensing Provide harm reduction supplies	frequent amb high Emerge	f emergency se bulatory transpo ency Room use, ctions). usually	rtation use, frequent	Paramedic trucks Unmarked police vans	All of Hamilton	Paramedics Police Officers Civilian positions (specific to RIST; 2 housing navigators, addiction navigation, mental health navigator, women's	approximatel y 130-170 unique contacts per month

								navigator, youth navigator, court liaison worker)	
Shelter Health Network	Shelter Health Network	Variety of healthcare services	re who have no family doctor,		Specific times available	Shelter Outreach	All of Hamilton, specific shelters available online	Family doctors	
					online			Nurse practitioner	
								Registered nurses	
								Midwives	
								Internists	
								Psychiatrists	
Aboriginal Health Centre	Indigenous Patient Navigation	Service Navigation for culturally relevant healthcare options, including traditional healing	First Nations, Metis and Inuit individuals and families						
	Aboriginal Mental Health & Addiction Services	Case Management Service Navigation	Urban indige population, a						
Grenfell Ministries	National Overdose Prevention Line	Harm Reduction (telephone- service to support persons while using to prevent overdose)	Users of illicit substance s	People who use alone People from diverse communities People with marginalized identities	24 hours a day, 7 days a week	Telephone	All of Canada	17 staff (2 full time, 13 part time, 2 relief staff) Volunteers	approximatel y 150-200 calls per month 172 unique callers in 2021

### Discussion

Of the programs identified, there were many differences that allow each program to function and support their target demographic. A variety of service modalities were used, including vehicles, on foot, community/shelters clinics and drop in, telephone calls, and meeting specific clients where they are at (whether that be a shelter or predetermined location).

For the services going out on foot or by vehicle. Often there were not specific locations visited. Most interviewees stated that their mandate was to serve people in Hamilton, so that was their boundaries, but that otherwise they go where there is need. Some services, such as the mobile van and Hospitals2Home team indicated that primarily they worked downtown. Only one service (Peer Support and Street Team) talked about focusing on encampments but did not disclose the location of these encampments in order to protect those living in these groups. One area for consideration would be evaluate the need to target encampments or other congregate settings other than shelters, particularly with a wider set of services.

In terms of the times services are provided, in general, services were more likely to be provided during the week than on the weekend. This may be a gap that could be filled by organizations coordinating and changing when services are provided.

In terms of types of services offered, addiction and harm reduction services were the most common. This is likely for a few reasons: (1) this is a preestablished need amongst unhoused and underhoused communities, (2) overdose and addiction have been a growing issue and gained concern from community members and politicians, and (3) there may be specific funding available for these services. Despite multiple programs offering these services, each service fills a different niche and there is not significant overlap between programs in terms of times and locations. For instance, both the Hamilton Public Health Mobile Van and the Canadian Mental Health Association Peer Support and Street team provide harm reduction supplies delivered by support workers and nurses, however the Mobile Van pairs this with STBBI (Sexually Transmitted and Blood-borne Infections) testing (which may be particularly important depending on drug use methods), whereas the Peer Support and Street Team also provide lunches during their outreach. Each of these programs also runs at different times, with the Mobile Van providing services on Mondays, Wednesdays, and Thursdays and the Peet Support and Street team providing services on Tuesdays and Fridays.

Another common service offered is service navigation. Hamilton is a city with many different organizations and programs, so helping people find the services they need is an important support to offer. One challenge with service navigation is that it relies on agencies knowing all available supports within the city. Due to the volume of supports, and aforementioned turnover in which supports are offered, exercises such as asset mapping can be an important way to ensure services are aware of the other supports clients can access.

An area of services that our team was unable to find any current outreach programs for were women's health specific services (e.g. pap smears). Another category that was unrepresented was foot care. Services such as reproductive health services were only offered by one group (Mobile Van) offering Sexually Transmitted and Blood-Born Infections testing. However other services such as contraception were not offered by any included services. Further, family care and parenting services were also not offered by any of these outreach programs. This report focused solely on outreach services, whereas healthcare services falling under these categories may be currently offered at clinics or drop-ins, and may be more appropriate in these settings. However, this gap also highlights the importance of the current work GHHN is doing with their Women's Health Day events which bring many different healthcare services together to communities that need them. These types of events may act as a bridge to fill the gap between recurring outreach programs and clinics.

There were some interesting common themes that were mentioned during the interviews with these outreach teams. Many of the services highlighted their interconnectedness, often mentioning other services, both outreach and not, with which they collaborate or refer clients to. It appears that many collaborations exist that improve the ability to target populations; this strong network is an asset for each of the programs and for the city as a whole. Additionally, some services discussed best practices of referring clients or helping them transition to different services within the city that would potentially be more appropriate based on the groups they belong to; for instance, some services mentioned directing youth to specific youth services, or indigenous clients to indigenous focused or indigenous run organizations. This again highlights the importance and benefit of well connected and well-informed services.

A few challenges were also mentioned during interviews that may be important to consider when looking for gaps within current services and opportunities for more outreach. Capacity was mentioned in a few interviews, with services discussing strains on capacity and not fully being able to meet demands. Additionally, several interviewees discussed the obvious barrier that lack of housing creates for their clients and the people they serve. There is well-established tie between health and homelessness, so

although these outreach services are needed, over time there may be limitations to the impact based on the ability of the individual to become housed.

### Recommendations

Based on the information presented in Table 1 and additional insights from the interviews with outreach programs, we make the following recommendations:

- Look to expand current healthcare outreach services by providing:
  - More services on weekends
  - Services not currently offered through outreach programs such as foot care, women's health care, and reproductive health services
- Continue to understand healthcare assets in Hamilton by
  - Looking more into services that were not included in this work, such as Hamilton Urban Core, Mission Services, and Interval House
  - Setting up a structure to frequently map community assets to ensure community members are aware of programs being offered, due to the frequent turnover of services

Continue to foster the collaboration and connection between services to ensure people are receiving the most appropriate services and are fully able to access supports available to them

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### Appendices

#### Appendix A

List of service categories identified and used to guide search for healthcare outreach services in Hamilton. This is a combined list of healthcare services identified by the City of Hamilton Public Health and previous GHHN WHD reports.

- Acute Care
- Dental Care
- Employment Supports
- Food Supports
- Foot Care
- General Women's Health Organizations
- Housing Supports
- Mental Health & Addictions
- Multiple Areas of Care
- Palliative Care
- Parenting & Family Care
- Sexual & Reproductive Health
- Social Supports
- Translation Housing, Wellness
- Vaccinations

#### Appendix B

#### Interview questions for outreach service providers.

- 1. What healthcare outreach services do you/your organization provide?
  - a. Looking specifically for services aimed at 18+ women and gender nonconforming folks who are experiencing homelessness.
- 2. What populations do you aim to serve with your outreach services?
  - a. Have you been able to reach the groups you aim to serve? (Clarify if there is a distinction between who they aim to serve and who they are actually able to reach)
    - i. (If no): What groups are you missing, and why? (For example, consider gender, sexuality, race, age, and vulnerable populations (e.g. unhoused, sex workers, incarcerated folks, etc.))
- 3. How are your outreach services delivered? (e.g., mobile vans, on-foot, in shelters/centers)
- 4. How often do you provide services (e.g. weekly, monthly)? What days and times?
- 5. Who delivers your outreach services (e.g., volunteers, dedicated staff)?
- 6. Where do you provide outreach services?
  - a. What neighborhoods do you serve? (Or what postal codes do you serve?)
  - b. What are the boundaries of your service area?
- 7. Approximately how large is your reach (I.e., how many individuals do you serve per week/per month)?
- 8. Do you work with any other organizations to deliver your outreach services?
  - a. If yes, please list the organizations you work with.
- 9. Is there anything else we should know about your outreach services?
- 10. Is there anyone else or any other organization you would recommend we include in our project?
  - a. If yes, please list the organization/individual you would recommend.

### Appendix C

#### List of healthcare outreach services identified for inclusion in the asset map.

Identified during original online search								
	Identified from Social navigator program asset map and/or interviews							
	Interviews							
Organization	Program	Information Source	Included in Final Table (Y/N)					
Hamilton Public	Mobile Van	Interview	Yes					
Health Services	City of Hamilton Street Outreach Program	Interview	Yes					
	Dental Health Bus	Interview	Yes					
Good Shepherd	HOMES (Housing with On- site, Mobile and Engagement Services)	Interview	Yes					
Canadian Mental Health Association	Peer Support & Street Team	Interview	Yes					
St. Joseph's Healthcare Hamilton and Hamilton Health Sciences	Hospital2Home	Interview	Yes					
Hamilton Police Services (Crisis Response Team)	Social Navigator Program/ Rapid Intervention and Support Team (RIST)	Interview	Yes					
Shelter Health Network	Shelter Health Network	Website ( <i>Monthly Clinic</i> <i>Schedule</i> , 2023)	Yes					
Aboriginal Health Centre	Indigenous Patient Navigation	Website (Indigenous Patient Navigation, 2023)	Yes					
	Aboriginal Mental Health & Addiction Services	Website ( <i>Mental Health and</i> <i>Addictions</i> , 2023)	Yes					
Grenfell Ministries	National Overdose Prevention Line	Website ( <i>National Overdose</i> <i>Response Service</i> , n.d.)	Yes					

Hamilton Urban Core	Inner City Women's Wellness Anger Management for Women Art from the Heart (art therapy) Blood Pressure Clinic Foot Clinic Happy Hearts Community Oral Health Program Serenity in Motion Streetwise	Website ( <i>Health Promotion</i> , 2022)	No
Mission Services	Harm Reduction Outreach	Website ("Updates to Addiction Services," 2022)	No
Interval House	Violence Against Women	Social Navigator Program Asset Map ( <i>Hamilton</i> <i>Community</i> <i>Resources</i> , 2023)	No