Ending homelessness requires becoming anti-racist

By President & CEO Kevin Lindamood

It’s no surprise that the greatest burdens of a global pandemic fall on Black and Brown people. American public health crises, including homelessness, have always hurt these communities hardest. Racism was woven into our public policies and institutions well before the knee of law enforcement launched a national reawakening to it.

White people like me are disproportionately represented among those who are healthy and housed. We are less likely to die prematurely. When compared with Black and Brown people, whites endure far less violence and jail time, earn higher wages, and have many more options for where we live and work.

Health Care for the Homeless is similar to the vast majority of American non-profits: Our administrative and clinical leadership is primarily white, while most of the people we serve (85%) and the staff who work with them (64%) are Black and Brown. Our systems and structures, created primarily by white leaders, are fundamentally flawed. We must evaluate, redesign and reimagine them.

Earlier this year, we at Health Care for the Homeless promised you, our community, to pursue racial equity and inclusion in all we do—from clinical care to culture and operations. This is not the work of a month or a year, but rather a reorientation that will make us a better, more effective organization and further our mission to end homelessness.

We have begun this work in earnest. Hold us accountable. In addition to the service and advocacy you make possible, you should expect to see clear evidence of our racial equity work in the months and years ahead. We are committing time and resources to ensure that our efforts will succeed. If nothing changes, nothing changes.

Join me on the journey. Read, study, listen and commit to the hard work needed to build a just society. Engage with others through our Community of Practice discussions and Facebook group.

Some have asked if a strategic commitment to racial equity is a departure from our mission. I last fielded inquiries like this three years ago when the agency pledged to build housing for those we serve. The questions are interrelated, the answers the same: Racial equity, like affordable housing, is a fulfillment of our mission. We’ll never end homelessness without achieving both.

Join our Community of Practice on Homelessness

www.hchmd.org/community-practice-homelessness
Let’s build a beloved community

By Director of Engagement Eddie Martin, Jr.

In 1956, Dr. Martin Luther King, Jr. envisioned a “beloved community,” a society where all people would be united in a common purpose to establish justice for all and ensure a better future for generations. Sixty-four years later, his vision and approach are still necessary. White families possess 41x more wealth than Black families and 22x more than Latinx families. Blacks have died from COVID-19 at 2.5x the rate of whites. In our country, the health and economic impacts of this pandemic make it impossible to deny that racial disparities exist.

In 2020, we must reimagine compassion, conviction and power in ways that serve our most distressed populations – including those among us who experience homelessness. Dr. King stated, “Power at its best is love implementing the demands of justice, and justice at its best is love correcting everything that stands against love.” Join us to create a society that is equitable for ALL people. Read the full article at hchmd.org.

Virtually impossible: 4 kids and one laptop

Parents everywhere are navigating a school year unlike any other.

Even before COVID-19, the families served by Baltimore City Public Schools had to contend with their children lacking even the most basic protections, like heat and air conditioning. In this deeply underfunded district, where 77% of students are Black, virtual learning hits families without stable homes hardest. And no amount of willpower from single moms like Sylvia* can shift these structural barriers overnight.

“This year is going to be very, very stressful. Having four kids to do assignments and only one laptop is very stressful,” Sylvia sighs. “My pay is not enough to cover the bills. If I leave the house for work, who will care for my kids?”

Sylvia immigrated to the U.S. from Nigeria four years ago. While caring for her family in a shelter, she connected with Health Care for the Homeless providers and eventually moved into an apartment in Parkville, a home that she’s trying her hardest to hold onto.

“Sylvia has this amazing balance of patience with unhelpful systems, self-advocacy and hard work,” explains Dr. Iris Leviner, Director of Pediatric and Family Medicine. “And through it all, she has helped her kids to be very successful in school. In fact, one of the twins is at the top of the class despite all of the stress they are under.”

Still, Sylvia worries that virtual learning will set her kids back—like in the spring when her daughter didn’t have a computer. She’s been in touch with the school principal to request laptops and is working with pediatric social worker Debbie Wilcox to reinforce those needs.

Meanwhile, the anxiety and stress are taking their toll. “I was down a little bit,” Sylvia says, sharing that she went to the hospital for stress. “I’m trying to calm myself down and reduce my workload.”

Iris says, “As this tragedy unfolds in our country, the most vulnerable families are bearing the brunt. We’re trying to help parents draw on their strengths—despite so many barriers. But it doesn’t feel like enough.”

*Sylvia is a pseudonym

Read how Sylvia and her family are doing and how you can help: www.hchmd.org
Building housing and community in Baltimore

Earl Johnson knows big things are coming to the Oliver community in Baltimore City, and he can hardly contain his excitement. Health Care for the Homeless is building new housing right down the street, and Earl says that Oliver is the perfect neighborhood for it.

“This is a well-established community with great roots and history,” he says. “People here really embrace the concept of rowhome living. Whether we’re sitting out on the stoop, talking, grilling or listening to music, it’s a chance to be close with our neighbors.”

Earl is Board President of the Oliver Community Association. Like many communities in Baltimore, Oliver—located just to the east of historic Green Mount Cemetery—has experienced decades of population loss and disinvestment, leading to much of the housing falling into disrepair.

But Earl has seen renewed interest in the community. New neighbors are flocking to Oliver, working side-by-side with long-time residents toward shared goals of bringing in more people and amenities.

“We’re trying to stay a low-key, family-oriented neighborhood. But right now, we don’t have a lot of apartments that people want to live in,” he explains.

Health Care for the Homeless is partnering with Episcopal Housing Corporation to bring the kind of housing the neighborhood needs. By 2022, we will open Sojourner Place at Preston, a new, 70-unit apartment complex located in the heart of Oliver. Half of the units will be for people experiencing homelessness, and the other half will be affordable at 50% of the area median income.

“This project creates a new standard for housing quality in Oliver,” Earl says. “It sets an expectation that everybody deserves good housing.”

In addition to affordable rent, a portion of project revenue will help cover the costs of case management, nursing support and other services to help residents maintain their housing.

Funded through a combination of Low-Income Housing Tax Credits from the State of Maryland, support from Baltimore City and a $2 million grant from The Harry and Jeanette Weinberg Foundation, the project will break ground in the coming months. And Earl can’t wait to show the new residents around.

“They have to get some produce from the urban farms,” he says. “They are definitely a jewel of the community.”

See more about our approach to creating affordable housing in Baltimore: www.hchmd.org/supportive-housing

Addressing racism in housing

With
Chief Behavioral Health Officer
Lawanda Williams

Q: What does everyday housing discrimination sound like?

It can be very subtle. A landlord will ask me what Health Care for the Homeless will do to make sure this person would be a “good tenant.” When that happens I ask if that’s a question for all tenants or just ones with subsidized vouchers. There is no relation between personal economics and character, but those often get conflated.

Q: What impact does discrimination have at the community level?

It leads to concentrated poverty in neighborhoods with less investment and fewer opportunities. Food access is a good example. Like Ryan (on page 4), people who live in poorer areas are just as interested in getting quality food as those in wealthy communities, but they live in food deserts and have to travel long distances to access nutritious options. Housing shouldn’t be just a place to survive, it should be somewhere you can thrive.

Q: How can readers fight housing discrimination?

Start with yourself. If you are a person with privilege, recognize your role. Think about your housing and how your experience differs from others. Don’t accept that people with less privilege need to prove they deserve housing. When you hear stigmatizing language, correct it. When we ask others to cope with racism, we are accepting it. Call your legislators and vote to reverse the policies that force our neighbors to be “resilient” to injustices they should never face in the first place.
Musician, writer and poet Ryan Saunders moved into his apartment in December and was looking forward to creating an in-home studio.

Though he loves to cook, Ryan has long had trouble getting fresh, healthy food. But thanks to a pilot program over the last three months, Ryan had food delivered right to his front door.

“Before I moved into my apartment, I had to rely on food stamps,” Ryan says. And, without a place to store food, let alone cook a healthy meal, he relied on mostly pre-packaged foods.

Ryan’s neighborhood doesn’t have a grocery store in walking distance, making any trip a day-long ordeal. He recently lost his car and has to catch a ride or use public transportation to get from his apartment to the grocery store. If he goes alone, he can only buy what he’s able to carry.

When the pandemic started, Ryan’s long bus trip to the store became more than an inconvenience; it was a serious threat to his health. And he’s not alone.

This past summer, more than half of clients we surveyed said they hadn’t been able to access food when they needed it.

In July, our Housing Services department joined forces with the Maryland Food Bank to regularly deliver boxes of food directly to the doors of 25 clients. These no-contact deliveries made by Community Health Workers removed a lot of stress for Ryan and made some of his favorite meals even better!

“I love to cook and call up my sisters for recipes. I add vegetables I get from the boxes to make roasted chicken, rice and gravy. This reminds me that people care enough to help someone like me. That really means a lot,” he says.

Regular food deliveries help break down barriers to healthy meals for clients like Ryan.

MARK YOUR CALENDAR

ROCK YOUR SOCKS AT HOME/VIRTUAL 5K
Saturday and Sunday, November 7-8
Grab your loudest socks and raise money to provide critical care for people experiencing homelessness. Register at giving.hchmd.org/5K

#GIVINGTUESDAY | Tuesday, December 1
Save the date! On this global day of giving, your donations give people a trusted place to turn for care and support during COVID-19 and beyond. Donate at giving.hchmd.org/GivingTuesday