

Improving services for women who access homeless Drop In Centres and Primary Care centres

28th September 2019

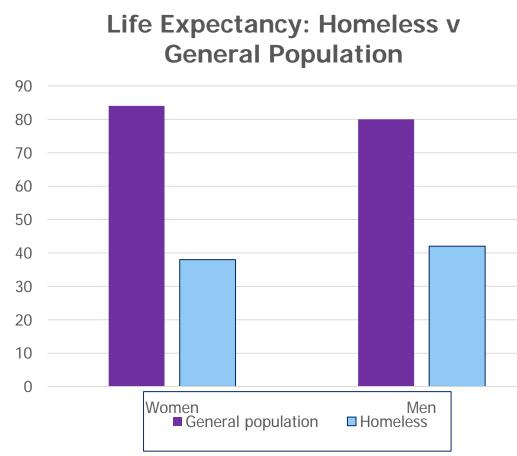
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MQI Services & Support

- Homeless Services
 - ► Access to food, showers, change of clothes
 - Art Therapy
 - Access to Hairdresser
- Primary Health Care Services
 - ► GPs/General & Mental Health Nursing Services/Dentist/Chiropodist
 - Women Specific Health Services Cervical Smear tests, Breast Cancer Screening, Sexual Health Screening, access to contraception.
 - ► Harm Reduction/Needle Exchange
- ▶ Case Management: Access to Case Workers Drug Services, Mental Health, Youth Support, Night Cafe
- Detox & Rehab beds (Dublin & Carlow)
- MQI prison-based inreach addiction counsellors (Dochas & Limerick)
- Midlands Over 18s Drug & Alcohol Treatment Support Project
- ► East Coast Over 18s Community Recovery & Integration Support Project

Women and Homelessness



- ▶ 42% of people in homelessness are female
- Average age at death of women who are homeless in Ireland is 38 years, while for men it was 44
- The homeless figure does notinclude women in domestic abuseshelters
 - Women make up a far higher percentage of the homeless population in Ireland compared to other European countries at typically 20-33% (Mayock, P Bretherton, J (2017) Women's Homelessness in Europe)

Women accessing MQI Day Services

	Drop in	No of meals	Showers	Health Promotion	Hairdressing	Primary Health care	Night Cafe	Extended Day Service
Open Access Dublin	3,294	10,166 visits 914 women	741	4,774 visits 437 women	146	2,098 visits	945 visits 125 women	21,116 visits 279 women

Profile of women accessing MQI services

Nationality	Irish	European	Non- European	Non Specified	
	781	130	45	104	
% of total women	74%	12%	4%	10%	

Age	18 -29	30 - 39	40 - 49	50 or older
	190	421	291	132
% of total women	18%	41%	28%	13%

Medical interventions 2019 River Bank (Dublin)

Support Type:

Counselling, Medical Link in/ Physical Health Interventions, Mental Health Interventions, ICM - St. James Hospital Inter-agency Updates

Gender: Female

Date	Sum of Unique clients	Total Count
January 2019	24	87
February 2019	23	53
March 2019	22	58
April 2019	15	30
May 2019	12	28
June 2019	21	63
July 2019	27	58
August 2019	25	71
September 2019	7	19
Total	176	467

Women & Homelessness

- Rough Sleepers, One Night only Accommodation' 'Hidden Homeless (moving around in accommodation/family/friends)
- ► Inadequate clothing, poor nutrition, an inability to access private toilets and showers
- Trauma (childhood/adulthood/ongoing) The majority of women have experienced sexual and physical abuse
- Crisis Pregnancy
- Prostitution
- Substance Misuse Many women come from families with substance use problems and have a substance-using partner
- Family Breakdown/ limited or no contact with family and children
- Stigma & Shame: women face double stigma based on both their gender and their drug use other issues include leaving family home, children in care
- Entering homelessness from prison, hospital, state care

Homelessness & Health

Mental Health

- Women with mental illness are at a greater risk of experiencing homelessness
- The stress of experiencing homelessness may exacerbate mental illness and cause anxiety, fear, depression, sleeplessness and substance dependency
- Increase in women presenting with dual diagnosis, personality disorders

Physical Health

- Premature aging of 20/30 years driving conditions commonly associated with old age such as vascular disease, diabetes, hypertension, stroke, seizures and cognitive decline.
- The impact of social stress and shame can cause chronic inflammation that can accelerate ageing (Cliona Ni Cheallaigh, MQI Newsletter Q1 2019)

Homelessness & Health contd.

► High risk of HIV and Hepatitis C Infection.

On 26th September 2019 MQI started Hep C screening 6 weeks pilot programme "Seek and Treat" aiming to simplify screening and treatment of HCV infection in hard-to-reach groups.

Fibro Scan assessment offered onsite and a nurse will follow-up/meet with the client to discuss treatment options.

Peer advocacy programme referrals will be considered so clients will remain engaged with the treatment, making sure they receive appropriate supports.

Barriers to accessing Services

- ► Stigma/Shame/Judgement often takes women longer to ask for help/prioritise themselves; women tend to move around services
- ► Fear of losing children
- For women who are mothers, there are a lack of services that accommodate children (one treatment center in Dublin)
- ► Lack of Female Specific Service and Gender Sensitivity within services (services predominately accessed by males)
- ▶ Difficult to talk about past trauma/ violence in a predominantly male environment
- Lack of accommodation and move on supports

What's Needed

- Increase the number of Gender Specific Harm Reduction & Treatment Services
 - Increase the range of wrap around treatment and supports to facilitate more women with children or who are pregnant taking up treatment
 - Gender Specific Services who provide Trauma Informed Care
 - Provision of women only spaces within services with opening hours that make them also accessible for women with children
 - > studies have found that such spaces increase feelings of safety, respect and dignity among women who use drugs and who have experienced abuse.
- Provision of appropriate accommodation for women with appropriate wrap around supports
- More Multi-Disciplinary approach to addressing the complex needs of vulnerable women experiencing homelessness and addiction e.g. accommodation, health, addiction etc.
- Homeless Health Peer advocacy programmes- accompaniment is offered to clients to and from health appointments, with a view to reduce unplanned use of health services, retain individuals engaged in treatments, advocating on behalf of participants, identify research priorities
- Education & Training

Thank you for listening!

For more information:

- www.mqi.ie
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- Our film: https://mqi.ie/film-19/

