Please Join Us
Health Care Without Walls is turning 20 in 2019!
Mark your calendars for October 3, 2019 when we will celebrate 20 years of service at our gala event
Health Care UNSCRIPTED: Building Bridges for Women in Need
Honoring the work of Dr. Roseanna Means
For tickets and more information visit: www.healthcarewithoutwalls.org/events/HCW20gala

In 1999, the Columbine tragedy occurred. The US Women’s Soccer team won the World Cup. The Pokemon craze was in full swing. Yogi Berra said, “When you come to a fork in the road, take it.”

During my second year as a medical resident at the Brigham and Women’s Hospital and a Fellowship in Cardiology secured, I answered an international call for help for Cambodian (Khmer) refugees who had fled the murderous Pol Pot being held in refugee camps in Thailand. After 3 months bearing witness to tragedy yet inspired by the Khmer’s resiliency and courage, I returned to Boston and changed my career path to “health justice” for the disenfranchised. Women of Means sought to give voice and access to women left out of health care by “one size fits all” systems that ignored social determinants of health. Over the past 20 years, and a name change to “Health Care Without Walls,” we have gone from a one-doctor outreach to a coalition of programs with extraordinary staff that embrace women of all ages and descriptions, meeting them in their safe places, healing, empowering, and respecting each one. We are not just Health Care Without Walls. From tiny frail newborns to wobbly 90-year-olds, we are often the only family they have, their emotional home, the place where, to paraphrase Robert Frost, when you go there, they take you in.

Please join us on October 3rd to celebrate our 20th anniversary and to help us continue to be the caring and compassionate program that these forgotten and broken women turn to for help.

— Roseanna Means, MD

**Trends in Homelessness**

<table>
<thead>
<tr>
<th>Percentage of women in homeless population</th>
<th>1999</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>20%</td>
<td>50%</td>
</tr>
<tr>
<td>Male</td>
<td>80%</td>
<td>50%</td>
</tr>
</tbody>
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Sources: U.S. Census Bureau, 1999-2018.

**A Look Ahead to the Next 20 Years**

It is now accepted doctrine that health outcomes are linked to social determinants including housing, food security, personal safety, and transportation. Yet each of these factors represent overwhelming challenges to those experiencing homelessness. Today, Medicaid is introducing flexible spending programs where Accountable Care Organizations (ACOs) can work with Community Partners (like HOWW) to help address social determinants of health to both improve health outcomes and reduce costs. This represents an opportunity to achieve long-term sustainability and support for the work we do—work that has been proven to improve the lives of women in need.

To fully participate in this new model of care, we must invest in the necessary infrastructure to establish HOWW as a Community Partner in government health care contracts. We have recently engaged with CSPIEDH to help chronically homeless adult women find and remain in permanent housing, and we are exploring ACO partnerships to meet the growing demand for our services.

Yes, demand is growing—we see it every day. But homeless women remain invisible and under-resourced when it comes to safety net services. In fact, there is a bill sponsored by State Rep. Katey Hogan pending in the legislature to establish a Special Commission to Study the Issue of Women and Homelessness (Bill H130). If passed, the commission will study and report on the number of homeless women (not currently measured); conduct a community needs assessment; and make recommendations regarding homelessness prevention, improving shelters for women and families, increasing permanent housing opportunities, and ensuring that homeless women have access to a full range of health care and social services.

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**President’s Corner**

In 1999, Dr. Roseanna Means founded Health Care Without Walls in 1999 as “Women of Means” with the aim of helping homeless women get the “meas” to move forward through an innovative approach that was personalized, gender-specific and trauma-informed. Despite the myriad of health care services in Boston, homeless women were still falling through the healthcare safety net, so Dr. Means made the choice to be their voice and advocate for a care model that emphasized context and accessibility. Dr. Means remodeled the assumptions and expectations embedded in traditional health care delivery into life-saving and cost-effective solutions that preserve each woman’s dignity and respect.

What have we done in 20 years?

Had more than 220,000 encounters helping women and families

Helped 130 moms and babies since the inception of Bridges to Moms

Distributed over 101,478 doses of cold, cough, and allergy medicine

155,012 doses of pain relief (acetaminophen, ibuprofen, aspirin, etc.)

167,160 vitamins | 91,476 cough drops | 26,209 bandages

12,200 diabetes tests | 25,209 applications of muscle gel

5,000 diapers for Bridges to Moms babies

... and counting!

At Health Care Without Walls, our mission is to improve the lives of women and families who are homeless or marginally housed through quality primary care, education, and advocacy.

From a one-woman show, our mission is to support the lives of women and ensure the necessary infrastructure to improve the lives of women in need.

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A Look Back: 20 Years of Serving Women in Need of Compassionate Health Care

To improve the lives of women who are homeless or marginally housed through quality health care, education and advocacy.

Education

The primary objective of the training program is to teach future caregivers to recognize the social, institutional, linguistic, emotional and cognitive barriers that homeless women face when trying to access “traditional” care. Our interdisciplinary training program has taught hundreds of nursing and medical students, and medical residents to care for homeless women with an understanding of the pragmatic and emotional issues they face every day.

“When your next meal is not guaranteed being selective about what you eat is a luxury you can’t afford... my eyes were opened to issues of a homeless patient.”
- medical student following elective rotation with HCWW

Advocacy

We advocate for women experiencing homelessness to give voice to their unique struggles — from more complex gender-specific healthcare needs to matters of personal safety. Too often, homeless women are invisible to the public, so we speak out for them — at conferences, training sessions, corporate meetings, cocktail parties — anywhere we can shed light on the unmet needs of homeless women.

Every day our clinicians advocate for their patients. We make and attend medical appointments for follow up care. We stand in line at the housing office, arguing for a safe, clean placement for a new mom and her newborn born with life threatening complications.

Women who come to us know they are loved, and they are not alone.

Research

We have 20 years of data demonstrating the improved medical outcomes of our model of care. We also track factors related to social determinants of health — housing, food security, personal safety, transportation, and more. We use this data to guide our caregiving and inform policy makers on what resources are needed to improve health outcomes for the poor and homeless. Research projects have covered topics ranging from shelter-based health care, primary care access, and aging in shelters.

Read the most recent White Paper released in 2019:
The Status of Homeless Women in Massachusetts: Are We Adequately Addressing the Social Determinants of Their Health?

— Roseanna H. Means, MS MD, Jo-Anna L. Rorie, DVM MPH, PhD, Paula A. Marta, BS