

National discussions on health care, homelessness offer hope

BY SAMM MCCRARY
CONTRIBUTING COLUMNISTSamm McCrary
is a member of
Central City
Concern's Health
Services Advisory
Council in
Portland.

Central City Concern's Health Services Advisory Council gives consumers the opportunity to express their and peers opinions on how the Old Town Clinic operates, and empowers members to have a voice in the community. Toward this endeavor, I had the opportunity to attend the National Health Care for the Homeless Conference in New Orleans, which focused on the link between health care and homelessness.

My own story of homelessness began in late 2008, when I began experiencing major mental health issues, and finally lost my position as an alcohol and drug counselor. I had earned \$18 an hour, and was living in a lovely 2,500-square-foot home. I moved out into the street with my service animal, and became one of what author Mark Horvath refers to as the Invisible People. As I reflect on that period of time in my life, I remember feeling ghostly, and although it was a terrible experience, there is a certain freedom in it that makes it more difficult to re-join the mainstream. You are indeed invisible to most of society, but for those who do take notice, it brings out the best and worst.

I was feeling completely desolate one sunny afternoon. The prior evening a group of college students from my alma mater, Portland State University, had sprayed down my belongings with chemicals while I used the restroom at The Cheerful Tortoise, once a study hangout while I was studying for my bachelor's degree in social science. But on this lovely day, I was near the McDonald's near campus, and I had been scrounging in the bottom of my purse for change to buy something to eat. As I approached the fast food door, I heard a shout from behind, and when the man caught up, he pressed a \$20 bill into my hand, and said, "I am so sorry that you are experiencing this." I began sobbing. I realized that I'd been feeling that this was who I was, a homeless lady, and not that this was a temporary event in my life. I would never ask for money when I was in this situation, but did accept a few times when it was offered. This gentleman offered much more than money; he gave me back my sense of self-worth.

One other notable experience was a little boy who encountered me in Creston Park, a frequent playground for me as a child. He wanted to know where I got the dog, and I realized that for him, this snapshot in time was who I was. Even an adult police officer showed the same reaction, but from my perspective, I should have been more cognizant that this life is more than what you see in front of you in the moment. Thank goodness there are other police officers who show humanity. I was sleeping on the bench and had just gotten everything soaked by the sprinkler nearby, when an officer came along at 3:30 a.m. to tell the teens in the swimming pool to move along. He let me know that I

was not allowed to sleep there, but he would not make an issue, knowing that the buses were no longer running for the night.

Oregon has a serious issue of people experiencing homelessness, but Louisiana surely is one state whose population has suffered more immediate dire straits. And New Orleans was a most appropriate setting for the 2014 conference on health care and homelessness.

John Lozier, executive director of National Health Care for the Homeless Council, points out that New Orleans is still recovering from the devastation of Hurricane Katrina that occurred nearly 10 years ago, yet the State of Louisiana still has not expanded Medicaid to its poorest adults. This was the overwhelming theme at the conference, tying lack of health care to homeless as a vicious cycle.

Distinguished keynote speakers included Secretary Shaun Donovan, from the U.S. Department of Housing and Urban Development, Mark Horvath, Founder of Invisible People, an ongoing documentary titled "@home" based on the lives of people experiencing chronic homelessness, and what they believe contributed to their situation. Old Town Clinic's Dr. Rachel Solotaroff, medical director of Central City Concern, received the Karen Rotondo Award for Outstanding Service.

Day one of the workshop included a very poignant training titled Combating Overdose and Opioid Poisoning Death among People Experiencing Homelessness. It drove home the statistic that the number one cause of death among adults experiencing homelessness is drug overdose, with heroin and prescription pain relievers described as the majority of these preventable deaths. The speakers advocate for overdose education and use of Naloxone, an opioid overdose antidote.

A second excellent workshop on motivational interviewing made it clear: Whether the topic is substance abuse, weight loss or diabetes control, the premise is that people are more successful when internally motivated rather than directed or mandated.

On Thursday, we learned about a community-based participatory research project that was collaborative with Portland State University, OHSU, and the National College of Natural Medicine. It involved interviewing sixteen consumers who shared their opinions on recovery, and what was most helpful in their journey. The theme of the week was carried over in this workshop that people felt more supported when their opinions were considered, and they were treated with respect rather than confrontation, and the importance of considering health care and housing together for success in recovery.

The workshop titled Spare Some Social Change? Integrating Direct Service and Advocacy to Prevent and end Homelessness was a call to encourage both staff and consumers to advocate in person for policy

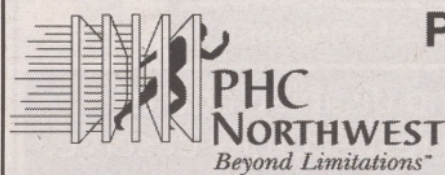
change, citing the research that notes that it is much more effective one-on-one, face-to-face in dealing with those in power to effect change. Statistics bear out that so much money is spent in this country on war in comparison to other countries, and how re-distributing those funds could impact homelessness. One woman with Health Care for the Homeless described taking some of the young consumers to a rally, then sharing lunch while sitting alongside the Chesapeake Bay – simple pleasures that these inner-city kids had not experienced. This act led to the kids becoming active advocates in the community. A dentist for Alameda County Health Care for the Homeless became an advocate after viewing the dire effects of clients with no health coverage. A social worker who lobbies for change in Washington DC, led the rally that evening, asking Louisiana leaders to step up to the plate and provide health care for their people.

On another issue, we discussed the "silver tsunami" coming in regard to baby boomers who are homeless with little or no health coverage. The programs currently in place tend to target much older adults, and disregard the fact that homeless adults are exhibiting chronic health problems much earlier than the norm. These health professionals are pushing for recognition that health and housing programs being put into place in a preventive manner now will save dollars and lives later on.

One incredible aspect of the conference was observing the mix of consumers, social workers and medical professionals sitting down to lunch together to discuss these issues, and having everyone's voice be appreciated and respected. For me, the most heartwrenching piece was viewing "@home", and hearing the description of how many people had died out there on the streets since Mark Hovarth began his work. These workshops presented many pieces of the puzzle on the answers to ending homelessness; one presenter said it well when she remarked that although she always enjoys the conferences, she prays that one day soon there will no longer be any need for them.

I left the conference feeling great pride in my clinic, and with a new energy to put into my efforts in ending homelessness.

As I reflect on that period of time in my life, I remember feeling ghostly, and although it was a terrible experience, there is a certain freedom in it that makes it more difficult to re-join the mainstream. You are indeed invisible to most of society, but for those who do take notice, it brings out the best and worst.



PAID TRAINING FOR PEOPLE WITH DISABILITIES!

5312 NE 148th Ave.
Portland, OR 97230

REQUIREMENTS:

- ✓ Pass a drug test
- ✓ Must be at least 18
- ✓ Must be able to provide documentation of a disability
- ✓ Fluency in English
- ✓ Clean background check

QUESTIONS?

Please call (503) 261-1266
or (800) 874-7917
email: dcherry@phcnw.com



... to the
health care you
know and trust.

Working in partnership with providers, community health centers and social service agencies to serve people on the Oregon Health Plan, Health Share is building a more accessible and coordinated care system throughout the Tri County area.

503-416-8090 | www.healthshareoregon.org



Together we are
**health
share**

Health Share of Oregon