

Client-Provider Relationships in a Community Health Clinic for People who are Experiencing Homelessness


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Study Overview

- Purpose
 - To critically examine client-provider relationships within the culture of a community health clinic for people experiencing homelessness
- Research questions
 1. How are client-provider relationships enacted within the culture of the clinic?
 2. How do clinic-level and broader social and health policies shape relationships in this context

Background

- The scope of homelessness
- Barriers to health care
 - Attitudinal



Review of the Literature

- Key Findings
 - Therapeutic relationships – not just in Nursing
 - Caring and the disenfranchised
- Gaps
 - Power is recognized, but how is it broken?

Critical Theory

- To empower, or to create a space for people to empower themselves?
- Critical Ethnography
 - Describing culture versus changing culture

Sample & Methods

- Document Review
- Participant Observation
- In-Depth Interviews
- Focus Groups


FINDINGS



“I know we have personality clashes and we definitely, [provider] and I don't get along but under circumstances one is supposed to be the professional and if I had been treated by a professional, which she is supposed to be, then I would treat her in such a manner but she seems to, because we have this clash, put me on the bottom of the list, make me wait longer.”

Nurse as Resource Manager

- Deny request
- Increase processes
- Enhance controls




Nurse as Door Opener

- “[Providers] go to any lengths to [help people], and that’s including breaking policy and because it’s always the thought of, oh just this one time you know. And the problem is there are grey areas you know, there just are, especially with the population that we deal with, there is no black and white. So it’s very difficult to create a policy that fits every single [client]. The problem is, when you find a client that doesn’t quite fit the policy, so you try to mould the policy to fit the situations, then it opens up to the next one that comes in and it kind of broadens and broadens and broadens until finally, there’s really no point in even having the policy anymore.” - Manager

Clients as Healing

- Following the plan
- Doing better
- Being sober



Client as Parasites

- “I find individuals that um, feel that they have a right to treat you and others as, not really a slave but not really with much respect either and more of, you’re there to serve them and...there’s no real respect in the way, there’s no ‘please’, there’s no ‘thank you’, that would be the client that I tend to have to breathe in through the nose, out through the mouth sort of thing.”

Discussion

- Three tough questions
 1. Who works for who?
 2. What (resources) do people deserve?
 3. What burden do nurses carry?

Implications

SOLIDARITY

- Is Nursing ready to go there?

Questions?