

House Calls to the Homeless

BY JIM WITHERS, MD

It was over a year ago, but I remember it vividly. Mike led me under a dark bridge and into a different world. On my right shoulder I carried a backpack with a stethoscope, a blood pressure cuff, and a first aid kit. It was nearly midnight. I found my heart pounding with physical fear. *What must it be like to live and sleep out here?*

We climbed over a wall and down to a group of shacks (made of a wide variety of "borrowed" materials). As my eyes adjusted, I saw an older man preparing dinner over an oil drum fire. Up from the river came another man and woman who had just cleaned some fish. Gradually, I explained that I was a doctor and a teacher. I told them I needed their help to teach young physicians about life on the streets. Often, I admitted, we did not understand the challenges they faced. They soon opened up and told me of their bitter experiences. As they put it, "I'd rather die than go to the hospital. They treat you like dirt." I then began to really listen—and learn.

They told me of the anger and mistrust that they confront in hospital emergency departments, security guards who ensure homeless persons "don't make trouble," the rough handling they receive from healthcare professionals who barely conceal the prejudices. In time I grew to understand the sad and painful chasm that separates doctors from persons who live on the streets.

Dr. Withers (at center in photo), a physician at the Mercy Hospital of Pittsburgh, coordinates teams for the unsheltered homeless. This program, Operation Safety Net, was presented a 1994 CHA Achievement Citation award.



The impetus for our work came from homeless persons who were living in a shelter at a clinic in which I served. These men and women went out into the cold to put blankets on the unsheltered homeless to keep them alive. Now we have teams of volunteer nurses, persons who had been homeless, students, and others who coordinate the program. Several of the volunteers came off the streets to join us.

RICHIE

Richie lived in a pile of garbage and broken bottles. He drank heavily and ceased to care. We would visit him for hours. He cherished the human contact. Eventually Richie showed us pictures of his mother, which he carefully stored near his blankets. One evening, we cleaned his corner, filling 20 bags with putrid filth. He held a flashlight for us and helped us smooth out a new mat to sleep on. A few days later, we returned to cut his hair and give him a tetanus shot. A week of sobriety, then another, finally led to the day

when we helped Richie find housing in a shelter for older men. I will never forget the day we drove back with him to recover his mother's picture from the refuse pile that had once been "home."

MARY

I recall seeing Mary late one night on the street outside McDonald's when the temperature was about 5° F. She had on tight shoes, with her toes stick-

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ing out. We walked inside and found a corner where we could sit. I took off her shoes only to find signs of early frostbite. Mary refused to seek shelter, and I doubted anything was available. As it grew later, I began to feel desperate. She finally told me there was a minister south of Pittsburgh who might let her stay in his basement. "Just let me pick up my things," she said, "then you can give me a ride."

Every doorway in the area must have had a bag from which she pulled some important belonging. With great dignity, Mary finally picked up three full bags and carried them to my van. Off into the night we drove. And drove. About 2 AM we found the home of my now-favorite minister. Another problem settled—for the moment.

DANGER

I didn't realize how close I had come to dying. For months we had listened to George's bragging about his survival skills in Vietnam his skill with weapons. By his account, he had several guns stored nearby, but we doubted his veracity. We soon learned otherwise. One evening, George was drunk. Mike and Dan went ahead into the shacks and I came a few minutes later. As they describe it, George heard me coming down the ladder to their site, pulled a shotgun out of nowhere, and in one smooth movement pointed it at my back. Dan quickly intervened and disaster was avoided. Several other incidents have led us to adopt safety procedures, and we often wear bullet-proof vests.

GRANDPA

"Grandpa" has been a great teacher. I am convinced that God placed him on this earth, in part, to force me to learn that our control, our "goals," are not what really matters in the healing relationship. Love is the true healer, from which other healing is possible.

Grandpa, who is 79 years old, sleeps in doorways throughout town. He carries all his possessions in two heavy bags as he shuffles along, keeping appointments with soup kitchens and cats he must feed. His legs are swollen, and his right ankle is always foul with infection. Yet he knows fine music, foreign languages, and poetry. Grandpa often stoops over to catch his breath, but when you speak with him, there's a twinkle in his eye and deep affection in his voice.

I'm his doctor. I do what I can for him. How many times have I begged Grandpa to go to the hospital? How many hours have I spent plotting a better life for him? Just when I feel I must give up in frustration, he gives me a book he's been saving for me or a small present for one of my boys. Each time I see him, I dress Grandpa's wounds. Because I have provided care to him on his own

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terms, his legs have finally healed. But, in the end, it seems, he can never be held within the bounds of society's expectations. His strength, captive in a homeless old man's body, is supreme. Our love and my understanding of its power slowly grow.

WEATHER

I used to really enjoy listening to the rain pounding on the roof outside my bedroom window. Now I invariably visualize people I know who are out there sleeping in it. Unlike us, street people are at the mercy of the weather. In the muggy heat of summer they sneak into fountains when the police aren't watching. It only gets worse in the winter. There are days when I just can't imagine how Cave Man or poor little Eva is staying alive. In the late winter, a group depression on the streets goes up and down with the temperature. Tempers flare, language becomes a bit more colorful. If it warms up briefly then turns cold, people feel like they've been cheated. You can see the desperation in their eyes and the raw needs they have. When you can do no more, love goes a long way.

BROTHERS AND SISTERS

The faces and the experiences I have known in the alleys, on the grates, and under the bridges move past my mind's eye—the angry young men who struggle for escape and dignity in a world of humiliation and addiction, the elderly schizophrenics who live in their own world of fear yet so often open up when met compassionately on their own terms, the women who are victims in so many ways, and the children.

It seems unreal in a city with the world's most advanced medicine that we are surrounded by those with frostbite, with maggots in their wounds, those who die alone, but more important those who have been lost to our "community." What I have learned most deeply is that they *are* people. Each has his or her own story. All we need to do is sit down and listen.

Working on the streets with the homeless has affected my perceptions. They are us and we are them. The street is a terrible crucible for those who have little or no support. Yet there I have found strength and friendship. Through these interactions, we are forced to let go of what we *think* we are. The doctors and nurses experience themselves outside their institutions, free to listen and reconcile with their "lost" brothers and sisters. The unsheltered homeless slowly venture out of their protective armor of bitterness, replacing it with validation and hope. A vision emerges, one that is strong, affirming, and equal—the essential place to begin all healing—healing for all of us. We who call ourselves healers must find that place, be it under a bridge or in a hospital. □