

## Addressing Homelessness as a Public Health Concern in the Context of COVID-19: Experience from the "Udayam Project", Kozhikode

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### ABSTRACT

Homelessness is a public health concern globally. Rehabilitation of the homeless is a challenging one, especially in low-income countries. Authors have briefed the magnitude of communicable and non-communicable diseases including mental health problems among homeless. Collaborative efforts of the government and non-government organizations could manage these issues, and rehabilitation services were provided to the homeless during COVID-19 in the Kozhikode district of south India.

**Keywords:** *Rough Sleepers, Communicable Disease, Mental Illness, Street Dwelling, Substance Abuse*

The spread of COVID-19 infection in India seriously affected all the vulnerable communities, especially the homeless (Bhattacharjee & Sattar, 2021; Hensman, 2020). Controlling infectious diseases among them is complex, and it looked tougher during the COVID-19 pandemic. Though, appropriate shelter and other rehabilitation measures are essential to address the problems of the homeless, there is a dearth of rehabilitation services for the homeless in Indian states (Malik & Roy, 2012; Moorkath et al., 2018). In this article, authors share their experiences from a northern district of Kerala on how COVID-19, other health issues and rehabilitation of the homeless were addressed during the COVID-19 pandemic.

### **Intervention: The Udayam Project Model**

Foreseeing the challenges in preventing and controlling COVID-19 among the homeless and protecting their rights, the Kozhikode district administration of Kerala state of south India took vital steps. The homeless were rescued from the streets to the camps arranged in various schools and colleges from 24th March 2020, when the Prime Minister of India

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Received: June 30, 2023; Revision Received: July 30, 2023; Accepted: August 04, 2023

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declared a nationwide lockdown. The camps were managed with the support of various government departments and non-government organizations (NGOs). The main goal in the initial phase was COVID-19 prevention and control. But at this point, the district administration understood the huge gap in care for this cluster of socio-culturally different groups with many health care and related issues unattended and the system could not leave them on the street again. Considering the various needs and problems of the homeless, the district administration started a comprehensive rehabilitation project named "Udayam" (KP, 2021; Reporter, 2020; Society, 2022). Later, permanent residential facilities called "Udayam Homes" were established to facilitate and ease their comprehensive rehabilitation. Kind-hearted persons and various organizations majorly financially supported this project.

Food, clothing, bedding, toiletries, health care, family reunion, employment facilitation, identity card facilitation (such as Aadhar), vocational training, hostel facilities for working population, bank account opening facility, counseling and similar need-based services were provided. During the first, second waves of the COVID-19 spread and to the date, the district administration could support more than 1600 homeless from various occupational, gender, cultural, language, and religious backgrounds. They were predominantly males belonging to different states of the country. The age range of the homeless was 17-93 years. Currently, all four Udayam Homes can accommodate 400 men ; even now, more, than 250 men are still under the protection of the district administration (Society, 2022). Regular (daily basis) visit of the medical team was arranged initially. Outpatient and inpatient treatment facilities were provided from the nearby government hospitals. A referral system has been developed to provide health care services to Udayam Home residents. Predominantly, qualified professional social workers, registered nurses and volunteers facilitated the entire services.

### ***Morbidity work up***

The authors could find the medical records of 400 residents and examined the available details (from July 2020 to September 2022). It is observed that; around 25% of the institutionalized homeless had either communicable diseases, non-communicable diseases, mental illness or substance abuse disorders; independently or as comorbidity. Various kinds of disabilities (hearing, vision, orthopaedic, neurological, mental illness, intellectual functioning and multiple disabilities) were also observed (6.75%) among the residents. Records show that there were 51 deaths happened so far. The majority of the deaths happened at hospitals. Four deaths happened (only one death was due to suicide) at Udayam homes.

### ***Addressing COVID-19***

Concerning COVID-19 prevention, the residents were educated on the prevention of COVID-19, appropriate protective equipment was given, and periodic testing camps were organized. Though all possible efforts in controlling COVID-19 were carried out, 70% (280) tested positive for COVID-19. Later, half of the eligible (considering their age, post-COVID status, etc.) residents were vaccinated against COVID-19. Only six COVID-19-related hospital deaths were reported among the inmates.

### ***Communicable diseases***

About the infectious diseases, 11% (44) were found to have Tuberculosis (TB), 1.5% (6) was found to be positive for human immunodeficiency virus (HIV). Two were affected by syphilis, chickenpox and leprosy (0.50% each). Nine (2.25%) persons were diagnosed with

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Hepatitis B (HBV), and 2.75% (11) persons diagnosed with Hepatitis C (HCV) Viral infections. All who were diagnosed with infectious diseases were treated at appropriate medical facilities. A recent study found that the homeless persons suffer from various infectious diseases such as TB, leprosy, malaria, and most of them are undiagnosed and untreated or partially treated (Chinnaraj et al., 2021). Hence, screening for HIV, TB, HCV, HBV and syphilis was ensured for all the new admissions, with their consent.

### ***Non-communicable diseases (NCDs) and multimorbidities***

Many were on treatment for various non-communicable diseases such as diabetes (10.5%), hypertension and other cardiovascular diseases (17%), cancer (1.5%), chronic obstructive pulmonary disease (COPD) (10.25%), dental problems (5.5%). Some underwent cataract surgery (2.75%) and other major surgeries (cardiothoracic, for hernia etc.) during this stay.

### ***Mental health interventions***

The Udayam home residents screened predominantly for mood disorders and substance abuse disorders. Mental illness (18.5%), intellectual disability (1%), dementia (1.25%), nicotine abuse (42%), alcohol abuse (32%) and cannabis abuse (6.75%) were diagnosed in the residents. Inmates with severely psychotic symptoms or with suicide thoughts were admitted to the nearest government mental health facility and managed.

Currently all new admissions are screened by nurses or qualified social workers for health care problems including substance abuse, withdrawal symptoms and mental illnesses using standard screening tools and referred to the nearest government hospitals as and when required.

### ***Health interventions and service providers***

Considering their varied health issues, regular screening from community dentistry department government dental college, community medicine department of govt. medical college, community ophthalmology services from nearest government general hospital were arranged. Appropriate treatment and minor procedures were provided within the Udayam Homes. Other major medical or surgical interventions were carried out from the government hospitals. Psychiatrists in the district mental health program (DMHP) team are regularly visiting (once a month) the Udayam homes and appropriate mental health treatment gets initiated.

## **CONCLUSION**

The authors have observed that communicable and non-communicable diseases, mental illness, disability, substance abuse-related and socio-legal issues are high among homeless which is a major social and public health concern. This underscores the need for comprehensive rehabilitation services for homeless in India. During the COVID-19 spread, leaving hundreds of homeless in the streets would have had disastrous consequences and we believe that this intervention successfully averted the adverse outcomes to a large extent. In the authors' opinion, the Udayam Project could successfully address the problems of homeless to a great extent in terms of health care and facilitating rehabilitation services within their limited resources. All the infection control measures, health care and rehabilitation services implemented by the Udayam project were supported by various government facilities and NGOs, which seems to be a replicable model for the country. "The Persons in Destitution (Protection, Care and Rehabilitation) Model Bill, 2016, by the government to address the issue of chronic beggary and homelessness in India needs to see

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the light of the day (GOI, 2016; Raghavan & Tarique, 2018). The authors suggest the need for projects in line with the Udayam for better public health, rehabilitation, protection of human rights and ensuring the quality of life of homeless in urban and rural areas.

### REFERENCES

- Bhattacharjee, S., & Sattar, S. (2021). COVID-19 pandemic and the poor in the urban spaces of India with special reference to Mumbai. *Equality, Diversity and Inclusion: An International Journal*.
- Chinnaraj, M., Logaraj, M., John, K., & Ramakrishna, B. S. (2021). Prevalence of Presumptive Pulmonary Tuberculosis among Residents of Homeless Shelters in Chennai Corporation. *Annals of the Romanian Society for Cell Biology*, 5993-6001.
- GOI. (2016). *The Persons in Destitution (Protection, Care and Rehabilitation) Model Bill, 2016*. Retrieved 09/11/2022 from [https://socialjustice.gov.in/writereaddata/UploadFile/Model%20Bill%20%20\(with%20Screen%20Reader%20access\).pdf](https://socialjustice.gov.in/writereaddata/UploadFile/Model%20Bill%20%20(with%20Screen%20Reader%20access).pdf)
- Hensman, R. (2020). The COVID-19 lockdown in India: a predictable catastrophe for informal labour. *Global Labour Journal*, 11(3).
- KP, H. (2021, 02/07/2021). Udayam: In Kozhikode, a local initiative takes hundreds of homeless off the streets. *The Indian Express*. <https://indianexpress.com/article/india/kerala/udayam-home-project-kozhikode-destitute-homeless-street-dwellers-7386265/>
- Malik, S., & Roy, S. (2012). A study on begging: A social stigma—An Indian perspective. *Journal of Human Values*, 18(2), 187-199.
- Moorkath, F., Vranda, M. N., & Naveenkumar, C. (2018). Lives without roots: Institutionalized homeless women with chronic mental illness. *Indian journal of psychological medicine*, 40(5), 476-481.
- Raghavan, V., & Tarique, M. (2018). Penalising Poverty. *Economic & Political Weekly*, 53(22), 27.
- Reporter, S. (2020, 15/7/2021). Rehabilitation centre for city's rough sleepers opened. *The Hindu*. <https://www.thehindu.com/news/cities/kozhikode/rehabilitation-centre-for-citys-rough-sleepers-opened/article32092354.ece>
- Society, U. C. (2022). *What is Udayam*. Retrieved 19/02/2022 from <https://www.udayam.kerala.gov.in/>

### Acknowledgment

The author(s) appreciates all those persons, government, and non-government organizations who supported the project.

### Conflict of Interest

The author(s) declared no conflict of interest.

**How to cite this article:** Ragesh, G., Sivadas, S., Chandni, R. & Rahim, A. (2023). Addressing Homelessness as a Public Health Concern in the Context of COVID-19: Experience from the "Udayam Project", Kozhikode. *International Journal of Indian Psychology*, 11(3), 1463-1466. DIP:18.01.141.20231103, DOI:10.25215/1103.141