Caring for populations with complex health and social needs

A tip sheet for healthcare providers

StreetHealth

People who use drugs often experience stigma and discrimination when accessing health care services. Once drug use intersects with homelessness, and/or diverse gender identity and/or diverse racialized communities, the stigma and discrimination is layered and intensified. This can result in people avoiding health care.

These tip sheets have been developed by community members from the affected populations. They are intended to inform health care providers of some of the experiences people have endured. It is our aim to provide practical solutions that can help to resolve the cycle of stigma and discrimination that create negative health outcomes. We hope the information will help you to build trusting relationships and enhance the continuity of care you provide.

Everyone deserves care.

Many Canadians have easy access to reliable health care on a day-to-day basis, however marginalized populations may not be receiving the same quality of healthcare. Stigma and discrimination creates unsafe spaces within the healthcare sector. Creating effective and accessible services is critical to advance the primary objective of Canadian healthcare policy, as set out in the 1984 Canada Health Act.

Barriers to service for racialized people.

Racialized describes the marginalization that's directed at people due to their race.

- I've been talked down to by health care providers
- I've experienced barriers because English is not my first language
- I don't see people in health care roles who look like me
- Health care providers don't have the knowledge on health concerns that affect different races
- Health care providers will assume I'm med seeking and dismiss genuine health concerns
- I've been sexualized by health care providers
- I won't disclose everything that's happening for me because they discriminate against me
- If I voice my concerns, I get labelled

Barriers to service for Indigenous people

- Hospital staff hide hand sanitizer assuming I would drink it
- Hospital staff assuming I'm intoxicated
- Hospital security acting in an aggressive manner
- Health care providers assuming I'm med seeking
- My Status Card wasn't recognized as valid ID
- Health care providers assumed I was homeless
- Not being allowed to smudge in hospital

Barriers to service for 2Spirit, Transgendered & Non-Conforming people

- Health care providers assuming or ignoring my identity
- Health care providers not asking for my pronoun/s
- Health care providers using my deadname - a given name that no longer has any use or meaning
- Limited number of health care providers working with Trans, Non-binary and 2 Spirited people
- Medicine has rigid perspectives, how is a male patient with ovarian cancer understood?
- Health care providers confuse identity with sexual orientation

TIPS: Summary

- Be fluent in the needs of folks who are homeless and/or using substances;
- Know community resources, do they have a support worker and if so, can this person assist with care plans and appointments?
- Understand poverty, be competent in substance use and dependency, harm reduction, mental health concerns, head injuries, FASD, developmental challenges, and trauma.
- Understand diversity, for example how racism affects health outcomes. This work really requires expertise and commitment to be done well.
- Be kind, caring, and compassionate. Remember to be non-judgemental and non-discriminatory

Improving the Space

WAITING ROOMS:

- Make waiting rooms friendly and welcoming;

  Ensure that all staff (receptionists, technicians, nurses, doctors) are skilled in working with folks who are homeless and/or using substances.
  Have water available .

- Minimize the level of stimulation in waiting areas as best you can;

  Consider lighting
  Noise levels,
  Proximity of seats, etc.

  Consider hiring a community member to be a greeter.

  A smile can go a long way

- Have signs that let people know that Naloxone is available

- Have a welcoming statement and list what expectations patients can have, for example,

  - Being treated with respect
  - Being listened to
  - Not being judged

- Be accepting that people may have a hard time staying still

- Let people know why they are waiting

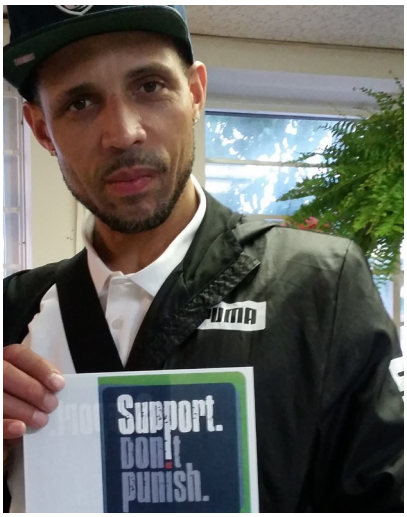
DISPLAY:

- **Art that reflects diversity**
- **A land claim acknnowledgement**

- **Informational posters for example on pronouns**
- **The 7 Grandfather teachings**
- **Community information and resourcces**

OPTIMIZING SERVICE DELIVERY :

- Learn language that isn't centred in colonial and binary understandings for further information please check the following sites: www.noslangues-ourlanguages.gc.ca and www.ictinc.ca
- Create an organizational culture that is informed
- Provide a diverse health care team
- Have Indigenous Elders available
- Have other roles for people who identify as BIPOC such as a patient advocate or a patient navigator and ensure equitable pay
- Have Elders involved in advisory committees, boards and appoint traditional knowledge keepers to key organizational positions
- Develop campaigns to welcome Indigenous Peoples
- Honour people stories
- Ask how their experience was
- Have relevant resources available, ex: food programs
- Learn from the people you are helping



FLEXIBILITY:

Offer walk-in times on a daily basis.	Provide as much help as you can in one visit.	Offer services on the weekends and if not 24/7 as close to that as you can get.	Ensure non-punitive approaches for missed appointments or late arrivals.

Keep in Mind:

- People are in a survival mode and may not have the transit fare to get to the appointment, the appointment time may conflict with a food bank or meal program time, life can be chaotic, etc.
- Consider the possibility and implications of malnutrition
- Avoid expensive treatments that patients may not be able to afford.
- Be transparent about all possible solutions to find what works for them.
- If possible, provide mobile services in the community to expand reach and make attending easier.
  - Offer appointments over the phone if appropriate
  - Text or call patients to remind them of appointments

credit: Anthony Schofield

Building Strong Relationships

RECOGNIZE

Recognize the patient as the expert of their situation

CONSIDER

Consider that it may have taken everything the person in front of you had to make the appointment.

RIGHTS

Inform people of their rights inside the health centre

STAFF

All Staff should be trained in trauma-informed care, harm reduction philosophy, cultural safety and anti-oppressive practice – include security and reception, admin staff.

EDUCATE

Educate staff on their power and privilege and the responsibility that comes with that, including the responsibility to advocate for their patients and respond when they hear discrimination in the workplace.

MANAGEMENT

Engage senior management in establishing policies for cultural competency and safety ensuring a high standard of care.

Try to see patients and clients as community members – a community you belong to

Be welcoming, compassionate and listen to what is being said. Ask how someone is doing and be understanding that clients may not be in a good space emotionally but still need care. Active listening can go a long way.

Respect Indigenous cultural identities, worldviews and practices and be open and willing to learn. This includes not appropriating knowledge, for example acknowledge where the medicine wheel comes from

Incorporate Sacred Medicines in healthcare, take a holistic approach that acknowledges the spiritual, mental, emotional, and physical aspects of every human being

Become aware of your biases, and seek out educational opportunities that will allow you to provide cultural safety

- Be aware that mixed race patients may have needs that aren't apparent
- Don't assume people identities – ask them what their pronoun/s and name are
- Take a holistic approach
- Work with the patient to understand how to treat them. They know their situation best.

Respect the patient's boundaries; vulnerable populations may carry a lot of trauma and may keep to themselves to stay safe. Always let them know what you're doing and ask for consent.

Be Patient

Ensure your practice is trauma informed. Recognize the presence of trauma and understand how that may present and manifest.

Be curious about what's behind a behaviour verse judging it.

Building trusting relationships is the responsibility of the provider and it will garner much more meaningful information.

If someone isn't accurately reporting their substance use they've likely had negative experiences and are trying to protect themselves.

Narrative approaches versus a "Q&A" style will help to build trust and gather a more complete history.

Be curious and open and willing to learn. Use plain language.

Always have the goal of wanting to make the person come back!

Be fluent in the challenges that folks who are homeless and/or using substances

Bottom Line

All patients have a basic human right to receiving healthcare, regardless of their background. It is your duty as a healthcare provider to accommodate patients who may have difficulty receiving such care. If you cannot provide the services they need, please responsibly refer them to someone who can.

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