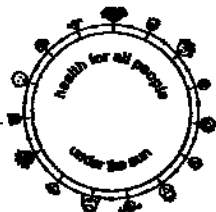


Health Care for the Homeless And HouseCalls



September 2009

Silent and Invisible: Brain Injury

Patricia Pettit is a Certified Brain Injury Specialist/Trainer. She has raised awareness among MN service providers about the prevalence of TBI (Traumatic Brain Injury) in the homeless population. Patricia helped HCH staff develop a screening tool and now comes to the Dorothy Day Center Clinic each month to assess patients and help them plan the next steps. Its been a terrific partnership, and Patricia agreed to write about why TBIs are so concerning and to share some success stories:

Brain Injury is the 2nd most prevalent injury and disability in the US affecting 10 million Americans, 104,000 of them Minnesotans.

Brain Injury is silent because the person often does not realize they have it. It is invisible because we cannot see the brain and the damage that has been done. The dramatic changes in a person's life can occur long after the injury occurred.

TBI or Traumatic Brain Injury is caused by an external force, a blow to the head. The leading cause is falls. Until 2005, motor vehicle crashes were the leading cause. Fortunately, people have started using seat belts and that has reduced the number of injuries. Other causes include sports, assaults and domestic violence. Unfortunately, brain injury is the signature wound of the operations in Iraq and Afghanistan due to the blasts that have been so prevalent.

Brain injury can also occur from a tumor, a stroke, lack of oxygen, neurotoxic poisoning or infection. The secondary injury from swelling and bruising often causes more damage to the brain than the initial injury.

Because the brain regulates everything in our bodies, when it is damaged, functioning is affected, often irreversibly. Some changes might include difficulty with executive functioning like attention and concentration, learning, problem solving and short-term memory loss. There may be difficulty with emotional and psycho-social functioning. Personality changes occur. There can be seizure activity, headaches, balance and sensory problems. The sleep/wake cycle may be affected. Who we are and how we behave may be altered. Chronic pain may be a consequence, and

depression and anxiety often follow a brain injury.

The Wilder MN Survey on Homelessness from 2003 included questions about TBI for the first time. By the 2006 survey, the percentage was slightly higher of those who reported having a TBI (30%) and resulting cognitive impairments (33%). When persons experiencing homelessness were screened, 85% had the brain injury before they became homeless.

The person who has sustained a brain injury is usually unaware of any change due to the resulting cognitive impairments. They have often forgotten about the incident that resulted in brain injury. Not knowing why their lives are chaotic and dysfunctional, some turn to drugs or alcohol. The psychiatric manifestations of brain injury look like Mental Illness, but because of the physical and medical consequences of brain injury, it is essential that the brain injury be identified and treated. This has dramatically changed lives:

Continued on Page 7

In this Issue....

Silent and Invisible: Brain Injury	1
Directors Column	2
Nurturing the Heart	2
Positive Lifestyle Changes.....	2
Something I Didn't Learn in School	3
A New Type of Healing	3
Connecting at the East Metro PHC	4
Goddess Group/What Women Really Want....	5
Working Together	6
Volunteer Recognition Event	7
Welcomes/Goodbyes	7

Director's Column



The unseasonably colder weather this summer has been a too-soon reminder that fall is coming. Whether it's the cooler temperatures or the chilly economic climate, Health Care for the Homeless (HCH) and HouseCalls (HC) are very aware that its time to prepare for tougher times.

Summer is the height of utility assistance activities at HC. A new reality this year is that some of the utility assistance programs have shrinking grant dollars available. This results in reduced awards per household despite the growing size of the disconnect bills. HC staff has to work harder and smarter to find the funds to resolve the crisis. Another sign of the times is that story after story tells of job loss that led to unpaid bills for the first time.

HCH sees the impact of the economy as well. Staff knows fewer patients are finding seasonal and temporary work and so they are more dependent on provided services.

We are also bracing for the impact of the unallotment related to General Assistance Medical Care (GAMC) that is slated for March 2010. Many of our patients are eligible for GAMC and have benefited from health insurance that supports more complex services and medications. HCH anticipates simultaneously losing revenue from GAMC patient visits and facing higher expenses in serving a larger pool of patients who need care and medications. We are making plans for how to manage while also joining with others in advocating for a solution that is more just for the patients and health providers.

Despite this gloomy overview, HCH and HC continue to work hard to help people move forward in a positive direction. This newsletter describes some of the creative and unique activities we are using to engage with our patients/clients. I am so proud of all we accomplish everyday to make life a little better one person at a time.

Nurturing the Heart

I started as a new Mental Health Nurse at HCH in February 2009. Part of my job was to take over a Wellness Group at APR, a domestic violence shelter for women and children. I worried, "What will I be able to do to help them?" The answer was easy: do nothing.

On Tuesday mornings, I spend about an hour with one to ten women (and sometimes one or two of the older kids) just allowing and supporting silence. Meditation, some of us call it. We usually start off with a short visualization. We might walk down a country road, smell a lemon or sit on a cloud in our imagination. This serves to help clear the mind of the stress, worry and fear that they have and most of us have to some extent. Then we just sit quietly. There is some time at the end of the hour to process and talk about experiences. Some participants leave quietly, but moving more slowly and calmly. Others comment on their sense of peace and relaxation saying, "I wish I could always feel this way." I reply, "Well, remember that we did not do anything. You are just feeling you. This is who you are under all of your worry and stress."

The group is just as helpful to me as it is to them. It is an honor to be with them. It is an honor to have this job!

— Carissa Scanlan, *Mental Health Nurse*

Positive Lifestyle Changes

Searching for support with nutrition, Jeffery came to HCH to request a note to give to the Food Shelf that asked for better food items to help control his diabetes. From day one, Jeffery has done a good job of keeping a positive focus toward making important changes in his lifestyle. He sought out support from HCH's CD Counselor, Eric Bacon, for his addiction issues and has visited the clinic for diabetes and nutrition education. The nutritionist wrote a letter to Ramsey County Human Services advocating for food stamps and provided additional nutrition education.

We believe that the changes this individual is focusing on will move him forward in a positive, creative direction. He is enrolled at St. Paul College studying the culinary arts and states that one day he wants to give back to society in a positive way. He encourages others to also make changes for a better life. He has connected with a spiritual community who support him, and they look forward to his participation on weekends and in various programs during the week. It is the first time that Eric and I have shared a patient's success and it has been very special to be a part of Jeffery's recovery and management of his diabetes.

— Vicki Kramer, *Diabetes Nurse Care Coordinator*

Something I didn't learn in school!

"They need a roll off." "A roll off? What's that?" I thought. That was back in 1992 when HouseCalls came into existence and I was on my first home visit with Don Juenemann, a Housing Code Inspector for the City of St. Paul.

I learned a lot from Don and other inspectors that I never learned while getting my Social Work degree from the U of M! Luckily, I did learn how to learn and knew I wanted a challenging job that would expose me to different aspects of the "human condition". Boy, did I get that job! But I am so privileged to have been let into peoples' lives and to learn from them.

One of HouseCalls' goals is to prevent homelessness. We work with inspectors in St. Paul and Ramsey County and an issue we run into is "clutter houses." Sometimes folks have trouble organizing their things or have a compulsion to bring more things into their homes. Sometimes depression is so serious a house fills up around a person. Occasionally, a house cannot be used as intended. Stoves will be completely covered with mail or other items; beds, chairs and bath tubs will be filled with clothing, paper, trinkets, books or other important things. We may not be able to get into rooms because they are filled floor to ceiling. Sometimes it is cats that are being "collected."

There are a number of reasons why the clutter gets out of control, but in all instances, it is a health and fire hazard — which is why Housing Code Inspectors get involved. HouseCalls assesses the medical and mental health needs of the client and makes appropriate referrals to help address the issues. We try to be sensitive and understanding of the client while at the same time offering help to abate the clutter. We can provide a 20 or 30 yard roll off (a large dumpster, as I learned on that day in 1992!), cleaning supplies and referrals for loans or grants for housing repairs.

We provided 48 roll offs in 2008 which successfully prevented those households from condemnation and homelessness. Preventing a condemnation can be very expensive but it doesn't come close to the cost of homelessness.

Whether threatened by "clutter" or utility shutoffs, HouseCalls works hard to help people hold onto their housing.

— Kay Wittgenstein, *HouseCalls Social Worker*

A New Type of Healing

A new type of healing is now available at the Dorothy Day Center Clinic! I am proud to announce a collaboration between Health Care for the Homeless and Well Within.

Well Within is a non profit holistic wellness resource center located in Saint Paul. Its mission is to assist people facing health challenges by offering a variety of services and integrative healing experiences designed to promote wellness and balance, and support the body's innate ability to heal. Mary Treacy O'Keefe, Well Within's Executive Director, was enthusiastic when I approached her regarding offering their services at the Dorothy Day Center Clinic.

Cami Smalley, Program Director for Well Within, coordinates all of the volunteers who so generously donate their time and expertise. She also acts as a practitioner.

Because of these dedicated volunteers, clients at the Dorothy Day Center have been able to experience Healing Touch, Reiki and Breath Work. It is not unusual to hear comments such as "Wow, that felt fantastic!" or "That felt so good, I don't feel stressed anymore!" as clients leave the clinic. One client told me he had suffered from gout for six to seven months. Since he had one Reiki session a month ago with Pat Melody, a Well Within volunteer, he reports that his gout has not caused him any more pain.

What exactly is Energy Healing? Energy Healing is a form of complementary or alternative medicine.

Continued on Page 6



Well Within Volunteer, Suzanne Rubenbauer, in an Energy Healing session with a patient.

Connecting at the East Metro Project Homeless Connect

The St. Paul RiverCentre was hopping on June 29, 2009 as 1,400 homeless and near-homeless people came to seek services. This was the first time St Paul's event expanded into the East Metro Project Homeless Connect which included Washington and Dakota County service providers and attendees. People were busy getting help with housing, employment, health care and more. There was a steady flow of "guests" coming through all day and everyone seemed to be having a good time.

Several new features this year were very popular. One was having the MDH's Sage Program onsite with a mammogram van parked outside on Kellogg Blvd. (The Sage Program provides cervical and breast cancer screening for low-income women over 40 years of age.) One of West Side's Nurse Practitioners performed 71 clinical breast exams and all of the participants had mammograms! By mid-afternoon, there was a line of 20 women waiting their turn. Sage was popular beyond anyone's expectations and surprisingly, additional patients had to be turned away. Education about ongoing preventive care is core to the Sage program, and staff used every opportunity to encourage follow-up visits.

Another new service was onsite adult dental care. Apple Tree Dental brought 3 operatories and digital x-ray to serve 182 patients. It was an amazing spectacle to see the Exhibit Hall transformed into a fully functioning dental office. A roster of volunteer hygienists and dentists assessed and treated patients and kept operations running smoothly. We were delighted that Children's Dental Services was onsite again this year with 2

operatories. They treated 13 pediatric patients.

Another popular and new service was a free clothing service called the Ministering Angels. They brought work clothes to help prepare those seeking employment services that day. It was a wonderful way to encourage employment seekers by building their confidence with a new outfit for interviewing.



HCH's Carissa Scanlan and Kali Aro at the 2009 East Metro PHC.

The idea of the Project Homeless Connects is to help people move another step towards stability by providing actual services. Here are a few stories about connections people made:

- A single mother applied and was accepted into a supportive housing program that she only learned about by coming to the event. Another applicant from the event was in the interview process for a housing program.
- A patient, "Randy," had avoided his primary doctor, Dr. Jason Como, because Randy had not completed the agreed upon care plan. Dr. Como was at the event and with some encouragement Randy approached the doctor and talked it through. He thanked staff on two separate occasions for

gently nudging him because now he could follow up. Almost 6 weeks after the event, Randy came to HCH terrified about a recommendation that he undergo angioplasty. The nurse referred him to her acquaintance who could discuss the success of his 2 angioplasties. Just this week, Randy returned in an up mood and said that he had scheduled the procedure after hearing the acquaintance's story.

- One of the volunteer lawyers uncovered that "George's" criminal record was actually committed by George's brother who is in prison. This criminal record prevented George from finding housing and employment. It took hours, a 3-page letter and as of July 17th, George's record cleared once George's fingerprints identified him. This will help George succeed in finding housing and employment.

Some other highlights:

232 people met with lawyers to discuss civil, criminal, housing and family law issues.

300 people received assistance with online job search, applications, resume preparation, mock interviews and employment counseling.

161 people received haircuts.

95 people opened voicemail accounts so that they can receive messages about housing and employment opportunities

Planning the event each year is exhausting but these kinds of exciting outcomes make it all worth while. Housing of course is the ultimate connection we all hope people make. But "Randy" and "George" show that there are many winding connections needed to help people move forward.

— Helene Freint, *Program Director*

Goddess Group/What Women Really Want Women's Nutrition Group at DDC

What do women really want? The women at the Dorothy Day Center want to learn more about nutrition and health. In February, nineteen female residents of Dorothy Day Center's second floor chose to attend the first women's nutrition group offered by Health Care for the Homeless.

The session was opened with introductions and a visual imaging meditation. We focused on a lemon – the way it smells, the way it feels, picking it off of a tree and taking a bite out of it. Everyone stayed quiet and at the end when we asked how folks liked the meditation... most agreed it was a nice exercise with one voice chiming out loudly that she had imagined an orange! The exercise helped to set a relaxed, focused mood for our discussion on nutrition. The women were encouraged to do their own meditation at any time or place

pointing out that this exercise costs nothing, needs no special equipment and is easy to do.



Irene (left) and Goddess Group participant discuss the ingredients of a low-fat tuna salad.

Once everyone was focused and relaxed, Susan Wehrenberg, former HCH Dietitian, opened the floor for all to bring up the nutrition

concerns they were interested in discussing. Topics ranged from anemia, calcium and vitamin D to milk-fat, portion control and weight loss. One topic everyone seemed interested in was getting the salad bar back in the dining room.

The next item on the session agenda was exercise, an all-important part of good health. I led the group in "soup can" exercises using 2 lb soup cans and water bottles as weights. We stretched with a soup can in each hand and then a bottle of water in a plastic bag – hanging from the ankle – for leg exercises. The women readily joined in and several commented along the way, "Ooo, I can feel this!" We had a lot of fun mixed with laughter, jokes and, in the end, smiles for the time and interest given. It was very rewarding!

We have continued holding a women's group – now known as "The Goddess Group" – since the beginning of June with Irene Alton serving as our new Dietitian. Topics have included doing a family health history, pre-diabetes/diabetes, hypertension and heart disease along with providing healthy snacks for all.

What do women really want? They want to be heard and they want to talk about things that matter to them... things like food, exercise and dealing with stress. The participants have been engaged and interested during the time we are together and are now looking forward to our Tuesday morning gatherings.

— Vicki Kramer
Diabetes Nurse Care Coordinator



Vicki (left) talks to the Goddess Group about heart disease in women.

Working Together for Health, Housing and Human Rights

Washington D.C., our nation's capital, is a city that houses our president, congress and a large majority of America's homeless. What other location could be more ideal than Capital Hill for the National Health Care for the Homeless Convention of 2009. With sponsorship from the Vanderbilt School of Medicine and the National Health Care for the Homeless Council, this convention not only focused on health care, but brought health, housing and human rights together to battle homelessness.

The Convention started off with a bang when Congressman Barney Frank, chairman of the House Financial Services Committee, delivered the Susan Neibacher address. With passion, he spoke of the need for universal healthcare and more accessible housing. His fight in Congress for helping the war on homelessness in our country sparked a fire within individuals in the room who share this same passion with hope for change. It was a great kickoff to show what the National Convention is all about.

Workshops, resources, poster displays, films and documentaries kept Eric and I busy as we learned about outreach, electronic health records, addiction, youth, medical respite and mental health. These resources offered us some new insights and new strategies to apply here in St. Paul.

With its location in mind, attendee's were encouraged to contact their states' representative and meet with them in hopes to not only build a relationship, but to persuade them to advocate for the changes needed for our homeless patients. Rallies were also held at Union Station to publicly get our voices heard while we were here in Washington.

Three Washington DC shelters and social service providers were open to all attendee's for site tours. Community for Creative Non-Violence Federal City Shelter, Christ House and So Others Might Eat opened their doors to explain how they operated and how they were helping people in the community. Eric and I attended Christ House, a 34-bed healthcare facility that is a temporary residence for those who are homeless and sick. It is a place where they can receive medical care, social services, nutritious meals and get plenty of rest. I was amazed at this program. Twenty-four-hour medical care is provided by staff physicians, nurse practitioners and a team of nurses and nursing assistants. Some physicians even live on site if there is a need for emergency care. The dedication and love

that these individuals give to their program and to the patients is outstanding.

I loved the experience I had at the National Convention. I met individuals from all over the U.S. who share the passion of ending homelessness and who offered new idea's and program models to us. It was an experience unlike any other, strengthening our passion for the work we do.

— Malarie Bump, (*former*) Clinic Coordinator

A New Type of Healing — from Page 3

Energy Healing Practitioners use different modalities such as Healing Touch or Reiki, but all use gentle touch to move and support energy in and surrounding the body. This in turn reduces stress and anxiety and encourages self-healing, relaxation and pain reduction. Energy Healing is a holistic model and views the patient as an equal partner with the Practitioner in the process.

HCH is now able to offer a dedicated Energy Healing Clinic on Friday afternoons. During the rest of the week, we have two HCH nurses who are also trained in Energy Healing and available to work with patients. Energy Healing is a great addition to our clinic, and we are all very proud to be part of "the wave of the future in health care" and provide it to our patients. Thank you Well Within and your wonderful staff and volunteers!

— Nancy Rech, MA, *Outreach Social Worker*



From left to right: Cami Smalley, Nancy Rech and Mary O'Keefe in front of the Dorothy Day Center Clinic.

Volunteer Recognition Event

What made our annual Volunteer Recognition Event ROCK this year?! (Besides the HCH volunteers in attendance, of course!) A private show by The Rhythm Pups! Banjos, maracas, accordions, cymbals and tambourines echoed throughout the Community Room at La Clinica as we honored our weekly volunteers. It was the perfect mix of acknowledgement and entertainment to treat the volunteers who keep us going!



Dr. Tim Rumsey (center) and the Rhythm Pups

Silent and Invisible — from Page 1

D. had been homeless for many years, struggling to keep a roof over her three sons' heads. She had been violently abused by a boyfriend and always managed to keep her family together but without sustainability. She rented the first floor of a duplex only to learn three months later that the house had been foreclosed on before she even moved in. The owner of the house did not return her deposit, kept the moving assistance money owed to **D.**, and added the electricity bill for the whole house onto **D.**'s account which left her with a large balance. **D.** and her boys were back in a homeless shelter once again; however, this time she was asked five simple questions that indicated the possibility of brain injury. She was screened by a Certified Brain Injury Specialist. Appointments were immediately made for a Neurological Assessment for brain injury, constant headaches, sleep disorder, high levels of anxiety and depression, and especially for seizure disorder: all very common symptoms experienced after a brain injury.

D. and her children now live in an apartment that has become home. **D.** has spent the past eight months working for stabilization – in housing, in the community, but more importantly, for her medical needs. She is now on a medication regiment that prevents seizure activity, lowers anxiety and depression and assists her in sleeping through the

Farewell Mark, Welcome Jason

After 6 years, Dr. Mark Thomas has passed the HCH baton to Dr. Jason Como. Since summer 2003, Mark spent Thursday mornings in clinic at the Union Gospel Mission and then at the Dorothy Day Center. Mark was dedicated to helping the team in any way he could. He nudged patients towards becoming more proactive in their own health care and listened with compassion while moving them towards a positive outcome. He was consistent in ensuring his medical practice didn't change just because the patients were homeless and uninsured. He enjoyed the camaraderie of the staff and was generous in bringing treats to share from Jerabek's Café. Thank you, Mark, for all your support of HCH and patients. You are missed.

Dr. Jason Como stepped into Thursday's schedule at the end of May and has quickly applied his prior experience to successfully build rapport and trust with the patients. We look forward to many years of working with Jason at HCH.

— Helene Freint, *Program Director*

night. Life with three healthy and active young boys has become manageable. She is now on Supplemental Security Income due to her disability, and is in the process of becoming a first time homeowner. She has also reconnected with her family after a 15-year separation. Now she speaks to family members on a daily basis and enjoys being connected to her siblings once again. They all have come to understand the challenges she has been through and are very supportive.

S. is a veteran who had many blows to the head and had been diagnosed as Bi-Polar. I learned that he had sustained a high fever for two weeks when he was 15, and afterwards, his behavior became unmanageable. He had been homeless for 25 years, camping out because he couldn't deal with the noise and crowd of the shelters. When the Neuropsychologist told him that he had severe cognitive impairments and couldn't continue living the way he was, his face brightened and the shame and blame that had accumulated over the years lifted off of his shoulders, as I was able to say, "It's not your fault – you have a brain injury." The next day he told me he was trying to think of a way to tell his mother so that she would not feel guilty. He is now reunited with his family and living safely at home.

Article Submitted by Patricia Pettit, CBIS-CBIT
Hart Community Services



West Side

Community Health Services

**Health Care for the Homeless
& HouseCalls**

438 Main Street

St. Paul, MN 55102

Return Service Requested

How You Can Help...

Please consider supporting our work with a tax deductible gift made by cash, check, credit card or online at www.westsidechs.org. Unrestricted gifts from individuals allow us to direct funds where they are most needed.

Here are examples of how your gift supports our work:

- \$250 provides five homeless patients with needed eyeglasses.
- \$96 provides eight homeless patients with Seasonal Flu shots
- \$25 provides fifteen homeless patients with pharmacy co-payments.

Checks should be made payable to:

Health Care for the Homeless

438 Main Street

St. Paul, MN 55102

(651) 290-6814

fax (651) 290-6818

karo@westsidechs.org

***Health Care for the Homeless & HouseCalls are programs of West Side Community Health Services (WSCHS).
The mission of WSCHS is caring for the health of diverse communities.***

Thank you for your support!

Please contact us to add/delete your name to/from our mailing list.