

SUPPLEMENTARY APPENDIX A

Anna 1



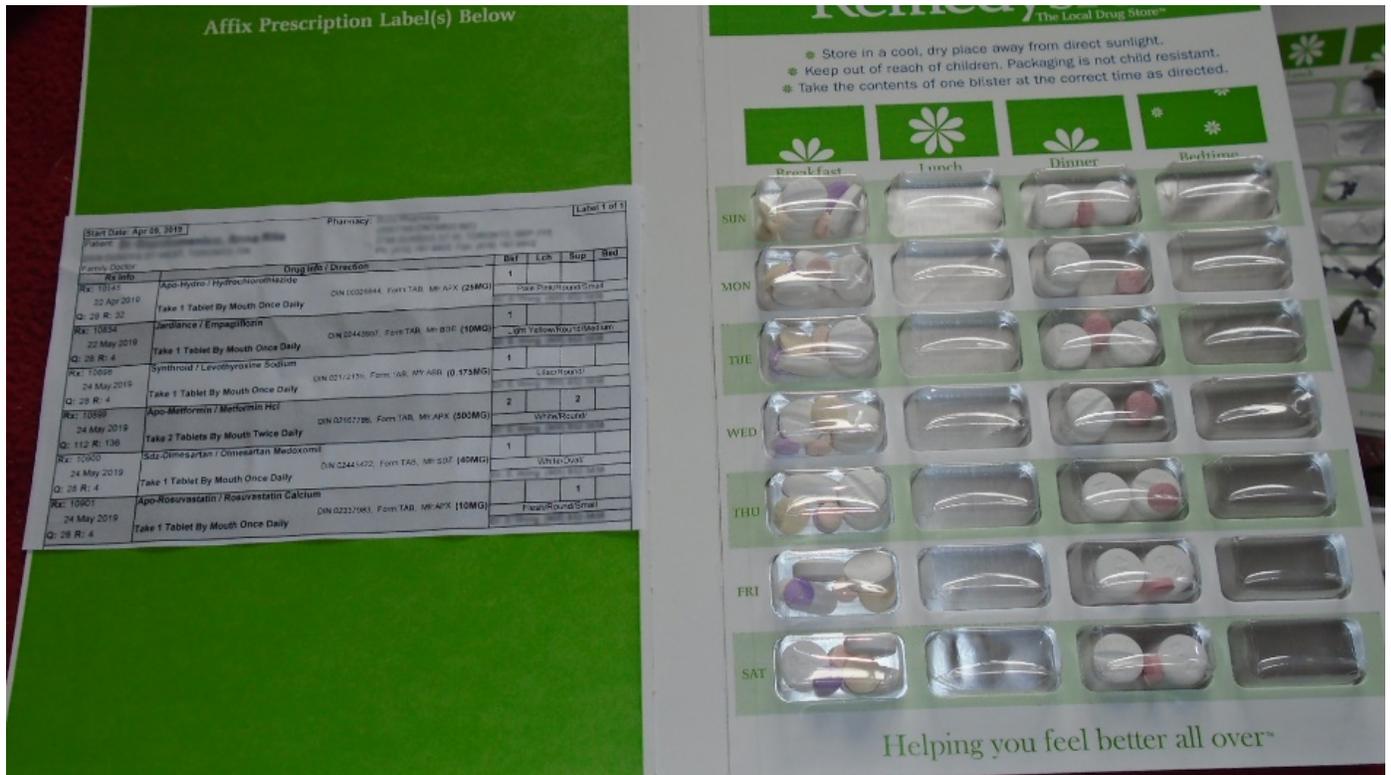
Breakfast

Where do I begin to tell my story about living with diabetes? Not only am I homeless, I am being fed foods that are high in sugar and definitely not diabetes-friendly. On top of that there is no place for us to prepare our own food.

Asking for more diabetes-friendly foods is like asking for them to prepare a gourmet meal. Really? I'm not asking for a steak & filet mignon! I'm asking for some veggies, fruit, water – something that can effectively help me control my sugar level.

Surely there is something we can do to offer the homeless a wider variety of foods. Can't say I'm not grateful for what I am fed, but that doesn't mean I'm happy with what I'm offered... It's bad enough we are homeless, why must we be hungry, too?

Anna 2



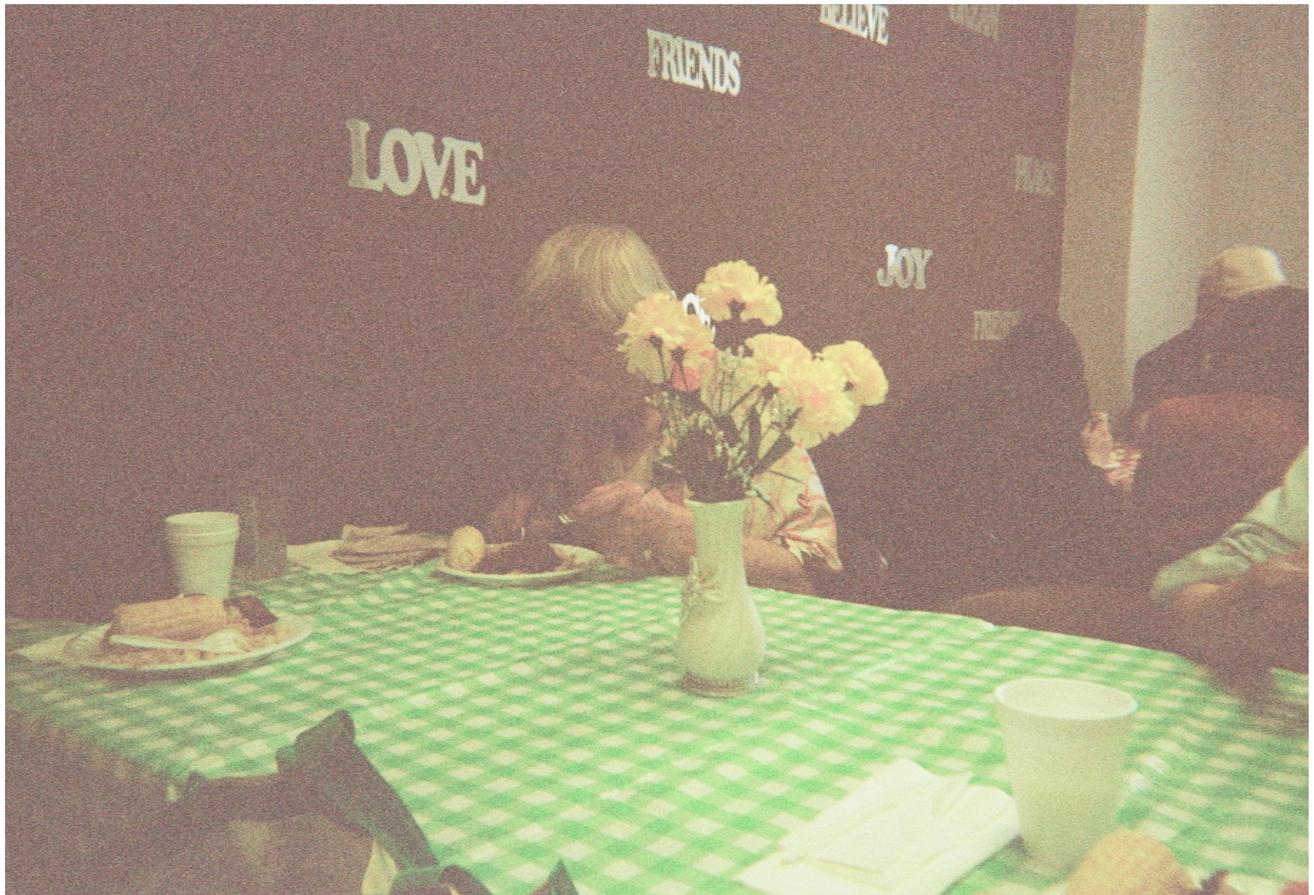
Patient Pays....

\$97.14. Are you kidding me?! That is for one week of meds. I guess this week this girl will need to make-do with the food that is in her cupboard... So beans it is again. Tell me, where is the justification? Why must homeless individuals with diabetes have to decide if this week they eat properly or if they get their meds to control their diabetes?

Then of course there is the fear of your meds being stolen from you. So now not only are you without food but without meds too.

What's it going to take for someone to take action against the injustice? As a homeless diabetic, I have to decide if I eat this week, or if I refill my prescriptions. I know this fight is going to be hard, but this is one woman who is not giving up... So bring on the challenge, I'm ready for the fight.

Cat 1



Community Lunch

I just found out that I am borderline diabetic and I also have finally got my place to live. I could finally do my own cooking. I like healthy food but I also eat junk food. The prices for good food – broccoli for example – have gone up. I attend diabetes groups to learn how to cook healthier food and manage my diabetes by managing my diet.

I attend lunch at community program and took some pictures of the food. I just found out they have a diabetes cooking group for diabetics.

Dwayne 1 (Dwayne E. Hunte)



To eat or not to eat, that is the question...

As a homeless male, I can only eat what I can afford. For years all I ate was Pizza Pockets – which are not healthy and because I could only eat what I could afford, it caused me to become a type 2 diabetic. Another challenge in my life to deal with. Yay...

Dwayne 2 (Dwayne E. Hunte)



Support is crucial

Eight months ago, living on the streets, I didn't know where or if I would ever find a place to call home. Not only was I facing the challenges of being homeless, but also fighting type 2 diabetes.

I knew I had to get the proper help. Fast forward 7 months and here I am. If it was not for my medical team and pharmacy working with me on a daily basis, then I would surely be dead. I am so grateful for these supports: family doctor, pharmacist, specialists, cardiac services, physiotherapy... all under one roof.

Not only have they helped me with diabetes, but I have also become housed. New challenges await, but now I am in control, with my team by my side.

Support is crucial.

Dwayne 3 (Dwayne E. Hunte)



The Diabetic Wish...

When you look at this you see a kitchen, to a diabetic, you see a life saver. Being in a shelter, yes... you do have the choice of eating a doughnut or a banana, however let's get real... do you care what you are fed in a shelter?! The important thing is whether I'm being fed or if I'm going to bed hungry.

Being able to cook your own meals may not be important to many, but to me it's a privilege. Not having to worry if the food is high in sugars or carbs, but the choice of eating a measured portion of rice instead of pasta, and all the vegetables in the world. Being able to prepare my meals is such a blessing, one that I won't take for granted, because I know how quickly I can lose everything AGAIN!!!

Georgina 1



What I can afford

I have had diabetes for many years and have also been homeless. In this photo, I'm eating at a restaurant that was close to my friend's place. I ate a bagel with processed cheese, mayonnaise, and butter, as well as a fried hashbrown. It's no good to eat this because it has all the bad processed fatty foods, but it's the only thing I could afford. You have to eat what you can when you're living in poverty already. When you're homeless it's hard to take care of yourself because you don't have a home or supports.

Georgina 2



Life with a blister pack

When I was sitting on a road drinking alcohol, I didn't give a care in the world about my diabetes, because I had no home at the time. I felt mad, I just wished I didn't have diabetes.

Now I have a home where I can keep my medications and I know where they are. I don't have to keep them in a backpack or a garbage bag that I carried around with me. I keep my blisterpacked medications on my table, where I can remember to take them. And I don't have to worry about people stealing my medications anymore.

My diabetes is bad, but it would have been a lot worse if I didn't get a home.

Jasmine 1 (Jasmine Black)



Experience and Education

Before I was diagnosed with Type 2 diabetes, I used to love cereals with big bran flakes and raisins. It seems healthy. And, this *is* a breakfast cereal served in homeless shelters. In the shelter, I would have two helpings of this cereal. But, this cereal has one of the highest calorie counts of all dry cereals. And, the raisins, covered in extra oil and coated with extra sugar are mini sugar bombs. I am certain partaking in this breakfast led to one of the highest blood sugar ratings I have ever had in my life and a diagnosis of Type 2 diabetes.

I decided to do some independent reading about what would bring down my blood sugar rating. A healthy diet including vegetables and fruits, in appropriate portions, can slow and even reverse the progress of Type 2 diabetes. So, for breakfast, I began to choose plain Greek yogurt with red fruits or berries followed by a bran muffin at coffee break. The bran muffin combines with the yogurt to slowly release sugar into the blood stream, lowering the blood sugar level.

I did my own independent reading and research to arrive at knowledge about healthy food choices to manage diabetes. These are not lessons given in homeless shelters yet. And, I had to buy these foods with my own money because they are not served in the homeless shelters yet. But, my blood sugar level and my diabetes diagnosis have reversed back to the non-diabetes range.

Jasmine 2 (Jasmine Black)



The Guesthouse

When diagnosed with Type 2 diabetes, there seemed to be a daunting amount of information and minutia that had to be learned to cope with the diabetes. I wanted a one month segue out of the homeless shelter I was in, to a shelter, or better a retreat, devoted to all of the lessons about Type 2 diabetes that needed to be learned: nutrition, exercise, education and medicine. After a diagnosis one is referred to assorted specialists, at widely scattered locations all over town, with long time lags between appointments. An integrated, immersive education, located at one site, would greatly speed up the learning curve.

Hmmm.... Where could I find such a site? In the United States, as part of the "lifelong learning movement," senior's retirement communities have been established on some campuses. Have you been a music lover your entire life? Retire to a campus with a world-class music school. It occurred to me that a similar community could be established at the micro level. A guesthouse, premised on feminist principles, for women at midlife with diabetes, could be set up in a university neighbourhood next to a university. Staff at the house would provide the diabetes appropriate meals and nutrition education. The university campus would provide the diverse opportunities for exercise, with their gymnasiums, swimming pools and tennis courts and so on. The university could also provide the wide array of courses one might want to take in such a situation. Medical school? What a wonderful time to have full access to an up – to- the - minute medical library. And, it would be easy to arrange for a medical student to visit discuss current medications. Or, you could take a relevant course in medical school yourself.

Abigail Jones. "Some Retirees Opting for Campus Life." New York Times. December 3, 2010.

Constance Gustke "Going back to school without the pressure." New York Times. April 4, 2014.

Shannon Butler-Mokoro and Laura Grant, editors. Feminist Perspectives on Social Work Practice: The Intersection Lives of Women in the 21st Century. "Getting Older and Wiser." Oxford Press: New York: N.Y., 2018, p. 252

Marleane 1



Delivery

Because I am unable to attend the area food bank, these are delivered by a food program for individuals who are unable to go to a food bank. This program has to be coordinated with your doctor. Although you inform the program of your allergies and food restrictions (diabetic), you are still not given the appropriate food.

A diabetic diet is supposed to be plant based, but as you can see, fresh vegetables are white potatoes. As you look, you will see a bag of sugar clearly marked, and surrounded by high sugar content products.

Presently, I am not without housing, but I am very much without a proper meal that pertains to my health conditions. I can not just eat anything and I lack the appropriate funds to shop for the proper foods. For some reason, when it comes to being without housing, the whole charter of rights does not apply to you.

Marleane 2



What happened to human rights?

This political rhetoric constantly sums up to be about how much of ourselves we will lose, because someone new in power has taken that right from us, even though it's part of our constitutional rights. It does not have to be an individual; it could also be an institution.

Be careful when you make decisions about others. You need to practice the Hippocratic oath and do no harm. Individuals are struggling to make ends meet.

Right now, they're just cutting so much that they're taking the basic necessities - housing, healthcare, education, finances - which are crucial to individuals living far below the poverty line.

Matt 1 (Matt L)



Always Darkest

A solitary figure sits in the corner of a local McDonalds, strumming their guitar inaudibly so as to not draw the ire of restaurant staff and be kicked out into the frigid mid-March pre-dawn.

I see myself in this picture, except instead of a guitar I'm hunched over a cell phone, utilizing the restaurant's wifi. A large chocolate milkshake and two McDoubles provide the highlight of my day while also allowing me to kill myself slowly due to my type 2 diabetes.

McDonald's is everywhere, open 24/7, cheap, and (perhaps most importantly) familiar. Everything always tastes the same as I remember it. This dependability literally sugared the pill of chaos I was forced to swallow everyday while homeless. The fear of future diabetic complications didn't even register when each moment was a nightmare.

Matt 2 (Matt L)



Change please?

On the subway. Just took a pic of a homeless guy wearing only socks, no shoes.

Guy held out his hands; had a few dimes there. I just shook my head. Got out at Yonge and Bloor. At the top of the escalator I saw the shoeless man again, this time on his knees with his hands clutched together, mouth agape in abject despair. I hurried by him.

I didn't want to know his story; why he was begging for change, why he wasn't wearing shoes. I had myself to worry about.

I doubt if he knew or cared whether or not he had diabetes. The thought of him diligently taking medication and blood glucose readings is almost laughable. If he is in fact diabetic, the expected concern for foot care is clearly lacking.

Matt 3 (Matt L)



WTF – It's what's for dinner

Rice and stew again. The meat is mostly gristle. Oh, some potatoes in there to go with the rice? Sure, I'm already like 100 pounds overweight and diabetic, why not carbo-load?

A sign hanging in the shelter cafeteria reads:

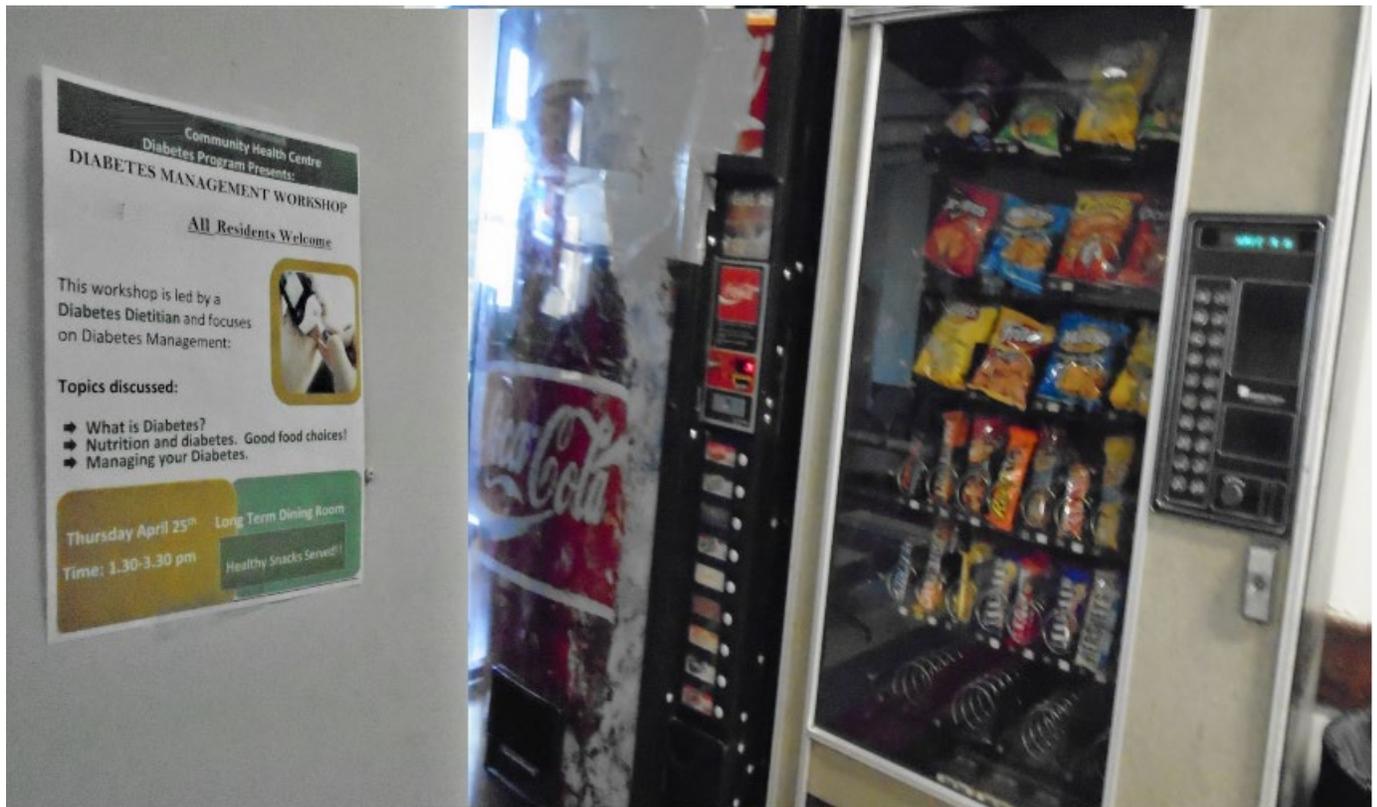
Having someplace to go is HOME
Having someone to love is FAMILY
Having both... A BLESSING!

I can't imagine anyone considering this place home. To stay here is to choose the lesser of multiple evils, such as the street, psych wards, even worse shelters, or prison. I'm purposefully leaving 'death' off that list, although the food seems to be trying to achieve that end.

Forcing myself to swallow the mush, I am incapable of gratitude. Again, I consider the sign. I don't know anyone in a shelter that has 'loved ones,' including myself. The people that still deign to keep in contact with me sure as hell aren't offering to put me up.

I wonder if the food and the sign are in some way conscious steps taken to reduce morale. Depressed residents made even more sluggish by spiking blood sugar cause little trouble.

Ozzy 1



Contradiction

I moved into a homeless shelter in Toronto one year ago. The shelter recently posted the flyer you see in the picture – which means that the shelter is aware of the problem of diabetes. However, in the background you'll see two vending machines. The left one selling high-sugar pop cans, and the right one selling sweet junk chocolates and sweets. Both of these vending machines do brisk business – as they need to be refilled every Sunday. Since everyone in the shelter is at risk of diabetes, take the machines out and if people want to get sweets, they have to go out to find them. Or surprise us one week and fill it with water or apples or sandwiches.

Ozzy 2



Shelter Foot Nurses Needed

Diabetics often times end up with little or no feeling in their toes and toe nails. Thus, they end up neglecting foot care and toe nail care. And, their toe nails therefore end up with fungus. The foot nurses at the shelter where I live quit their jobs as of a few weeks ago. The shelter no longer has any foot nurses.

Because I had fungus making my toe nails thick, I could not cut my toe nails myself. Since there were no foot nurses available I ended up ripping out my toenail altogether (as shown in picture, my own ripped off left toe-nail). After I ripped out my toe-nail using my scissors, thus spilling blood all over, I had no way or means to disinfect it or bandage it.

Almost everybody in my homeless shelter dormitory has ongoing scabies and/or athlete's foot and/or body lice. With my history of Diabetes2, I am seriously worried about my toe-nail(s) getting infected and getting more fungus.