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UNSHELTERED LIVES, UNMET NEEDS



LIFELONG LEARNING IN CLINICAL EXCELLENCE
| JUNE 24, 2025 | 4 MIN READ

By Nagina Khan, PhD, University of Kent

The complexity of homelessness, particularly for women who are unhoused, became blatantly evident to me during my time volunteering as a researcher at the [Compass Food Bank and Outreach Centre](#) in Ontario, Canada. This organization provides critical support in an area where wealth and poverty

TAKEAWAY

When caring for patients who are unhoused, addressing food and housing insecurity is just as important as providing medical treatment. Prioritize building trust and ensuring psychological safety through trauma-informed

interactions and a nonjudgmental approach.

support in areas where homelessness and poverty exist side by side. While the affluent parts of the community are visible, there are pockets of poverty that often remain hidden, creating a challenge for services aimed at helping those in need.

This situation emphasizes the complexities of addressing homelessness and poverty, particularly among women who may face a different set of vulnerabilities than men. During my time at the Centre, one duty I had was in the food bank's shopping area for people in need. One day I was paired with a woman to be her assigned shopping assistant. We moved through the aisles, selecting items and discussing meal ideas. While we were chatting, she shared that she couldn't take perishable items. I couldn't understand why, as I had simply assumed she had a home. Then she told me she'd recently left her last apartment after enduring escalating harassment and had no permanent home. She'd been unable to afford another place to live. Each time she tried to secure temporary shelter, she was subjected to unsolicited male attention. Whether it was inappropriate comments from men at shelters, unwanted sexual advances, or being followed on the street, she was constantly in fear.

This fear was compounded by the physical and emotional toll of homelessness; she felt trapped in a cycle of vulnerability and isolation. I didn't know how to help her. As a woman, I felt a deep empathy for her situation; it struck me how easily I could find myself in a similar position. This experience highlighted the harsh realities that women who are unhoused face, realities that are often shaped by gender-specific challenges including sexual harassment, assault, and exploitation. This can make it more difficult for women to access support services.

This conversation underscored how the challenges of women who are unhoused are compounded by issues of safety, gender-based violence, and social stigma. Unlike men, these women often find themselves navigating spaces that should offer shelter and safety, only to be faced with the constant threat of harassment and exploitation. For many women finding a safe place to sleep or access basic services can feel like an insurmountable challenge.

My encounter with the woman at the food bank highlighted the unique vulnerabilities of women who are unhoused that all healthcare professionals need to be attuned to.

It's imperative to know that when women who are unhoused seek medical care, they may also need support securing food and safe housing.

It made me realize that caring for those that are unhoused requires a compassionate and gender-sensitive approach. The table below highlights a few targeted approaches that healthcare professionals can use to help address the unique vulnerabilities faced by women experiencing homelessness.

Approaches for healthcare professionals when caring for patients who are unhoused

1. Adopt a trauma-informed approach in all interactions.

Understand that many people experiencing homelessness have a history of violence, abuse, and/or trauma. Prioritize emotional safety, build trust, and empower patients by using sensitive language, offering choices, and being mindful of body language and tone.

2. Create safe, private, and welcoming clinical environments.

Ensure there's a private room to speak with patients. Consider having female staff available upon request and reduce environmental triggers that could retraumatize patients.

3. Screen for gender-based violence and housing instability.

Integrate questions about housing security and personal safety into patient assessments. Use nonjudgmental, open-ended questions to identify if patients are facing domestic abuse, sexual exploitation, or unsafe housing conditions.

4. Collaborate with social services and shelters.

Build strong referral networks with local shelters, housing services, mental health providers, and legal aid programs, as well as those that specifically support women. Keep updated resource lists readily available in your practice.

5. Ensure access to reproductive and preventive healthcare.

Prioritize services like STI screening, contraception, prenatal care, and access to menstrual hygiene products. These services are often overlooked or inaccessible to those who are unhoused but are essential for their health and autonomy.

6. Train staff on gendered aspects of homelessness.

Provide professional development opportunities that address the intersection of homelessness, gender, mental health, addiction, and trauma. Awareness of these overlapping issues can improve empathy and service quality.

7. Respect patient autonomy and avoid assumptions.

Avoid stereotyping or making assumptions about patients based on appearance, housing status, or behavior. Respect a patient's choices, even if they don't align with conventional care pathways.

8. Advocate for policy change and systemic improvements.

Advocate for systemic changes like increasing funding for mobile clinics, trauma-informed training, and gender-specific health services. Healthcare professionals can be powerful voices in shaping public health policy.

By understanding these risks and challenges we can provide better support for these patients and more opportunities for empowerment. We must continue to be proactive in identifying the signs of distress, offer trauma-informed care, and ensure these populations have access to the services and resources they need. We can provide a bit of dignity, safety, and hope, which every person deserves.

[Click here to learn more about the author](#)

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