

Ending the Silence & Stigma:

Part 1 - Old Before Their Time

Dr. Cliona Ní Cheallaigh's statistics reveal a sad, seldom discussed truth. Where there should be data in her chart for people aged 60 to 70 who are homeless, only a blank space appears. Most were gone by then. In Part 1 of MQI's "Ending the Silence and Stigma" series, discover what is literally stealing decades of life from people on the streets, and the Dublin homeless inclusion health programme that's among the first of its kind in the world...



The client known as "Jonny"* gasps for breath that doesn't come. His lips are blue. His blood oxygen levels are falling. He's gone into acute failure for a respiratory condition that is easily treatable in modern-day Ireland. But Jonny is homeless. Although not yet 40, if he survives the day, a cascade of events are already in motion that will make him old before his time. Experts are now acknowledging a premature ageing of 20 to 30 years among people who are homeless — *with or without addiction* — driving conditions commonly associated with old age such as vascular

disease, hypertension, and cognitive decline. And it's making it that much harder for them to come back.

In 2016 a pilot project led by St. James Hospital consultant Dr. Cliona Ní Cheallaigh began linking with charities like Merchants Quay Ireland (MQI) and other community partners to make sure homeless patients like Jonny wouldn't fall off the radar and grow old, or die, before their time. What she and others discovered reveals volumes about the damaging effects of homelessness. "One of the things that struck me was that many of the homeless people I saw were my age, but they would look really old," Cliona begins. "So we started looking at the age profile. For our hospital inpatients, the median age

was 70. But if they were homeless, it was someone in their early 40s. By the time they'd be hitting their 60s and 70s, many were dead. They'd been through more in the same number of years, and had the diseases associated with old age." Through her own research and work done by others, the causes — and a possible solution — emerged.

How homelessness hurts: the new view

On any given day, someone who is homeless like Jonny endures everything from constant exposure to the wet and the cold, to inadequate clothing, poor nutrition, and an inability to access private toilets and showers. If he is like many who sleep rough, this unrelenting

Hidden Effects of Homelessness

Studies^{1,2,3} of people who were homeless and aged 45-50+ showed:

- Grip strength equivalent to a 65-year-old
- Only half the functional mobility of someone 65 and older
- Nearly one out of three described as frail
- More than one out of three reported falling in the previous six months
- High rates of diabetes, depression, hypertension, stroke, and seizures

Sources:

¹"Premature ageing in the Homeless Population," Depaul Health Initiative February 2018.

²"Boston's elderly homeless sicker than others, research finds," Science Daily, 13/9/2011.

³"Geriatric Conditions in a Population-Based Sample of Older Homeless Adults," The Gerontologist, August 2017.

Old Before Their Time, *continued*

stress comes on the heels of things like childhood trauma, violence, poverty, and abuse. Worldwide, study after study shows people who are homeless have higher rates of mortality, disease, and hospitalisation. Sometimes – *but not always* – compounded by addiction to drugs or alcohol, the struggle for survival is fertile ground for the speeded-up ageing process called ‘weathering.’

Scientists have recently found the effects of social stress and shame are also punishing. Cliona explains. “Being in a position where you feel ashamed of who you are, or feeling that you don’t ‘rank’ in society – as homeless people so often tell us they feel – this actually causes chronic inflammation that can accelerate ageing.” Combined with results from a 2018 study by the Depaul Health Initiative showing people who are homeless to be among Ireland’s most isolated, the connection to early ageing is doubly clear.

Coming together for people like Jonny

It’s unsettling to picture anyone on the streets, losing years of their life in a matter of months. The good news is that the inclusion health service is helping people to come back – and if funding continues, it could become a model for the world. Inspired by work in the UK and Boston, Cliona found “it’s a bit like geriatrics. In older people they have multiple chronic health conditions and we need to think about their capacity, and their housing, and are they going to be able to manage. Homeless



“One of the things that still strikes me is that homeless people often look really old. They have the diseases associated with old age, far too young. It’s all the diseases you’d expect in somebody twenty to thirty years older, at a time when they’re most alone. We’ve seen dementia in homeless people in their forties.”

— Dr. Cliona Ní Cheallaigh, Inclusion Health Pilot Clinical Lead and Consultant Physician, St. James Hospital. Thanks to support like yours she heads up team meetings at MQI each week, as one of the world’s first inclusion health services for homeless people

people need that kind of care as well, but at a much younger age.”

To that end, as part of Cliona’s project, Merchants Quay Ireland hosts weekly inclusion health multi-disciplinary team (MDT) meetings. Mental health nurse Derek is one of MQI’s many staff who take part and often hold first-in-Ireland roles themselves, funded by the donations of people who want new solutions to homelessness and addiction. He describes the joined-up nature of the MDT. “Every service is there from the Mater and St. James hospitals, to several homeless hostels, lots of key staff from numerous agencies, the likes of MQI, Safetynet, Dublin Simon, DCC Healthlink, Depaul, and the Rough Sleepers team. We come together weekly under MQI’s roof to discuss vulnerable clients we are worried about and that may need to go into hospital, or who are coming out and need wraparound supports. It’s down to Cliona’s programme and MQI

donors that we can come together to avoid duplication of efforts, to share, and to get proper help to our homeless people who are in fragile health and sometimes, active addiction.”

A tragic time machine, reset

As MQI’s CEO, I have seen the effectiveness of this new inclusion service – two people who were made homeless last year come to mind. Their faces were freeze-burned, their coughs ragged, shoulders drooping, and physical states so frail. Today it’s a time machine reset: after inclusion healthcare and in accommodation, the man and woman look years younger, like any smiling couple you’d pass on the street. And it’s hard not to feel hope for Jonny. Somehow he made it to us at MQI, and thanks to trusted staff went straight into St. James’s A&E under the care of the inclusion health service and the follow-on care of the MDT. ■