

醫者濟世心 毋忘露宿者



黃思聰醫生
Dr. Stephen Hwang

黃思聰既是一位醫生、一位學者，也是一位「前線工作者」；二十多年來透過醫治病人、從事研究以及教學，致力改善露宿者的健康狀況，更為他們爭取獲得安置的機會。他付出的努力、心血，和取得的成果喚起了社會對這些邊緣社群的關注、促使政府正視這社會問題，並尋求解決的方案與政策。在許多無家可歸的人眼中，他更像一位關顧他們身、心、靈，為他們排難解困的仁者。

黃思聰醫生是全球首屈一指從事有關露宿者研究的專家。自2008年起，他參與加拿大精神健康委員會(MHCC)推行的《在家》(At Home)露宿者計劃，負責主導多倫多地區的研究工作。這個由聯邦政府撥款1.1億元，為期4年的計劃，分別在全國5個城市推行，包括多倫多、溫哥華、滿地可、溫尼辟和Moncton市；參加者有2千多人。

4年以後，有1千多人透過這計劃獲得津貼房屋、社工援助、精神病治療、教育及工作培訓等，因而得以重新過獨立生活，改寫人生。而計劃完成後發表的研究報告，亦引導聯邦政府推出解決問題的政策。計劃所取得的成果，更讓它得以持續，並成為至今全球最大型的同類研究。

過往幾年，黃醫生又發表了幾份在全球醫學界舉足輕重的論文，包括《露宿者的死亡率》- 指出露宿者的死亡率比一般人高出8倍、《腦創傷對露宿者及邊緣社群健康的影響》- 指

出腦部受創是露宿者常有的症狀，而且7成創傷是在他們成為露宿者以前出現；換言之，腦部受創很可能是導致他們流落街頭的成因之一；還有一份即將面世的論文的主題是《介入和改善露宿者及邊緣社群的保健》- 指出安置露宿者是改善他們健康的關鍵之一；一經發表，箇中實證勢將促使聯邦政府審視其房屋政策。

上述種種，都不過是黃醫生傑出成就的其中一小部份，也可以說是他達成理想的其中一些途徑，因為他深信，科學與人性是不可分割的。當你問及黃醫生為何多年來一直專心一意去幫助露宿者，他的答案是：「推動力在於，我相信上帝的呼召，是要我們用愛心去服侍弟兄姊妹。」於他而言，科學和信仰可以相輔相成地完成這個使命。基於此，他一生所致力做的一切，亦由始至終是從心出發。

一個冬夜的啟悟 一生的使命

黃思聰醫生出生於美國洛杉磯，父母是來自中國的移民，父親在美國史丹福大學的太空工程系畢業，母親大學畢業後在家照顧兩名兒子。在優裕環境中長大的黃思聰，小時候最愛觀察小蝌蚪如何演變成青蛙。到入讀哈佛大學時首選化學系；在這幾年離鄉別井的大學生活中，亦找到自己的信仰，成為一位基督徒，正如一小蝌蚪一般，逐漸演化成長。

一個寒冷的冬夜，黃思聰正在幫一間教會建設一個臨時收容所，正當他拿著掃帚有點笨手笨腳地掃地時，一位住在那

兒的露宿漢走到他面前，把掃帚拿過來，一臉好意並且認真地向他示範怎樣把地板掃得一乾二淨，那一刻，黃思聰對他油然而生一份敬意，並且感到某種微妙的聯繫，直至今日也難以忘懷。如今想來，正是這一個夜，在這樣的氛圍之下，黃思聰體會到，尊重和珍惜每一個遇上的人是多麼重要，而他也認定他一生的志向，要服侍這些受社會忽視的人。

於哈佛學士畢業後，他轉到美國最佳醫學院之一Johns Hopkins大學讀醫科，並於班內認識了其未來太太。二人結婚及完成醫科課程後，太太又因攻讀公共健康博士學位而重回哈佛。

在這段日子，黃思聰也首次當上一位專看露宿者的醫生。當時一個為波士頓露宿者提供保健服務的計劃正需要一位醫生，黃思聰樂於投身，令計劃的負責人甚為驚訝，不單因為看到他的履歷，還看到他隨和而友善的個性。不用多久，他已成為診所裡人見人愛的醫生。

熱愛研究和愛發問的黃思聰開始對露宿者的健康問題產生興趣，希望進深探究問題的根源，以及箇中可尋的實據。於是，他抽出部份時間重回哈佛修讀公共健康碩士課程，開拓他的研究之路，並先後完成了幾篇有關波士頓露宿者的論文。

1996年，他和太太面對另一個人生轉捩點：決定一起搬回多倫多，並且在加國重新建立一個家。

多倫多街頭的呼喚

1996年某個嚴寒的冬夜，多倫多傳來三名露宿漢凍死街頭的新聞，喚起社區人士關注露宿者人口遞增及庇護所床位不足的問題。當時，聖米高醫院的「內城區(Inner City)保健計劃」剛剛增設了研究部門，並且正在招聘研究員。黃醫生在7位應聘者中脫穎而出，因為他既有實戰接觸過不少露宿者的經驗，瞭解他們的需要，同時也具有遠大的見光，力求鑽研問題的根源及解決方法。

黃醫生的加入，為研究中心帶來新的動力；他一方面展開多項研究，亦每周到位於中區的Seaton House露宿者庇護中心為露宿者診治；那是全多市最大的露宿漢庇護所之一。他視此為不可或缺的一部份，因為直接關懷這群人是他最愛的工作，而這種人性的接觸，亦填補了科研只憑數據或理論的不足之處，使他的研究得以更加全面反映問題的癥結。

據估計，現時多市約有5,000名露宿者，而這些露宿者之中逾3成流浪街頭已有5年以上；其中有半數患精神病或其他疾病；半數染上毒癮，三分之一在警局有紀錄。

黃醫生表示，華裔或東南亞裔只佔露宿者之中的少數；部分原因可能是由於受到亞洲文化及家庭觀念影響；家人往往會彼此收容；而不致於淪落街頭。華裔露宿者之中，則較多是由於患精神病而未能獲得適當治療所致，例如英語不佳的華人，未必能獲得華人醫生診治，因而在接受精神病治療時，可能會遇上語言及文化差異的障礙。

現時，黃醫生也同時兼任聖米高醫院的駐院內科醫生，並已晉身多倫多大學醫學院成為教授。雖然工作繁重，但他多年來一直無間斷地到Seaton House駐診，而且每次都是從醫院步行10分鐘到那兒，這既是他繁忙生活中難得的運動，更重要的原因是，他愛走在街上感受人間真實的一面。他笑言，如今上班也是盡量踏自行車，這也成為是他唯一和最佳的運動。

一份小禮物 另一種超越

作為弱勢社群的代言人、「隱形」的街頭戰士，黃醫生不時會接到露宿者表達的謝意。他回憶當年告別波士頓前，一位女病人給他送上一個精緻的瓷製粉紅色堡壘，他深受感動，因為知道那可能是來自她本已不多的積蓄；這也成為他永不言倦、永不言悔幫助這些人的動力之一。

黃思聰醫生如今已是三個孩子的爸爸，他說很重視保持平衡的生活，這也可說是他的成功的秘訣之一。刻下他同時兼顧醫、研、教三方面，而且對三者同樣重視。他特別提到教學於他而言的意義，不但是傳授醫術給新一代的醫生，更重要的是培育他們的社會責任，不要忘卻醫者的使命，乃是以病人的健康為大前提，甚至有責任為病人發言，表達他們的訴求和應有的權利。

自古以來，科學和醫學的力量改變了世界，改變了人類的生活，然而科學所無能為力的，是說服一個人去關心其他人。這也許正是黃思聰醫生追求超越的界線。



1988年畢業於Johns Hopkins大學醫學院
(最左為未來太太Angela Cheung醫生)
Graduation from Johns Hopkins School of Medicine,
1988. (Dr. Angela Cheung, future wife, at far left)



在庇護所為一名露宿者進行檢驗 (1996年，
於多大及聖米高醫院開始任職不久)
Examining a Patient at the Homeless Shelter (1996
- shortly after starting position at the University of
Toronto & St. Michael's Hospital)



與Seaton House 護士討論病者個案 (2012)
Discussing cases with the Nurses at
Seaton House (2012)



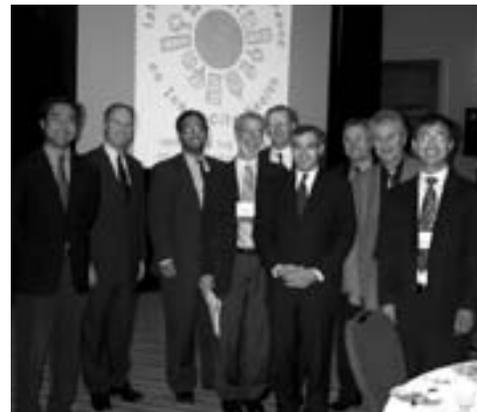
到Seaton House 露宿漢之家作每週駐診 (2012)
Arriving at Seaton House Men's Shelter for Weekly
Medical Clinic (2012)



一家人攝於一位朋友的婚禮 (2006)
A Family Photo at a Friend's Wedding (2006)



兒女們：Matthew, Sabrina, and Jonathan (2003)
Children Matthew, Sabrina, and Jonathan (2003)



擔任首屆「內城區健康問題國際會議」
共同主席 (2000)
As Co-chair of the First International Conference
on Inner City Health, Toronto (2000)



全家每年必到加拿大國家展覽會
一遊 (2010)
Enjoying the CNE - an Annual Family
Tradition (2010)



全家一起到安省Tobermory渡假 (2012)
Family Vacation at Tobermory, Ontario (2012)



成為保健科學學院院士 (2014)
Being inducted as a Fellow to Academy of
Health Science (2014)

Dr. Stephen Hwang

Dr. Stephen Hwang is not only a doctor and a scientist; he is also a worker on the frontlines. Through over twenty years of clinical and research work as well as teaching, he has tried to improve the health of homeless people, advocating the concept that housing is a social determinant of health. His efforts have aroused public concern for this marginalized group, prompting the government to develop better policies to address this social issue. In the eyes of many homeless people, Dr. Stephen Hwang is someone who looks after their physical and mental health, helping them in their predicament.

Dr. Stephen Hwang is the leading world expert in research in the area of homelessness, health and housing. Since 2008, he has been the Co-Principal Investigator of the Toronto site of the At Home Study funded by the Mental Health Commission of Canada. This study received a grant of \$110 million dollars over four years in five cities: Toronto, Vancouver, Montreal, Winnipeg and Moncton, with over two thousand people participating. Through this study, the largest research project of its kind in the world, over a thousand people received subsidized housing, social assistance, psychiatric care, education and job training. As a result they were able to live independently and turn over a new chapter in their lives. The results from the study prompted the federal government to introduce better policies to resolve the homeless issue and the results have been sustained to now.

Over the past few years, Dr. Hwang has published quite a few seminal papers on this topic, such as Mortality among Homeless People, which demonstrates that the mortality rate of the homeless is eight times

more than the national average. His paper “The effect of traumatic brain injury on the health of homeless people” identifies the high prevalence of traumatic brain injury among homeless individuals. It reports that 70 percent of these brain injuries happen before the individuals become homeless, and that brain injury could be one of the contributing factors to homelessness. Another research paper soon to be published, ‘Interventions to Improve the Health of Homeless and Marginalized Populations’, points out that providing affordable housing for the homeless is one of the keys to improving their health. It presents irrefutable evidence that will prompt the federal government to review its housing policy.

All these are but a small part of Dr. Hwang’s outstanding achievements, and a way to realize his ideals. He believes deeply that science and humanity cannot be separated. If you ask Dr. Hwang why he wants to help the most vulnerable sector of our society, he would answer, ‘I believe that God has called us to love and to serve our brothers and sisters, especially those who are poor and marginalized.’ For him, it is important that faith and science work together towards this goal.

Dr. Hwang was born in Los Angeles in the United States. His parents came from China: his father was a graduate in aerospace engineering at Stanford University, and his mother, also a university graduate, stayed home to take care of their two sons. Growing up in this privileged environment, Stephen loved to watch little tadpoles evolve into frogs when he was small. When he entered Harvard University, he majored in biochemistry. He also found his faith after leaving home and became a more committed Christian, evolving just like a tadpole.

One cold wintry night while at university, Dr. Hwang was helping a

church set up a temporary shelter for people who were homeless. As he was struggling to mop the floor, a man who was staying at the shelter came up to him and kindly took the mop from him. He showed him how to properly mop the floor until it was spotless. At that very moment, Stephen felt a great deal of respect for this man and a personal connection to him, which he remembers to this very day. Now when he thinks back, it is that very night that he realized how important it is to see each person as a unique and valuable individual. This moment helped set the direction for his life.

After graduating from Harvard, Stephen studied medicine at Johns Hopkins University, one of the best medical schools in the United States. This is where he met his future wife, Angela Cheung. After they got married and completed their medical training, they returned to Boston, where Stephen became a doctor for homeless people for the first time, while his wife studied for a doctorate degree in health policy. At that time, Boston was building a program to provide health services for homeless people and was recruiting physicians for this program. The director of the program was pleasantly surprised to see his strong resume and his friendly and easygoing manner. Stephen was happy to join the clinic, and very soon, he became a popular doctor there.

Always curious and keen on research, Stephen was interested in investigating the root causes of homelessness and better understanding the health problems of people who are homeless. He returned to study for the master's program in public health at Harvard, thus beginning his pioneer research work, completing several papers on the homeless in Boston.

In 1996, Dr. Hwang and his wife moved back to Toronto to establish a

new home here.

On a cold winter night in 1996, news that three homeless men froze to death on the streets aroused public concern about the increasing homeless population and insufficient shelter beds. St. Michael's Hospital, under the Inner City Health Care Program, added a research department and was recruiting researchers. Stephen stood out among the seven candidates, not only because of his hands-on experience with the homeless and his understanding of their needs, but also because he had a vision of delving into the root causes of the problem and finding solutions to those problems.

The addition of Dr. Hwang brought new impetus to the research centre. On the one hand, he launched multiple research studies; on the other hand, he visited weekly Seaton House, the largest homeless shelter in Toronto, to provide treatment to the homeless there. Stephen regards that as an integral part of his work, because providing care to the homeless is his favorite work, and this clinical work adds a human dimension to his research so that it is not just data or theory, making his research reflect more fully the crux of the problem.

It is estimated that there are about 5,000 homeless people in Toronto, with 30 per cent having been on the streets for over five years; half of these have some kind of mental or other illness; half have a drug addiction problem, and one-third of them have a police record.

According to Dr. Hwang, relatively few homeless people are of Chinese or Southeast Asian origin. This is possibly due to Asian culture. Those who have no place to live may be more likely to be taken in by family, rather than having to move into a homeless shelter. Homeless people

of Chinese origin quite often suffer from mental illness, and some have not been able to receive proper treatment. They may encounter language and cultural barriers to obtaining psychiatric treatment.

Currently, Dr. Hwang is a specialist in internal medicine at St. Michaels' Hospital, and a professor at the University of Toronto, Department of Medicine. Despite his heavy workload, he continues his weekly patient visits to Seaton House without interruption. He enjoys taking the ten-minute walk there from the hospital each time, not only for the exercise, but also because he likes to stay in touch with the reality in the streets. He says, with a smile, that he tries to ride a bike to work from his home each day – the thirty-minute ride is his only and best exercise each day.

As a spokesperson for the vulnerable, an invisible street warrior, Dr. Hwang sometimes would receive an expression of gratitude from the homeless. He recalls that in the year he said farewell to Boston, a female patient gave him an exquisite pink porcelain castle. He was very moved because it could have come from her meager savings. This is why he works tirelessly and without regret to help the most vulnerable sector of our society.

Dr. Hwang is now a father of three children. Maintaining a balanced lifestyle is very important to him, and it could also be one of his secrets to success. He places equal importance on the three aspects of his work: clinical, research and teaching. In particular, he says that teaching does not mean passing on just the practice of medicine to the new generation of doctors, but it also means, more importantly, nurturing their sense of social responsibility. They must not forget the responsibility of the doctor is to the patient's health, which includes

speaking up for the rights of their patients.

Since ancient times, the practice of medicine and science have changed the world, changed the way people live, but science can do nothing to convince a person to care about his fellow beings in the world. Perhaps this is the frontier where Dr. Hwang can cross!