Groundswell!

Homeless Health Peer Advocacy

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Our Beliefs:

- **Homeless people need to be part of the solution!**
- **There is no Them – only Us!**
- **Involvement works!**
- **We believe in people!**
- **The whole community benefits when we reduce homelessness**.

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What's the Problem?

Homeless people:

- **Have poor health**
- **Health costs are greater**
- **Need support to access services**

Homeless Link 2010

'*The Health and Wellbeing of People Who Are Homeless*'

- 80% have a physical health need
- 40% had attended A&E in the past six months
- 30% had been admitted to hospital in past six months

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Common Barriers

- Chaotic lifestyle - problems around substance misuse and/or mental health
- Feeling they have been let down by services in the past
- Low self confidence, feeling people look down on them
- Lack of ID and proof of local connection
- Health is a low priority, there are other things that come first

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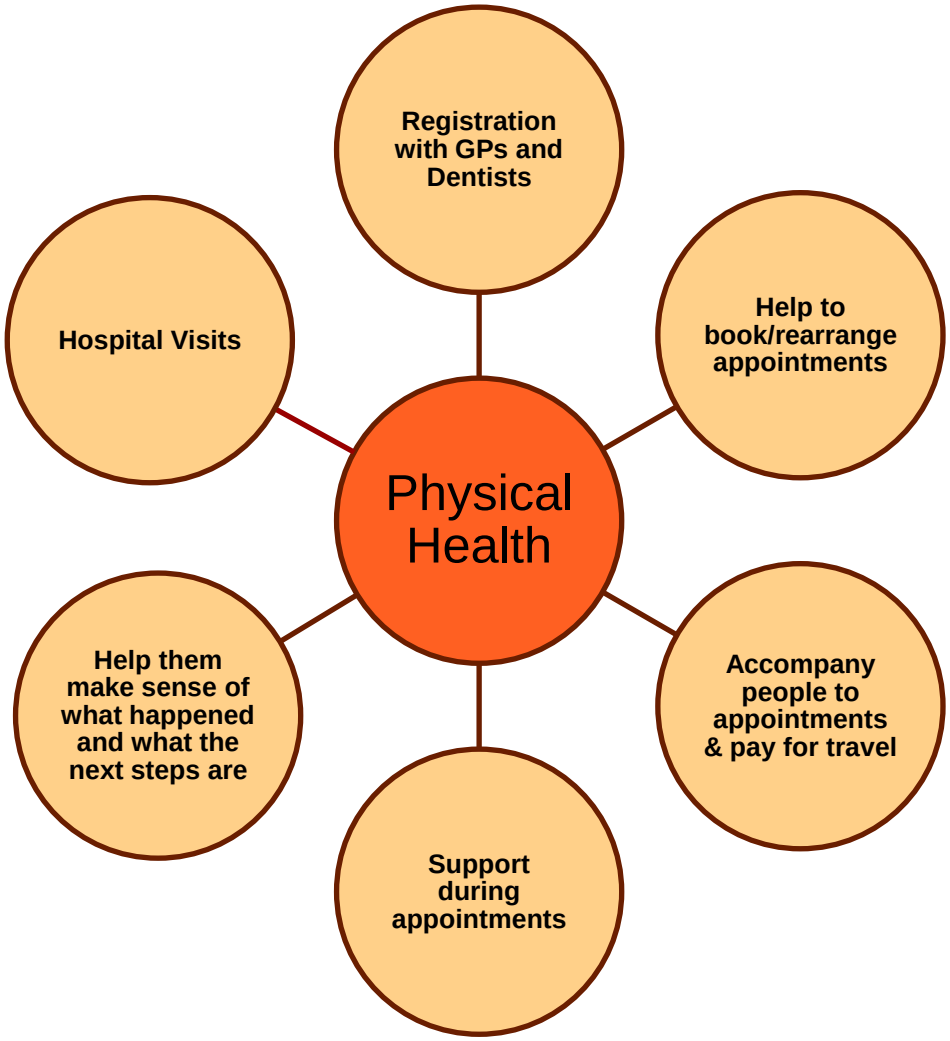
What we do



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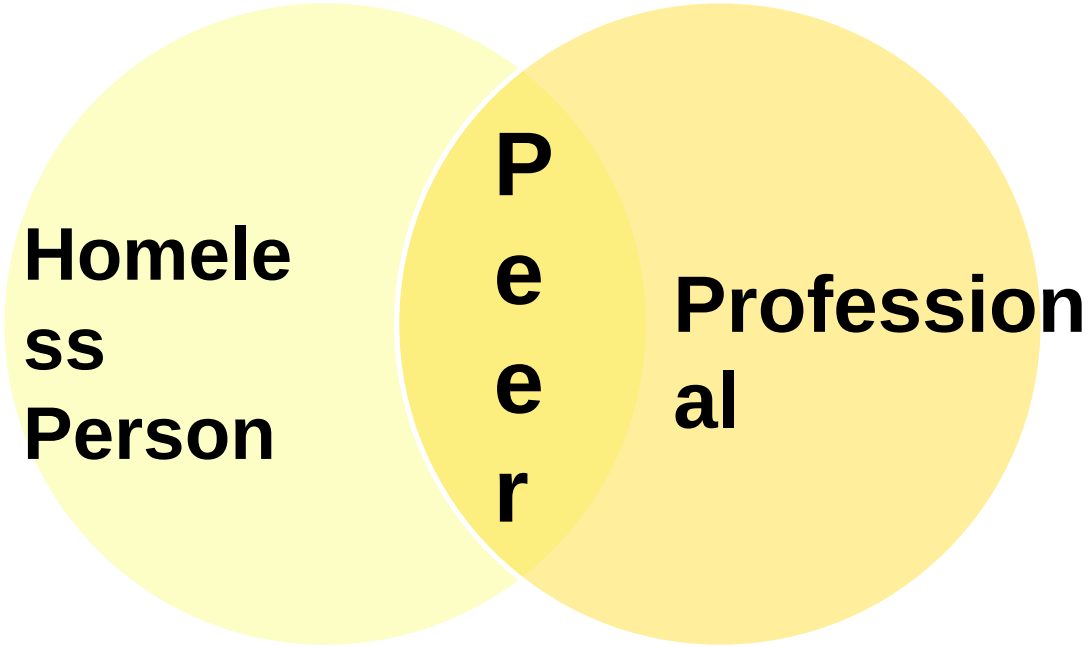
Why Peers?



- Trust – been there done that, understanding
- Trust – don't feel judged
- Trust - want to trust someone, but not 'authority figure'
- Trust – not a peer's job, but because they care
- Trust – through word of mouth
- Inspiration – you can escape

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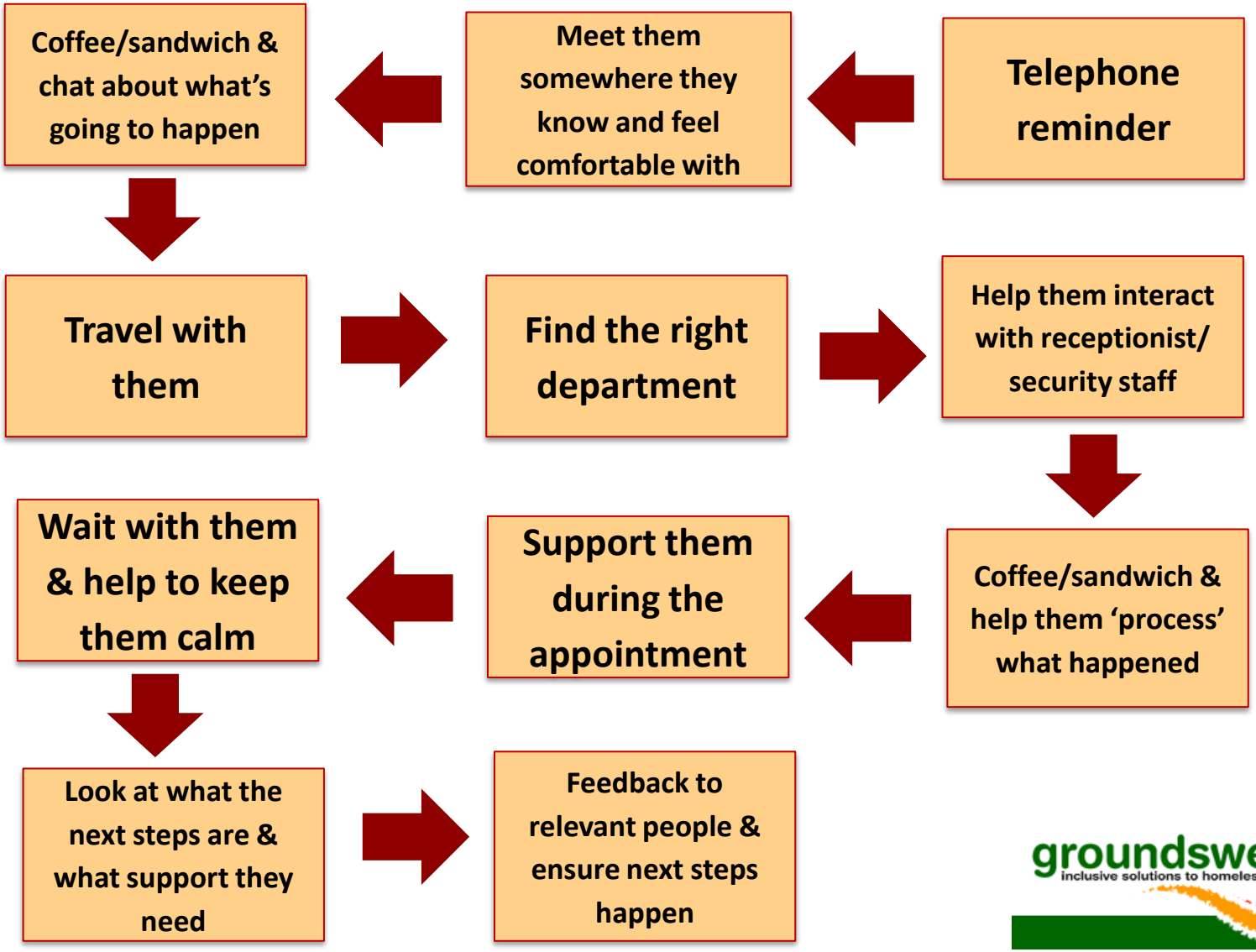
An Average Appointment



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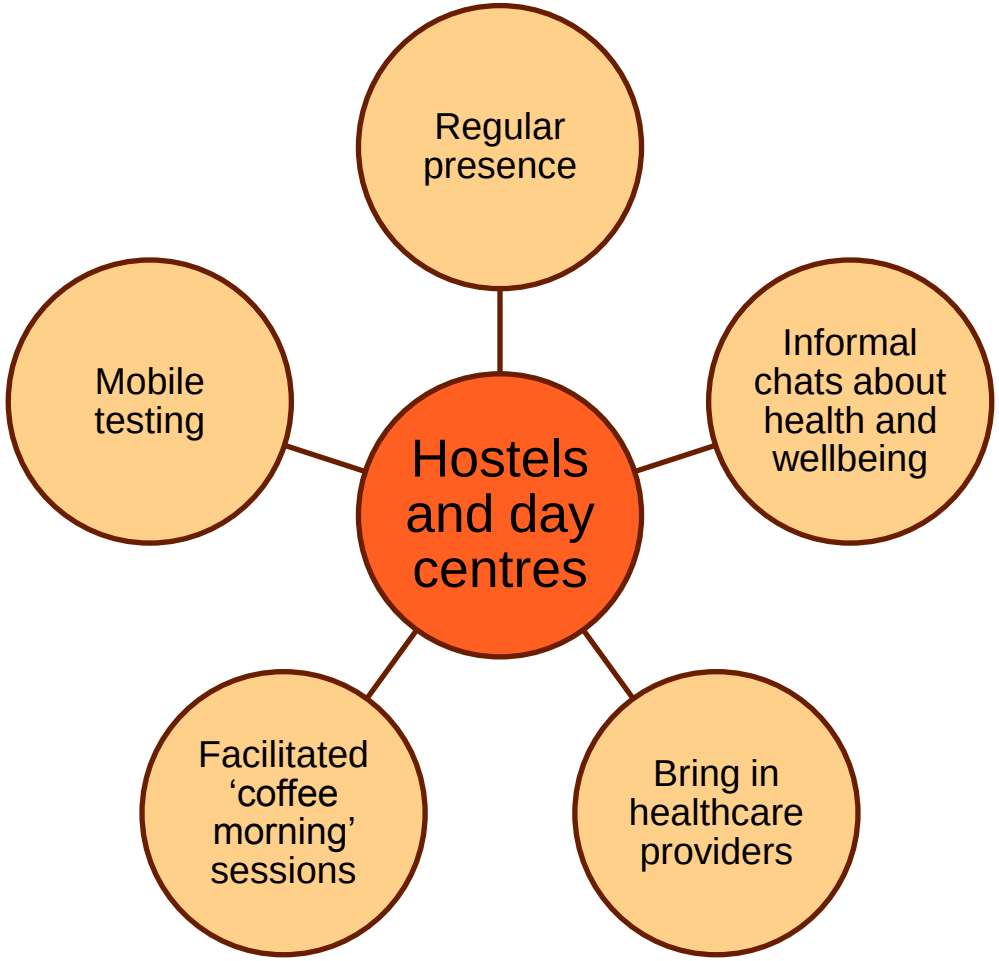
Health In-reach



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Where do we work?

- Westminster
- Hammersmith and Fulham
- Camden
- Lambeth
- Kensington and Chelsea

Special projects

- Street Med
- Hep C
- TB
- Hospital Discharge

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Supporting our Peers

1. **Training –** advocacy skills, health knowledge
2. **Support**– one to one and professional development
3. **Clinical Group Supervision** – reflection, group
4. **Expenses** – benefits, personal finance
5. **Coaching** – progress towards personal goals

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Want to know more?

Kate Bowgett:
kate.bowgett@groundswell.org.uk

David Hughes:
david.hughes@groundswell.org.uk

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