PHOTO BY LEE BROWN

Adam Smith, founder of The Real Junk Food Project, looks over a platter of lettuce being prepared for a catered dinner that night.

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experiencing homelessness but what's the point because we would just be sustaining homelessness by allowing people to continue what they're doing, and plenty of other great organizations are doing that anyway.

"What we're saying is let's prevent that from happening in the first place. Let's empower, educate and teach young people life skills so that whenever they might get into that position they can fend for themselves and provide for themselves and their families."

Smith is like a bullet train, high speed and streamlined. It would almost be rude to interrupt his stream of consciousness flow.

"The problem is spiralling out of control. In the U.K., we're so heavily manipulated by the retail industry when it comes to supermarkets and the abundance of food. It's completely inhumane to think that there are people who go without, alongside 20 supermarkets next door to each other in one street. It's absolutely silly.

"Why do we need avocados 24/7, 365 days a year – that's completely unsustainable. Why are bananas being put into plastic wrappers with a date on it? A banana already has a wrapper – its skin! There is a really nonsensical approach to how we handle and behave around our food."

He is also under no illusions about where the fault lies, and he is not afraid to call out the perpetrators. "As consumers, we have been manipulated to foot the blame by the big corporations who benefit from people returning to their supermarkets and buying more and more food. They say this is what we want. But we don't really have a choice. We've been exploited and manipulated to feel responsible for the way our food industry is run.

"The situation we have is completely unsustainable. We don't grow enough of our own food, we don't teach young people about where food comes from. Kids are just manipulated into thinking that apples come from supermarkets in plastic bags. From what I've seen and experienced in the past four years, on a national and international scale, things won't start improving until these companies start losing profits."

Smith tells me about the growing exposure the project is receiving, with politicians starting to take notice, and how the project's aims are now being spread on a global scale.

"People are starting to look at the fundamentals of the project and what it's trying to achieve. People are going to go away tonight full of nutritionally valued food, all sourced from produce that would have been thrown away. The environmental impact of that is incredible.

"And yet, across the road from here there are probably families, children, who don't get access to the kind of stuff that's been wasted and reused today. That's the paradoxical nature of our food system. What we are trying to do is expose that and tackle it head on in a very common sense way. This is the right thing to do in my eyes, and more people should do the right thing."

But for Smith the amount of cafés opened and the amount of people being fed is not a true indicator of his project's success. "The fact that The Real Junk Food Project is still here is evidence itself to show that things haven't gotten any better. The fact we're growing I don't see as a measure of success – I see it as a measure of the scale of the problem. The more we grow, the more that the problem exists. The more that we lessen our activities worldwide, the more that we're not needed - that will show how much of a change that we've made."

Despite the gravity of the issue, Smith sees the work of the project as extremely simple to carry out, not revolutionary or ground-breaking. "The project has been seen as radical and all this nonsense but I'm only feeding people. The only reasons people see us as radical is because they're so far removed from the problem.

"We need to stop focusing on funding and financing and coming up with increasingly elaborate ways to deal with problems. Just give me food and I'll feed everyone."

Courtesy of INSP.ngo

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tough questions at them, too. My provider didn't bat an eye; he did not act surprised; he was professional."

Chadwick-Saund said her provider responded well to understanding the health side effects of abuse. And for her, this is important: "I don't have time to be a survivor right now."

Chadwick-Saund knows what it's like to come up against high barriers of medical care, to feel like it is "you against the world," which can be a common experience for LGBTQ+ people accessing or *trying* to access medical care.

"It's hard to pull yourself out of that depression," she said. "There's a reason, statistically, queer people suffer from depression more, especially because of the oppression that we face."

It was 2015 when an investigation opened focusing on a hospital in rural Montana where Chadwick-Saund sought care for pain-related medical symptoms. "She just brushed me off," Chadwick-Saund said.

"People that wear those white coats – you want to believe them all the time, and questioning their methods are really hard," she said.

Chadwick-Saund believes her case was mishandled, and the hospital ended up paying part of her medical bill.

"Health care in this country has a long way to go, and Prism is paving a path," she said.

Ferte and Prism staff are trained in trauma-informed care, something at the forefront of being a care provider, especially for the LGBTQ+ community. Staff attend training around cultural sensitivity in the black community and also white privilege.

Ferte said that health care in the United States operates in an antiquated way and that the medical community needs to progress and evolve with society.

"It sounds like an easy thing to understand, and it doesn't happen – clearly, because Prism is here. Health care is ever-changing, insurance is ever-changing, everything about this business is ever-changing," she said.

Ferte does not like to assume anything about anybody's experience but stresses that everybody is treated with an extra sense of sensitivity, because for a lot of patients at Prism, accessing health care on Belmont Street is their last resort.

"We are always mindful and almost assuming that just about anybody who walks through our door has experienced some sort of trauma (in the health care system) at some point in their life," Ferte said.

Since Prism opened in May, Ferte and other providers have seen folks from all walks of life. Patients range from 15 to 78 years old, and all carry with them a magnitude of experiences within the health care system.

"People won't be turned away," said Ferte, who explained how Prism has implemented a sliding fee scale in order to have as many systems in place where people can access care. To use the sliding fee scale, patients have to be up to 200 percent of the federal poverty level. If a patient is over that benchmark and doesn't qualify for the sliding fee scale, Prism offers a 10 percent discount of what the office would normally bill insurance.

"Health care in this country has a long way to go, and Prism is paving a path."

ARI CHADWICK-SAUND, PRISM HEALTH PATIENT

Based on information from October 2017, roughly 35 percent of Prism's patients are on some sort of public health insurance, such as Medicaid, and for some, this might be the first time they have ever had health insurance.

Lack of insurance is a significant barrier for attaining health care for the LGBTQ+ community. Miguel Carreon, a nurse practitioner at Prism, said that he has patients lose their insurance due to their job status or changing life situations and that they won't be able to return for care until they have insurance again. This type of inconsistency can have a significant impact on a person's health.

And more patients are traveling from outside of Portland, even from neighboring states such as Idaho, to access care at Prism and to get prescriptions for PrEP. About 30 percent of Prism's patients are on the medication, and more are being prescribed and filled each day. A provider at Prism said that the LGBTQ+ community seems to be more aware of PrEP than other colleagues in the medical field.

"People will now do damn near anything to get it, if it's important. People come from Idaho to get their PrEP, to get competent care with their PrEP. People come from Damascus, Eugene, Stevenson," Ferte said.

"It was my dream to work here," Carreon said. "I myself am a gay male, and I'm working with a population I care about."

Carreon, like some of his patients, takes PrEP. He said the community he provides care to is more informed than his colleagues in the medical field about the preventive medication.

That's not a big surprise, he said.

"Throughout the time I was on PrEP, I had three different care providers. None of them knew what the medication is," he said. "I had to take information to them, to tell them what labs I needed. I even ended up doing my own STD testing."

Before Carreon meets with any patient, he considers how he wants to be treated at a doctor's office. His own experiences with doctors left him feeling rushed through the visit.

"I don't want my patients to feel that way," he said. "Instead, I'd rather they feel comfortable opening up and discussing issues that concern them."

And for Brandon, that's exactly how he feels coming back to Prism for a follow-up appointment – comfortable and not rushed.

"I'm so grateful for this place, I can tell when I come here that they want you to feel safe. I have never once felt less-than here," he said. "People come from all walks of life. They are going to accept you here; they are going to take care of you. You get that here without any ifs, ands or buts."