

A welcome respite: Resident runs medical facility for homeless

By Jessica Scarpati, Staff writer
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Even through an alcohol-induced haze, Danny Defelice knows which of his 21 medications is for his heart condition.

Defelice, 58, a Lynn native who is now homeless, can tell which pill he needs to treat the effects of his repeated bouts of congestive heart failure.

“[I tell them apart] by the color they are. The long thin white ones are for my heart,” Defelice said during a check-up with his doctor.

But sometimes he goes weeks without medication. Defelice, who sleeps in his wheelchair in Boston’s South Station terminal, said he often passes out drunk and wakes up to find his pills have been lost or stolen.

Unlike many physicians, Dr. Monica Bharel did not scold or lecture her patient about his rampant alcohol abuse.

Instead, the Brookline resident listened without judgment.

It’s not that Bharel isn’t concerned about damage to her patient’s liver. But in treating homeless patients, Bharel said she follows a “harm reduction model” to focus on immediate medical needs.

“I’m not going to end poverty or change their whole lives,” conceded Bharel, medical director of the Barbara McInnis House in Jamaica Plain, an inpatient, respite care health clinic for the homeless.

With her impressive resume, Bharel, 36, could have easily nabbed a cushy job at a big-name hospital with regular hours and an enviable salary.

Instead, she is on-call 24 hours, seven days a week and making what she calls a “modest” salary compared to her peers.



Dr. Monica Bharel, 36, a Brookline resident, chats with a patient at the Barbara McInnis House in Jamaica Plain. Bharel is medical director of the facility, which is a respite clinic for the homeless.
(Kate Flock, Staff photographer)



Danny Defelice, 58, who is homeless, tells Dr. Monica Bharel about his heart, abdomen and breathing problems. Defelice is a patient at the Barbara McInnis House, where Bharel serves as medical director.
(Kate Flock, Staff photographer)



April White, 41, who has been homeless for a year and just gave birth to her third child, talks to Dr. Monica Bharel about managing her diabetes.
(Kate Flock, Staff photographer)

Bharel juggles administrative duties with seeing patients while at work, returning to her Francis Street home to spend time with her husband, a nephrologist at Brigham and Women's Hospital, and her 2 1/2-year-old daughter.

But Bharel, who has another child on the way, shrugs off the pressure.

"I actually don't get burnt out," she said. "The smallest things you can do make such a huge difference."

'They understand what an alcoholic is'

Last Thursday, Defelice's medical crisis was not his alcoholism. Instead, he saw Bharel for a painful swelling in his abdomen and difficulty breathing.

"I started coughing, and it felt like someone was sticking a needle in my stomach," Defelice wheezed, his features tight with fear.

Bharel, an internist, pressed tenderly on her patient's bloated belly before issuing a possible diagnosis: hematoma.

"It's spilled blood under the muscle," she explained to him carefully, making sure he understood the meaning behind the medical jargon. "It's kind of like having a bruise on the inside of your belly."

The explanation seemed to soothe Defelice for the moment.

"This is the best place in the world," he said, saying he tends to shun hospitals and shelters. "They understand what an alcoholic is. They're not picking on you."

According to Boston Healthcare for the Homeless, the parent nonprofit group of McInnis, the most prevalent chronic diseases among the adult homeless are depression, hypertension, diabetes, asthma, HIV, pneumonia and skin diseases.

The group estimates two-thirds of the patients in its health-care system have a mental illness, substance abuse problem or both.

Although the McInnis house, a 90-bed facility, functions like a hospital, it in no way looks like one.

Instead of being confined to their beds — four per cramped room — patients at the facility mill around common areas and an outside foyer,

where they can smoke cigarettes.

Also, there are no hospital gowns. Patients wear street clothes.

And perhaps most notable is how patients address their physicians. For Bharel, her patients simply call her Monica — no doctor title necessary.

“One of the reasons we’re successful with this group of individuals is there’s a lot of mistrust with the medical system,” she said. “They’re not always treated well and, frankly, with a lot of disrespect.”

A place to recover

Settled in its Walnut Avenue home on the Dorchester border since 1993, the McInnis house only takes patients referred out from shelters and area hospitals.

The clinic, where patients average a two- to three-week stay, is set to move into a larger building in Roxbury in spring 2008.

Without McInnis, Bharel said a homeless individual might have to recuperate from chemotherapy, for example, under a bridge.

“The point of this place was to be the ultimate safety net,” she said.

That’s how Paul Ford, 55, a former Episcopal Church minister from Brooklyn who is now homeless, wound up in Bharel’s exam room last week with throbbing tooth decay.

But before peering into his mouth, Bharel chatted with Ford about his Christmas, the terrible cafeteria food and the abscesses on the stumps at his knees. Ford’s legs were amputated after he was set on fire five years ago.

Although it seems like friendly chatter, Bharel said it is her way of treating her patients like people in a society that overlooks and scorns them.

“To me, it’s an injustice,” she later said. “As I got older and understood more the concept that we could have this much disparity in the United States, it never sat well with me.”

Bharel said a trip to her parents’ native India when she was a teenager inspired her.

On the streets of Delhi, she saw rows of homeless people line the

streets. The image of one elderly man is burned in her memory.

“I’d make eye contact with him when most people didn’t,” she said. “On the third day [I was there], his body was covered. He had died.”

The urge to help the underserved followed her throughout her career, Bharel said. She has served as medical director at McInnis since 2003.

As for Ford, he is worried about meeting his nutritional needs with his poor ability to chew and limited access to food.

“When I remember to do it, I do buy vitamins,” Ford said, touting a bottle of orange juice for potassium and wheeling himself out of the room.

After he exited, Bharel beamed with pride.

“He’s educated, he’s well-spoken and he’s giving nutritional advice,” she said. “That just broke every stereotype.”

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