# A MOMENT IN THE LIFE OF A FAMILY PHYSICIAN

# Acute medical care for individuals experiencing homelessness in Kuala Lumpur

Khasnur Abd Malek, Ilham Ameera Ismail, Farnaza Ariffin, Mazapuspavina Md Yasin, Raja Ahmad Shaharul

Malek KA, Ismail IA, Ariffin F, Mazapuspavina MY, Shaharul RA. Acute medical care for individuals experiencing homelessness in Kuala Lumpur. *Malays Fam Physician*. 2025;20:37. https://doi.org/10.51866/mol.927

### **Keywords:**

Homeless, Medical volunteers, Non-governmental organization, Corporate social responsibility

#### **Authors:**

#### Khasnur Abd Malek (

(Corresponding author)
MBChB, MFamMed, FRACGP
Primary Care Medicine Department,
Faculty of Medicine, Universiti
Teknologi MARA, Sungai Buloh
Campus, Jalan Hospital,
Sungai Buloh, Selangor, Malaysia.
Email: drkhasnur@uitm.edu.my

#### Ilham Ameera Ismail

MBChB, Dr Fam Med, FAFP, FRACGP Primary Care Medicine Department, Faculty of Medicine, Universiti Teknologi MARA, Sungai Buloh Campus, Jalan Hospital, Sungai Buloh, Selangor, Malaysia.

#### Farnaza Ariffin

MBBS, PMETB GP, FRCGP.
Primary Care Medicine Department,
Faculty of Medicine, Universiti
Teknologi MARA, Sungai Buloh
Campus, Jalan Hospital,
Sungai Buloh, Selangor, Malaysia.

#### Mazapuspavina Md Yasin

MBBS, MMed Fam Med
Primary Care Medicine Department,
Faculty of Medicine, Universiti
Teknologi MARA, Sungai Buloh
Campus, Jalan Hospital,
Sungai Buloh, Selangor, Malaysia.

#### Unmet health needs

Individuals experiencing homelessness often suffer from acute medical conditions that go untreated due to a lack of financial means to access healthcare services and delay in seeking medical help. To help address these challenges, the Food for Gelandangan (FFG) team, established in 2013, brings together community volunteers to distribute food and hygiene items every Friday night in the heart of Kuala Lumpur, along with healthcare professionals to provide medical care. However, volunteer doctors are limited, and medical services are only available sporadically depending on volunteer availability, with a family medicine specialist providing care once a month. In response, a dedicated group of family medicine specialists came together to develop a street-based acute medical care outreach programme to support the FFG's initiative.

#### The experience

Our journey began with joining the Friday rounds to better understand the group's needs, its logistical challenges and how to best provide acute medical care. Essential medications and medical equipment were purchased using individual funds to ensure adequate medical supply (Figure 1). Commonly needed medications include treatments for skin infections, fever, toothaches, mouth ulcers, pain, wounds, upper respiratory tract infections and chronic diseases. Additionally, there is a high demand for minyak angin (medicated oil).







Figure 1. Medication bags filled with medicines and point-of-care assessment kits.

We arrived at the meet-up point, Kotaraya, by 9:30 pm. When we arrived, a long queue had already formed in an orderly manner, and our medical team began our service immediately, setting up a makeshift clinic on public benches (Figure 2). Other volunteers sorted donations including non-perishable food, hygiene items and mosquito coils (Figure 3).

To truly reach individuals experiencing homelessness, we then walked the streets, carrying our medical bags through the city centre. It was heartbreaking to see individuals making sidewalks, bridges and dark alleys their homes. Many had no pillows or clean mattresses, just a thin piece of cardboard between them and the cold, dirty pavement. Streetlights illuminated their makeshift beds, and the constant noise of passing vehicles was their lullaby (Figure 4).

## A MOMENT IN THE LIFE OF A FAMILY PHYSICIAN

#### Raja Ahmad Shaharul

MB BCh BAO, MRCGP, DGM Pertubuhan Generasi Santuni Insan (Feeding Future Generation Society) (FFG) 9, Jalan 2, Taman Cempaka, Ampang, Kuala Lumpur, Malaysia.

Open Access: This is an Open Access article licensed under the Creative Commons Attribution (CC BY 4.0) license, which permits others to distribute, remix, adapt and build upon this work, for commercial use, provided the original author(s) and source are properly cited.

See: http://creativecommons.org/licenses/by/4.0/







Figure 2. Volunteer family medicine doctors providing acute medical care to those in need.





Figure 3. Volunteers packing non-perishable food and the group walk.







Figure 4. Unsheltered homeless and their so-called homes along the pedestrian pavement.

#### **Encountered medical issues**

The medical issues of those approached by the team included skin infections, musculoskeletal pain and wounds, although some struggled with substance use and psychiatric illness. During our visits, we treated medical emergencies, including hypertensive urgency, asthma and pneumonia (**Figure 5**). Despite language barriers, we provided urgent care and even coordinated an ambulance service, ensuring a critically ill patient received hospital treatment and thus preventing severe complications.







Figure 5. Providing aid to the homeless in harsh living conditions.

#### A solution for now

Street-based medical care reduces access barriers and builds trust. A consistent outreach programme (Figure 6) can improve health, reduce emergencies and encourage better health-seeking behaviours, ultimately lowering morbidity and mortality among homeless individuals.

#### The future

Sustaining medical care requires volunteers, government support, NGO collaboration and CSR funding to impact vulnerable communities effectively. The dream is clear, a future where every individual, regardless of their circumstances, has access to essential acute healthcare. With collective effort and firm dedication, we can turn this vision into reality.









Figure 6. The Food for Gelandangan team and its amazing volunteers.