



Health care for transitory populations

UK SCENARIO

#17THIHWC @MARYLEWISHEE

Five transitory cohorts...

- ▶ The Homeless
- ▶ Looked After Children/Children in Care of the State/Foster children]
- ▶ Those with insecure tenancies/"Millenials"
- ▶ The Armed Forces
- ▶ Military Families

... from a multitude

- ▶ Immigrants
- ▶ Port/shipping workforce
- ▶ Travellers/Gypsy families
- ▶ Fairground families/Carnies
- ▶ Students

Vulnerabilities

Arising from their mobility:

- ▶ Lack of continuity of carer
- ▶ Clinical history (records/test results/x-rays) lost or delayed
- ▶ Reduced or delayed access to services (re-registering or joining the back of the queue each move)

Arising from their cohort features:

- ▶ The Homeless: high risk activities such as substance misuse, exposure, mental health issue prevalence
- ▶ Foster care: physical and emotional effects of neglect, pre-natal exposure to substances
- ▶ Insecure tenancies: poor quality environment, higher frequency of accidents for children
- ▶ Armed forces: physical trauma and life after physical trauma, mental health issue prevalence
- ▶ Military families: mental health issue prevalence, higher than average fertility rates, number of children

First person stories

- ▶ Kathy, 15, homeless, Australia
- ▶ Anthony, 25, foster care leaver, USA
- ▶ Jeremy, 35, Renter, New Zealand
- ▶ Michael, 39, Military Veteran, UK
- ▶ Aimee, 49, Military Spouse, Canada

Homelessness definition

Includes:

- ▶ Rooflessness – sleeping rough, without shelter of any kind
- ▶ Houselessness – with a place to sleep but temporary in nature, in an institution or shelter
- ▶ Living in insecure housing – threatened with eviction, insecure tenancies, with domestic violence
- ▶ Living in inadequate housing – caravans on illegal sites, unfit housing, severe overcrowding

- ▶ Official statistics are usually the 'tip of the iceberg'

Size of the cohort

Population	Australia	New Zealand	USA	Canada	UK
Headcount	105,237	21,300	1,560,000	235,000	342,200
As % of population	0.4%	0.5%	0.5%	0.6%	0.5%

Homelessness and Health

- ▶ “Homelessness and ill-health are intrinsically linked and professionals in both sectors [housing and health] have a role to play in tackling the issues together”

Gill Leng (2017)

	Within the Homeless Population	Within the General Population
Long Term Conditions	41%	28%
Mental Health Conditions	45%	25%
Average age at death	M – 47 F – 43	M – 77 F – 82

Kathy, 15, Homeless, Australia

- ▶ The following story contains scenes and information some viewers may find upsetting
- ▶ [Kathy's story](#)

Mental Health

- ▶ Correlations between:
 - ▶ Money problems and mental health
 - ▶ Housing insecurity and mental health
 - ▶ Overcrowding and mental health
 - ▶ Mental Health Problems and Poor Housing conditions
 - ▶ Homelessness and self-medication with alcohol and drugs
- ▶ And that's on top of any pre-existing mental health issues arising from the trauma or circumstances that led to a life on the streets

Children & Young People

- ▶ Impacts on their access to universal healthcare, e.g. immunizations
- ▶ Temporary accommodation is associated with greater rates of infection and accidents
- ▶ More likely to experience stress and anxiety
- ▶ The impact on development and health extends beyond the period of homelessness

Working age

- ▶ 80% of single people experiencing homelessness want to work
- ▶ But only 10% are in paid employment
- ▶ Stress and anxiety about becoming homeless can affect existing employment

Ageing well

- ▶ Two sub-cohorts here: those who have been homeless for a long time and those experiencing homelessness for the first time
- ▶ There is growth in the number of people experiencing homelessness for the first time in their later years; associated with:
 - ▶ Physical and Mental health issues (existing housing becomes unsuitable)
 - ▶ Alcohol abuse
 - ▶ Gambling problems
 - ▶ Death of a relative
 - ▶ Relationship breakdown
 - ▶ Rent arrears
- ▶ Increased likelihood of mental health issues and dementia
- ▶ Existing health issues are exacerbated

Workforce issues: Recruitment issues

- ▶ Highly mobile populations are often geographically concentrated in inner city areas where housing issues also exist for the workforce – high rental prices/insecure tenancies affecting the workforce as well as their clients
- ▶ Client groups can be perceived as ‘uncooperative’ or ‘difficult’
- ▶ Cultural differences can lead to conflict
- ▶ High caseload volumes for specialist services can have a negative feedback loop leading to recruitment issues; “unpopular” placements or employers
- ▶ Funding issues for public service provision: some of these cohorts are often NOT people who can or do vote

Workforce issues: Skills issues

- ▶ Generalists meeting cohort needs/universal services
- ▶ Specialist skillsets (clinical or engagement)
- ▶ Accessing information/clinical histories

Workforce Issues: Roles

- ▶ Emerging new roles (in the UK at least) could play a part in addressing unmet needs, e.g.
 - ▶ Family nurse partnerships (although these are being decommissioned)
 - ▶ Physician Associates
 - ▶ Nursing Associates
 - ▶ Care Navigators

Workforce Issues: System barriers

- ▶ Multiple agencies might be involved, e.g. child services, health, education, justice
- ▶ Multiple funding streams > arguments over who pays for what
- ▶ The 'patient' pathway may be complex
- ▶ Centralizing services geographically around the funding stream (e.g. locating all child services together) may mean multiple stopping points for the cohort member – could they be clustered around a cohort
- ▶ Accessing information/clinical histories

Workforce Issues: Barriers to Innovation

- ▶ Over-stretched resources naturally will focus on putting out the fire in front of them
- ▶ Capacity to think differently about an issue requires time
- ▶ Capacity to implement something different requires a clear vision, negotiation skills, leadership, change management

Workforce Solutions

- ▶ Health Education England's Workforce Transformation 'Star'
- ▶ Five 'pillars':
 - ▶ New Supply: ROI - minimising vacancies by maximising participation, retention, overseas recruitment
 - ▶ New Skills: Upskilling or Reskilling
 - ▶ New Roles: Embedding, sustainability levels
 - ▶ New Ways of Working: Organisation, systems and processes, deployment, employment patterns
 - ▶ All enabled/supported by (new?) Leadership