

HEALTH PROMOTION AND HOMELESSNESS.

CO-DEFINING CHALLENGES, CO-DESIGNING METHODS, CO-CREATING SOLUTIONS

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INTRODUCTION. Access to safe and affordable drinking water, sanitation and hygiene (WASH) for all is needed to safeguard human health, it is high on societal and political agendas. Vulnerable communities at the margins of rich societies, including people experiencing homelessness, however, are often underserved and overlooked. For them, safe WASH, and the realization of the Human Right to Water and Sanitation (HRTWS) is often a dream rather than reality. For them, shelters and public restrooms are often the only option to WASH.

OBJECTIVES. Our ongoing exploratory high risk, high gain research in Bonn, Germany in collaboration with two non-profit homeless service organizations and decision-makers, funded by the ITC Blue Skies Research Fund, aims to

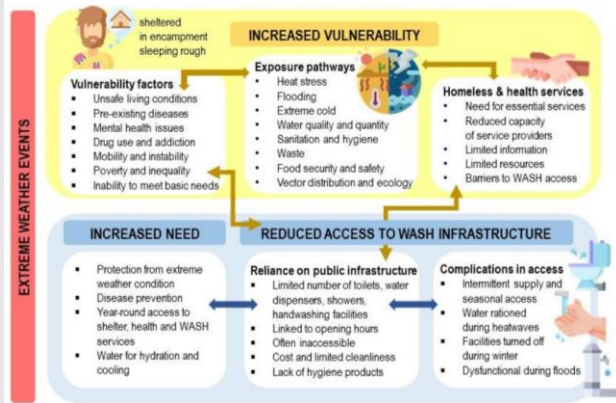
- i) understand challenges that people experiencing homelessness face regarding WASH insecurity, by
- ii) involving them as key stakeholders to co-design methods most suitable to capture the challenges they are facing, and ultimately
- iii) jointly identify interventions with inclusive mapping.

CO-DEFINING CHALLENGES

"Freely accessible toilets are missing in the inner city area, where there are a lot of people. There are just two toilets that we have here. Of course they are not hygienic, they are not cleaned regularly, and the question for me is whether I would rather poop outside because I find it more hygienic and cleaner. It is extra difficult for women." (e1)



WATER, SANITATION AND HYGIENE AMONG PEOPLE EXPERIENCING HOMELESSNESS



CO-DESIGNING METHODS: Testing & evaluating feasibility of methods involving people experiencing homelessness, social workers, and decision-makers, including (walking) interviews, mental mapping, photovoice, shadowing, infrastructure inspection and mapping, group discussions, arts-based research, collaborative mapping, expert interviews

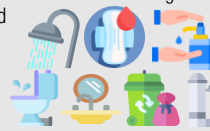


RESULTS. Public drinking water fountains, toilets, handwashing facilities, and showers are scarce, frequently unavailable, often pose safety and cleanliness issues, and access to non-public facilities may be cost-prohibitive for homeless populations. Those sleeping rough, in encampments, or shelters, are often forced to limit water consumption, forego healthy hygiene behaviours, and resort to open urination and defecation, all of which carry health risks. Extreme weather events further complicate access and reduce the ability of service providers to deliver extra relief, creating a dual WASH and health burden. Data gaps and the lack of information on limited WASH access and health circumstances of people experiencing homelessness, further minimize their representation and consequently impose obstacles to improve their situation.

CO-CREATING SOLUTIONS.

People experiencing homelessness are valuable key informants. Their knowledge is vital for informing targeted health messaging and health-related interventions. They recommend

- Opening inaccessible WASH infrastructure in key locations;
- Constructing smart, integrated toilet-shower cabins equipped with hygiene items;
- Collaborative mapping of infrastructure, and publishing maps to find nearby facilities;
- Including lessons learnt in urban planning, considering impact of extreme weather events.



CONCLUSIONS. Much remains to be done to serve unhoused people better with WASH, particularly in light of growing urbanization, urban poverty, increasing levels of homelessness, decreasing public investments in health-promoting infrastructure, including WASH, and climate change. Our findings can be transferred to other contexts of urban homelessness where public WASH is not enough. The implications will vary with the number of homeless people compared to infrastructure available to them, their coping mechanisms, regional climate, resources invested in support services, the general attitude towards them, and collaboration with decision-makers.



CHALLENGES IN WORKING WITH HOMELESS PERSONS.

- Unwillingness to participate: fear of stigma/judgement.
- Unpredictable life realities, external locus of control.
- Information exchange: lack of concentration.
- Limited feasibility of methods: logistics, imposter.
- Social isolation, disconnect/distrust in authorities.

LEARN MORE ABOUT OUR RESEARCH ON WATER, HEALTH AND DECISIONS

Anthonj, C., et al., 2023. Invisible struggles: WASH insecurity and extreme weather among urban homeless in high-income countries. *Int J Hyg Env Health* 114285.
 Brown, J., et al., 2023. Rich countries lack universal safe water and sanitation due to social exclusion, racism, and inaction. *Lancet Global Health* 11(4), E606-E614.

