



Drug access among homeless men in Toronto

Stephen W. Hwang, MD, MPH; Jason L. Gottlieb, BA

Homelessness is a growing problem in Canada.¹ Homeless people face numerous barriers to obtaining health care and may be unable to get medications that are prescribed for them.^{2,3} We examined how frequently homeless men in Toronto did not fill their prescriptions, and the extent to which coverage by a drug benefit plan improved access to medications in this population.

We administered a health care questionnaire to a sample of 156 residents at the 2 largest shelters for men in Toronto. Shelter A is operated by a government agency, and its residents are automatically covered by a provincial drug plan. Shelter B is operated by a private nonprofit or-

ganization, and its residents are not automatically covered by a drug benefit plan, although they may qualify for coverage based on the usual criteria.

Patterns of health care utilization and access to health care among the men surveyed are shown in Table 1. Data on filling of prescriptions are shown in Table 2.

Of the 156 men, 100 (64%) had received a prescription for a medication in the year before the survey. Residents of shelter B were significantly less likely than those of shelter A to have filled their prescriptions ($p = 0.03$, χ^2 test). For 73% of those who did not fill their prescription, the reason given was the cost of the medication or the lack of drug benefit coverage. Age, race, income, education, place of birth, self-rated seriousness of the condition for which the medication was prescribed and indicators of health care utilization were not significantly associated with failure to fill prescriptions. Prescriptions for psychiatric conditions were more likely to go unfilled than those for all other conditions (26% v. 9%, $p = 0.04$). The proportion of prescriptions for psychiatric conditions did not differ significantly between the 2 groups of homeless men.

We conclude that automatic drug benefit coverage administered through a shelter significantly reduces the rate of unfilled prescriptions among homeless people. The 20% rate of unfilled prescriptions among residents at shelter B is a reasonable estimate of the magnitude of this problem, since most shelters do not provide their residents with automatic drug benefit coverage. This inability to obtain prescriptions may lead to poor health outcomes and repeated encounters with the health care system. Extending drug benefit coverage to residents of all shelters would improve access to health care in this vulnerable population.

Dr. Hwang is Population Health Epidemiologist with the Inner City Health Program, St. Michael's Hospital, and Assistant Professor in the Department of Medicine, University of Toronto, Toronto, Ont. Mr. Gottlieb is a medical student at the University of Toronto.

References

1. Lowry F. Impact on health care adds to the social cost of homelessness, MD's say. *CMAJ* 1996;155:1737-9.
2. Cooling H. Homeless people miss out on prescribed treatment. *BMJ* 1994; 308:135-6.
3. Ambrosio E, Baker D, Crowe C, Hardill K. *The Street Health Report: a study of the health status and barriers to health care of homeless women and men in the City of Toronto*. 1992.

Table 1: Responses to statements regarding health care utilization by a sample of homeless men in Toronto

Statement	% of men <i>n</i> = 156
Have been to a clinic or doctor's office in the last year	76
Have a family doctor whom they have seen in the last year	38
Have been to an emergency department in the last year	47
Have been admitted to hospital overnight or longer in the last year	24
Felt the need for medical attention in the last year but were unable to get it	30
Currently have provincial "drug card"	27

Table 2: Responses regarding prescriptions given to 100 of the homeless men in the year before the survey

Response	% of men <i>n</i> = 100
Prescription not filled	
Residents at shelter A	6
Residents at shelter B	20
Overall	12
Reason for prescription	
Pain, injury or other musculoskeletal problem	31
Psychiatric condition	19
Cold or flu	12
Other	38
Self-rated assessment of the seriousness of the problem for which prescription was written	
Very serious	36
Somewhat serious	32
Not serious	31

Reprint requests to: Dr. Stephen W. Hwang, Inner City Health Program, St. Michael's Hospital, 30 Bond St., Toronto ON M5B 1W8; fax 416 864-5714; hwangs@smh.toronto.on.ca