



Zumbro Valley Medical Society

**SERVING PATIENTS EXPERIENCING HOMELESSNESS:
A TUTORIAL FOR PHYSICIANS IN TRAINING**

November 30, 2020

**FACING HOMELESSNESS: A PERSONAL ACCOUNT OF
WHAT IT IS LIKE TO BE HOMELESS IN ROCHESTER AND
WAYS WE CAN RESPOND AS A COMMUNITY
TO THIS GROWING PROBLEM**

with
Cici Raisley

[Transcript]

Derrick Lewis, medical student, Mayo Clinic Alix School of Medicine:

Thanks for coming. This is our third part of our series, serving patients experiencing homelessness. We have two special guests joining us today. We have Jake Radtke, who is a senior social worker at Olmsted County. He's going to introduce our other guest. Thank you so much for being here.

Jake Radtke, Senior Social Worker, Olmsted County Housing Stability Team:

Thank you for having us. My name is Jake Radtke. I'm a social worker with Olmsted County's housing stability team. I'm located down at the Francis, which is a housing facility in downtown Rochester. We're a permanent supportive housing facility for those who are chronically homeless, so those who have experienced homelessness the longest. I've had the privilege of meeting CiCi here, close to four years or so ago now. I have just learned a great deal from her and have done several of these presentations with her. Each time I get the opportunity to do it, I feel like there's a lot to be gained from hearing her experience and what she's gone through. It really has informed the work that I've done. So, without saying more, I'll pass it off to CiCi. I'm gonna go ahead and get out of the frame so that we can take off masks and so that you can see CiCi. Thank you all for this time and I look forward to hearing her story again. Thank you.

CiCi Raisley:

Hi, everybody. I'm CiCi. I have lived in Rochester probably like nine years. I was homeless in this town for two and a half years. I became homeless because I was on the run. I was hiding from a very violent ex. He was definitely trying to end my life. I got out of there and managed to survive a stabbing. I left and I ran and I never stopped running. I ended up coming to Rochester. It was very, very cold. It was in January. I thought, "What am I going to do?" I had no place to go. I didn't know anybody except for the few people that I met here and there. It was tough. Being homeless has taught me a lot. It reaffirmed my faith that I can get through tough struggles. I can do this. I'm stronger than I thought I was. It gave me a lot of insight, too. I've heard so many sad stories and so many different situations. Being homeless isn't because a person is a drug addict or an alcoholic or a bad person. Most of the people I know that are homeless, they're very nice, they're very kind, and they're probably some of the most generous people I've ever run into.

I did some couch surfing. I've slept in parking ramps. I've slept under trees. I've slept in dumpsters and ate out of dumpsters. I realized that when I was homeless, it was safer for me to sleep under a bridge

huddled together with seven people I didn't know than it was in my own home. It was not an option. Going home was not an option. I had a lot of really good experiences. I've had probably one bad experience. I was sexually assaulted by somebody that said I could spend the night in their house and I could sleep on the couch. I took him up on that offer because it was really cold. I had talked to him several times before, so I kind of felt like I could trust him. It turned out that it was just the opposite. I woke up with him on top of me. At the time, I thought, "Is this what I'm going to have to go through?" When it was all over with, he looked at me and he said, "There's no sense in reporting this to the police." He said, "Because you're just a homeless person." And, I thought, "What does that mean? Because I'm homeless, I don't count? I don't matter to anybody?" So, I never reported it. Even to this day, I never reported it. I see him walking around town. I've learned always go with your gut instinct. I learned to trust that gut instinct. I learned that I can get through tough times. It'll come to you, it'll come to me.

When I struggled for food, there was plenty of dumpsters you can go to. Like the Holiday gas station, all that hot food that they put out for people to buy and eat on the run, it only stays out there so long, maybe an hour, and they take those off. They immediately take them and throw them away into the garbage. I ate many sandwiches out of dumpsters, things out of dumpsters. I slept in dumpsters just to get out of the elements because it was snowing or it was raining. I learned that I'm a lot tougher than I thought. I'm a survivor of domestic violence. I'm a survivor of sexual assault. I'm a survivor of homelessness. Basically, all that adds up to is we're all survivors of life for me. That's the way I look at it. I'm a survivor in life.

My road took a different turn than I would have thought. I grew up in a very wealthy family. I have a good education. I've had good jobs. Life could be worse than it is right now. I am in a wheelchair. I have suffered a spinal cord injury almost five years ago. I was not in a wheelchair when I was homeless. I couldn't imagine the struggles that a person could have being in a wheelchair with how things are for me now. I am totally independent at home. I don't have anybody coming in to do any cleaning or things. I take care of myself. I just had to learn to alter some things, change things up, the way I do things. I think we all do that in life. Sometimes you zig, sometimes you zag. Then, you realize, "Okay, I went the wrong way." So, you might have to backtrack. Our life is going to go the way it is because we can't predict what our future is. We don't know what tomorrow is going to bring. Anybody at any given time in their life could end up being homeless. If you were to lose your home to a fire or tornado, and you don't have a home, guess what? You're homeless.

Homelessness is not something that should be an embarrassment to the people that are experiencing it. If you walk around town here, you can see a lot of homeless people. A lot of times, if you see them sitting on a bench or something and maybe a holding a sign, maybe give them a smile, maybe give them a hello because that can go a long ways. They're just people without homes. Maybe they're scared. Everybody has their situation, what has brought them to this point in their life where they don't have a home. It's difficult to find a place. It's hard on people. Rent is not affordable, not around here. It's not that everybody should be, "Oh my gosh, there are homeless people. Let's hurry up and get by them or cross the street." Being homeless, it's not contagious. It's just circumstances. Whatever their story is that brought them to that point in their life is something they're dealing with. Me, I was dealing with how to be safe, how to stay safe, and stay away from my ex. I very much wanted to live. I was tired of being beat. I would do things the same way again if I had to, because I'd rather sleep under a bridge and eat out of dumpsters than be abused.

I'm not ashamed of my experience because it was a great growing experience for me. Emotionally, even psychologically, I grew a lot. I changed the way I looked at things. I learned to appreciate all the little things. Like I said, I have a good education. Right now, I'm not working. I'm still doing therapy. It was difficult when I heard the doctor say I was never going to walk again. And I thought to myself, you have

got to be wrong. There's got to be more. So, I fought to find a home when I was homeless and because of this beautiful-hearted social worker that I ran into and I talked to, she knew my situation that I was homeless and she told me to come in and talk to her here at the Francis. And, I did. I ended up filling out an application and I thought it would be too good to be true to get into a place like this because it's very difficult to get into here. It's not easy at all. When they told me that I had an apartment here, I was like astounded. I couldn't believe it. I thought, "I have a home, actually have a roof over my head. I know where I can come at nighttime."

I still see and talk to many of my friends that are homeless. They're always in my prayers. I just lost a friend here a few weeks back that used to do a lot of these talks with me. We used to do them together. It's a little strange with him not being here. He was quite the card. I think that in life we have to have empathy. I think if you come across a person that's homeless, I think that's when it's important for you to find out all you can so you can help that person. You know maybe what avenues you can try, what best is going to be for this person. People will look down on people that are homeless and think that they're just not good people. It's just not true. Have curiosity. Find out what happened, what's going on in their life. For me, if somebody sat down and was talking to me and because I was sitting there and they knew I was homeless, I would take just somebody walking by and saying good morning or hello. I do that a lot because I just like to make people smile. I like to converse with people. I think I'm a very compassionate person. I think I'm intelligent. And maybe that's what helped me get through my experiences. That and just believing in myself and having faith in myself. I have a lot of stubbornness to me. I will fight for what I want. If you want something, what are the lengths you're going to go to get that.

Being homeless in this town for two and a half years, I was at the Dorothy Day, which is a homeless shelter. I've done a lot of couch surfing, a lot of sleeping outside under trees. Summertime it's not so bad here. Winter is really horrible. It's unforgiving. It can be very unforgiving, very cold. And, I learned, how to dress quickly when I became homeless and it was cold. It was like layers, layers, layers. I came from Tucson, Arizona. We don't wear layers down there. Like I said, I wouldn't do anything different if it meant being homeless again to get to a pivotal point in my life, absolutely, I would do it. I had to learn how to survive homelessness. How did I do that is by asking questions of the people that were already homeless. Where can I go get some food? Where could I possibly go get a shower? Where can I possibly get some shelter? Where can I get a blanket or a coat? Ask a homeless person, they'll tell you all of it. They won't miss a beat. They'll know. I think it's important if a person is homeless that they have information. They have all that they can use to help them maybe get out of their situation and to help them in their journey. I still want to help them. I still have them come in and I'll cook supper for them. I'll let them take a shower. I think it's important for, even for me, to know that somebody actually did really care.

The social worker, I knew she cared. She had the biggest heart of anybody. I love her to this very day because she was my savior. To finally have a place that I could go to and call home, which is something that I was trying to find. It's not easy finding a home in this town. It's very difficult. To get into the Francis here in this apartment building, there's only 18 units and there's waiting lists. It's very difficult to find someplace that a person could possibly afford. I have a lot of perseverance in surviving things. When I started my journey, after my spinal cord injury, and they told me I was never going to walk again, and my physical therapy stopped, I thought, "What am I going to do? I have to search for more answers." That's what we have to do. Sometimes you have to search for answers. You can listen to a person's story and you still not have your answers. That's when you have to be inquisitive. That's when you have to ask the questions. The more you find out, the more you're going to be able to help that individual. The more you're going to understand what they're going through.

Homelessness is a huge problem here. I don't know if you really realize that, but it's huge here. I'm always thinking about ways where can we help them? Where is there more shelter? What can we do? There has got to be more help out there. I have been to the emergency room when I was homeless because I had gotten pneumonia. I felt like I was treated a little bit differently. It made me feel very uncomfortable. I felt like they kind of looked like, "Okay, she's homeless, so we'll put her in the hospital for a few days," although I had pneumonia and I was very sick. I felt like everybody looked at me differently, like she's just a homeless person. When I got discharged, it was like, "Quick, hurry out the door," although I had discharged to nowhere.

I guess homelessness is something that, and I hope none of you ever experience something like that, is not something I would wish for anybody to experience it unless they did it purposefully to see. It's very difficult. It's very cold and I don't mean temperature-wise. The way people look at you. I always felt like people are thinking, "Oh my gosh, she must be an alcoholic or a drug addict." All I was was somebody that didn't have a home and I just basically I wanted to live. I love doing these times because I love people to hear my story because being homeless when you're a man and being homeless when you're a woman are two very different things. Being homeless when you're a female, it's very difficult around you. It's very difficult and it can be quite dangerous. For me, you have to have empathy. You have to have some compassion. And, don't be afraid to ask. Don't be afraid to ask questions. What happened? How did this happen? Or, you know, get curious. Because the more you know about that person, the more you're going to be able to help that person. I think in the medical profession, that's important. That's really important. You have to be able to help that person in many different ways, not just okay, let's take out the appendix and go home that day. It's not that. There's more to a person. There's more to a patient. There's a story there. If it's a homeless story, I think it's important that we listen to that because you never know, maybe you're going to be able to help them out of that situation somehow and make them feel better and get them well all at the same time. How cool would that be?

Derrick Lewis:

Cici, thank you so much. I just want to segue so we can maybe ask some questions because you keep saying don't be afraid to ask the question. Thank you so much for sharing your story.

Question 1:

Hi, CiCi. Thank you so much for sharing your story. I was curious: You mentioned that you want people to be more curious and ask questions. Thinking about you and your friends who have experienced or are currently experiencing homelessness, are there approaches or strategies that you think people will be more receptive to, in terms of trying to understand where they've been, where they are?

CiCi Raisley:

I guess when you're talking to a patient, if you find out that they're homeless, just say, "Okay, we know. I understand this," or however you want to put that. Maybe ask them, "What are the circumstances that brought you there? Have you been able to check out other avenues to see if you could get help? Do you know that there is this site or there is this program." And, maybe let them know that you can get them some information on programs where maybe there's some help for them.

Question 2:

When you went to the emergency department, did you tell the doctors and nurses that you didn't have a place to live or is that an assumption that they just made?

CiCi Raisley:

No, I told them. I was honest with them. It's just the situation that I was in at the time. They definitely knew. I was very open with them. I said, "Look, I'm homeless right now, but I'm sick." They did their normal thing, and when they did the chest x-ray, that's when they found the pneumonia and that's when they decided to admit me.

Question 3:

I have a question if I may. How was your relationship with the Rochester police? I know that sometimes the relationship can be difficult.

CiCi Raisley:

When you have a run in with the police here and you're homeless, they will run your name to see if you have any warrants and warrants. And, if you don't, that's pretty much it. I had them stop me and ask me who I was. I had to show them my ID and I was grateful that I had it. He asked where I was staying. I said, "I'm homeless. I'm not staying anywhere right now." He went back to his car. He ran my name. He handed me my ID and said, "Okay, you can go." That was it. They can be very cold, you know? I wasn't causing trouble. They were just wondering who I was. They were just curious because of where they saw me walking or sitting maybe. I was sitting on the ground by a tree or something at a park and they came up to me and asked me who I was. They didn't seem like they had any information to offer me. I would have said, "Are you in the shelter? Do you know of the shelter?" People need to be informed. In the medical community, sometimes it's very important for you to give that patient that information, too. There's a Dorothy Day shelter. I think being informed is a good thing. I think it's very important I think it's important for the medical community to be informed of this.

Question 4:

What are some things that you think that we as medical providers can better do to serve the homeless population coming from a medical standpoint? Just knowing where resources are, is something you mentioned earlier?

CiCi Raisley:

Yes, informing a person that there are more resources out there. We have a little green book. It's a homeless book and it's just filled with information. It's knowing that there's resources. Knowing that possibly there's some help out there. There might be a lot of doctors or nurses in the emergency rooms that don't know this. They don't know what to offer. If you have somebody coming in and they're homeless, but yet they're very, very sick, you inform them of this. When they discharge and you find out that they're discharging to nowhere, and maybe they're still sick, because I was still sick when I was discharged with that pneumonia. I didn't have an address, but I was just discharged. It was like back under the bridge. Inform people that there is a shelter. Because at that time, I did not know there was a shelter. Although I wasn't able to get in because they were full, it was nice to know that they were there because I utilized the Dorothy Day shelter many, many, many, many times. It was two weeks in and then a month out. I had someplace to look forward to going and being out of the elements for a couple of weeks. I think patients need to be informed, especially if they are homeless, because when they are discharged, you're discharging them to nowhere.

Question 4 (follow-up comment):

I think part of that is also us as physicians taking on the responsibility to inform ourselves, because I feel like in the formal medical education, there is no real class on what are the resources that are available to your patient. It's a lot of focusing on the mechanisms and facts and a lot of the biology behind it, not so much on the sociology behind it.

Question 5:

What has been your experience now that you had a spinal cord injury and how have you interacted with the medical profession? How is that different from when you were homeless and interacted with the medical profession? Have you noticed any difference?

CiCi Raisley:

Yes, I have. Dealing with the medical community as much as I do now because of the spinal cord injury, which drives me nuts because I'm at the clinic a lot, it's like, "Okay, she's going to discharge. She has an address." I wouldn't have wanted to have this done and then discharged to under a bridge. Oh, my gosh, I could not imagine being homeless and in a wheelchair. It's been five years now. My doctor was very cold when he told me. He was very blunt and very abrupt and just looked at me because I said, "Well, when I start walking again," or something like that. He grabbed my knees and he said, "You are never going to walk again. You need to accept that." He couldn't be more wrong because you know what, I'm walking. I'm doing therapy. Exercisabilities [local organization] has given me what I call my legs back, my real legs back, because right now I consider my arms, my legs. But he couldn't be more wrong. A person has to have faith, has to believe. I started walking again. I'm totally independent. But, I was treated with more empathy when I had an address. The medical community, and me because I was in the medical community too, we can be very cold and abrupt sometimes because we are always so busy. Sometimes we just need to slow down and take that extra minute or two.

Derrick Lewis:

Thank you. Great note to leave. Leave it on. Thank you, CiCi, so much for joining us and teaching us.

CiCi Raisley:

Oh, you're very welcome. Thank you for having me. I really enjoyed it. Like I said, I enjoy doing these talks and I'm off to therapy now.