Jeff found his way forward

Jeff* had a lucrative job in information technology, played guitar and enjoyed the outdoors. But like many of us, Jeff felt overwhelmed by suffering in the world around him. And listening to the news added to his feeling that things were hopeless. “I couldn’t listen to NPR driving into work anymore because it was bringing me down every day,” he reflects.

Major depression is one of the most common mental disorders in the United States, and we all cope differently. Like 20% of people with depression, Jeff turned to drugs to numb the constant pain. And his efforts to recover didn’t work. “I stayed clean for five or six months, but I wasn’t managing my depression and I relapsed. It’s easy to lose hope; it’s easy to lose where you’re trying to go.”

Overcoming substance use disorder, just like other chronic diseases, is hard and relapse is common. That’s why Community Health Worker Greg Rogers supports Jeff through the difficult, personal process of recovery.

“I see people outside on our porch, and I know they had lives before Health Care for the Homeless,” Greg says. As a former client himself, Greg knows this firsthand. So when Jeff came in, ready for help, Greg quickly got him enrolled in a residential recovery program and drove him to the front door.

Over time, Jeff’s team of providers—including Kara White, LMSW, and Lindi Hobongwana, CRNP— worked closely with him. “They helped me remain hopeful and see a way forward,” he says. No matter how many tries it takes, Greg and his colleagues will help Jeff get to where he wants to go. “We just never give up on people,” Greg says.

Moving forward looks pretty good on Jeff. With his signature gray ponytail, he’s smiling and cracking jokes, walking with confidence and making it to all his appointments. He’s the house manager of his residential treatment program and recently got a job at Powell Recovery Center, where he puts his IT skills to use supporting others.

Greg says, “Jeff has a good heart. Now he’s successfully coming out of homelessness. His life has changed, and so has mine.”

*Jeff is a pseudonym

UNDERSTANDING DEPRESSION
1 in 6 adults will experience depression. These factors may increase your chances:
- Relatives who have had depression
- Traumatic or stressful events
- Major life changes
- Medical problems
- Using alcohol or drugs

Call 1-800-273-TALK to reach a 24-hour crisis center. You are not alone.
Making a cure available to all

Chief Health Officer Nilesh Kalyanaraman sees firsthand the policy barriers to treating people with hepatitis C.

John and Regina were two of my clients with hepatitis C, a disease that we can cure. But, because of insurance restrictions, I could only treat John.

Unlike John, Regina did not have enough liver damage to qualify for Maryland Medicaid coverage. We checked Regina’s liver every six months, but the level of damage didn’t change. I had to apologize every time for a rule that didn’t make any sense.

Sadly, 60% of clients with hepatitis C are like Regina. They are denied treatment and a real health victory in a state that has one of the highest rates of hepatitis C in the country.

As a doctor, I’ve never encountered restrictions based on liver damage working with private insurance or Medicare. With the added risk factors associated with poverty, substance use and homelessness, Medicaid restrictions are devastating. Recent studies show that Medicaid recipients are 10 times as likely to die from hepatitis C than people with private insurance.

Thanks to advocacy efforts you supported this spring, the state committed to expand treatment to more people. Despite this, Maryland is not currently planning to provide the cure to everyone with hepatitis C, even though it has the funds to do so. I am sure you agree that everyone who has the disease should have access to the cure.

Together let’s keep the pressure on the Governor to provide equal access to life-saving health care, so that the next time Regina walks into the clinic, I can tell her, “There’s a cure for that. Let’s get started.”

Voice your support!
Tell Governor Hogan to make the hep C cure available to ALL at larry.hogan@md.gov

DONATE
Join heartbeat. Your monthly donations give people like Jeff (pg 1) the steady support they need to regain health and home.
giving.hchmd.org/heartbeat

VOLUNTEER
Calling all volunteers for the Rock Your Socks 5K on November 2! We need your spirit and support to set our runners up for sock-cess.
www.hchmd.org/volunteer-us

CONNECT
Want the latest on hepatitis C and other advocacy updates? Subscribe to our email list.
www.hchmd.org/email-signup
Care with dignity in a new place

Abena* felt sick and sluggish for weeks after fleeing Ghana and arriving in Maryland. She couldn’t afford the $25 copay at a community clinic. Plus, she had more pressing matters on her mind, like fending for her son.

Asylum is a legal process that allows people fleeing from torture, violence and persecution in their home countries to seek safety here. Often not allowed to work or access benefits, 40% of asylum seekers in the US face homelessness. And like Abena, most have unmet health needs as a result of severe trauma.

“Naturally when you’re worried about your personal safety, you’re less likely to prioritize seemingly smaller health issues,” says Tiffany Nelms, Executive Director of Asylee Women’s Enterprise (AWE).

Last August, the Health Care for the Homeless mobile clinic began delivering medical care at AWE, an organization in northeast Baltimore that connects women like Abena with food, housing, therapy and community. “Bringing care to women at AWE is extremely important,” says Community Health Worker Justine Wright. “We regularly see women who have never had a pap smear or routine screenings. Through us, they get care that would have been completely out of reach.”

This new partnership saved Abena’s life. Abena found out she had lupus, an autoimmune disorder that can be fatal without treatment. “I still help her get to appointments,” Justine says. “And she’s on the right track.”

“Homeless.” “Refugee.” Regardless of the labels that society may put on us, we all need a safe place to go when we get sick - and that place is Health Care for the Homeless.


*Abena is a pseudonym

Training the next generation

Lutheran Volunteer Corps member Hannah Wright reflects on her year as a Spanish Medical Interpreter

Q: Lutheran Volunteer Corps (LVC) and Health Care for the Homeless have a long partnership.

Yes, President & CEO Kevin Lindamood started as an LVC volunteer 26 years ago! LVC is turning 40 this year, so for more than half that time Health Care for the Homeless has hosted volunteers like me.

Q: You’re from Illinois. Why did you choose to volunteer in Maryland?

I worked at a free clinic in college, where we helped people with things like antibiotics for infections and prenatal visits, but we couldn’t address the root of their problem, which was often unstable housing. I was drawn to Health Care for the Homeless because it tackles both health care and housing as barriers to well-being.

Q: What have you learned from this volunteer year?

Our clients are some of the most patient people you’ll ever meet. They wait weeks to see a specialist because they’re uninsured or underinsured. They wait years to get housing vouchers. Clients being patient and their willingness to accept help (both hard things to do) have taught me to keep a cool head and ask for help when I need it.

Q: What’s next for you?

I’m applying to medical school! I think that the on-the-ground experience of caring for people builds the best leaders, which I hope to be some day.

Have you volunteered, trained or interned here? Share your story: www.hchmd.org/your-story
This 8-year-old will inspire you

Remember your 8th birthday? Audrey, who just wrapped up second grade, will always remember hers: It was the time she and her friends helped out new moms and their babies!

“I like helping people,” Audrey said after she and her friends made newborn care packages—complete with diapers, blankets, pacifiers and handwritten cards. “I got the idea to do it at my birthday party sleepover because I wanted to inspire other kids to help people.”

The packages Audrey and her friends made go straight to the Pediatrics & Family Medicine Department. They’ll help moms avoid choosing between expensive essentials, like diapers and food.

Recently graced by a visit from the Tooth Fairy, Audrey flashes a smile as she shares her birthday wish: “I want the babies to have good lives,” she says. “And I want their mothers to have happiness in their lives.”

Check out Audrey’s fun birthday activities by watching this adorable video: www.hchmd.org/birthdaywish

You might not want to have a sleepover, but you can still follow Audrey’s lead:

Step 1: Have a birthday
Step 2: Pick a project www.hchmd.org/fulfill-our-wishlist
Step 3: Throw a party

MARK YOUR CALENDAR

CLINIC TOUR
Thursday, August 15
Your chance to see our downtown clinic in action. Tour starts at 9 a.m. RSVP to tours@hchmd.org

ROCK YOUR SOCKS 5K
Saturday, November 2
Join us for a sock-rocking 5K at Lake Montebello. Register at giving.hchmd.org/5K

WORKPLACE GIVING | OCTOBER-DECEMBER
Help end homelessness with each paycheck. Your pledge of $25/month moves neighbors from crisis to stability.

- United Way of Central Maryland: #6322
- Baltimore City Employee United Way Campaign: #6322
- Maryland Charity Campaign: #521576404
- Combined Federal Campaign: #55079

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