

# HOMeward



*Four Ten Lofts resident Arthur Byrd brings his gardening and community building skills to his new home.*

## A caregiver takes care of himself

Arthur Byrd is one of twenty people who regained a home this summer at Four Ten Lofts, a new apartment building in downtown Baltimore.

His sister was with him the day he moved in.

“At some point she said, ‘Put your keys away!’ And I said, ‘I can’t let ‘em go,’” he remembers. “I haven’t had a place of my own for ten years. And that’s a long time not to have your own place.”

Arthur has cultivated a strong community in his life. His grandkids adore him. He’s known his church pastor for nearly 50 years, since they were 12. And over the course of an hour-long conversation, he casually rattles off numerous family, church and community friends who he’ll have over to his new apartment in the coming months.

He has spent years as a live-in caretaker for the people around him.

“I took care of my sister, niece, godmother, mother, godsister’s cousin, my church mother. That was really very rewarding,” Arthur reflects. “But I didn’t know I was neglecting myself because I was taking care of everyone else.”

Last October Arthur lost a close friend for whom he was caring. With her passing, he also lost the roof over his head.

Arthur is not alone in assuming the financial and emotional costs of becoming a full-time voluntary caregiver. Americans, particularly Black and brown neighbors, have come to rely on friends and family in the absence of affordable health care.

Despite his community and work experience, Arthur couldn’t afford rent anywhere.

His church paid for a hotel. And he soon secured temporary housing at Project PLASE—where he saw a therapist, cooked for residents daily, and built up community.

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“I started a garden at Project PLASE in April,” Arthur says. “I started elephant ears from seeds and lilies. Some are three foot tall now. Morning glories are growing up 10 feet of the wall. My godmother taught me how to do that stuff.”

After moving into Four Ten Lofts with the assistance of Health Care for the Homeless supportive housing staff, Arthur is intent on applying his green thumb to the courtyard here, too. There are raised beds for tenant-use and landscaping around the edges ready for fall and winter plantings.

Inside, he’s settling into his apartment: hanging curtains, doing lots of laundry, rearranging the furniture and cooking up healthy stir fries.

“I feel a sense of relief. I find myself relaxing. At 60, I now have a home. Not just a place to lay my head.”

Arthur stays busy helping his church, doing event decorations and is prepping to teach a small sewing class.

Around the same time he moved in, his pastor asked him, “What’s next?”

“I think it’s time for me to go to school and do something for Arthur,” Arthur told him. “For the next 10 years, Arthur’s gonna take care of Arthur.”



*Baltimore urgently needs housing that is truly affordable. Read about our new housing development, Sojourner Place at Oliver, here: [www.hchmd.org](http://www.hchmd.org)*



Black and Hispanic/  
Latinx caregivers spend

**30 more hours**  
per month providing unpaid  
care than their white or  
Asian-American peers



Marylanders earning  
minimum wage  
would need to work

**82 hours**  
per week to afford a  
one-bedroom apartment



**\$238**

Truly affordable rent  
for Marylanders on  
fixed Supplemental  
Security Income  
(\$794/month)

Sources: AARP, National Low Income Housing Coalition “Out of Reach” 2021 report

## “I feel like Superman”

Von Cash has a movie reference for every occasion, wise words from his discipleship program and a homemade remedy for everything. He’s never been happier. But, he had to wait 48 years to get there.

“When I was little, I asked my mom why I didn’t look like my brother. She told me, ‘you are a girl,’ says Von. “I never saw that pretty girl, but there was always someone to shut me down.”

Like many members of the transgender and gender non-conforming (TGNC) community, this reinforced shame kept Von from living fully as himself up until two years ago.

“In this country, we are raised to hate ourselves already, especially Black people. The system wants to keep us low



*At 50 years old, Von Cash has never been happier.*

so it can use us and I'm starting to understand that more. It never occurred to me not to be afraid until now," he says.

Seven years after first walking through our doors for insurance, medication and therapy, Von told his therapist that he wanted to start his medical transition from female to male. He connected with Lead Medical Provider Tyler Cornell, CRNP and started hormone replacement therapy (HRT) six months later.

"Providing HRT shouldn't be the gold standard of care, it should just be the standard," says Tyler. However, this is hardly the case. In Tyler's experience, gender-affirming care is learned on the job and taught by clients, instead of in standard medical training.

Shelters that welcome TGNC people are also far from the standard. Von has lived in a women's housing program for five years. Now that he is more open about his identity, he's unsure if his housing is secure and what alternatives he may have. TGNC youth who still rely on parents/ caregivers for support can be at even higher risk of experiencing homelessness because families often reject or abuse them. And there aren't many places for them to turn.

Baltimore Safe Haven, an organization founded and run by Black trans women, is the only program in our city that offers shelter specifically for TGNC people. Most shelters do not acknowledge or respect the rights of TGNC people and are incredibly unsafe for them. This means they often sleep on the streets and are very likely to be targets of violence (see statistics).

Creating safe spaces for TGNC people in a world that offers them almost none is both life changing and life-saving.

"At my lowest, when I was using and in a shelter, I didn't want to be alive anymore. But between finding God and transitioning, I just feel so free," Von says with a sigh of relief.

That freedom has allowed him to invest time in strengthening his relationship with himself, his three kids and God.

"I haven't always been the best parent, especially when I was low. My kids might not understand my transition, but I know how I feel. And, I'm finding that once you love yourself, it's easier to love others," he says.

Now 50, Von is looking to the next 50 years of his life with determination to finish his discipleship program, open a health and wellness business, "plant good seeds," everywhere he goes and maybe even fall in love.

"I've never been this confident before—I feel like Superman," Von says with a huge smile on his face.



*Transgender Day of Remembrance is November 20, 2021. Join Baltimore Safe Haven to memorialize transgender community members who have lost their lives to anti-trans violence. [www.baltimoresafehaven.org](http://www.baltimoresafehaven.org)*



**41%** of Black transgender people have experienced homelessness



Nearly **1/3** of transgender people say a health care provider has refused to see them because of their actual or perceived gender identity



**52%** of transgender people who stayed at a shelter were verbally harassed, physically attacked, and/or sexually assaulted because of being transgender

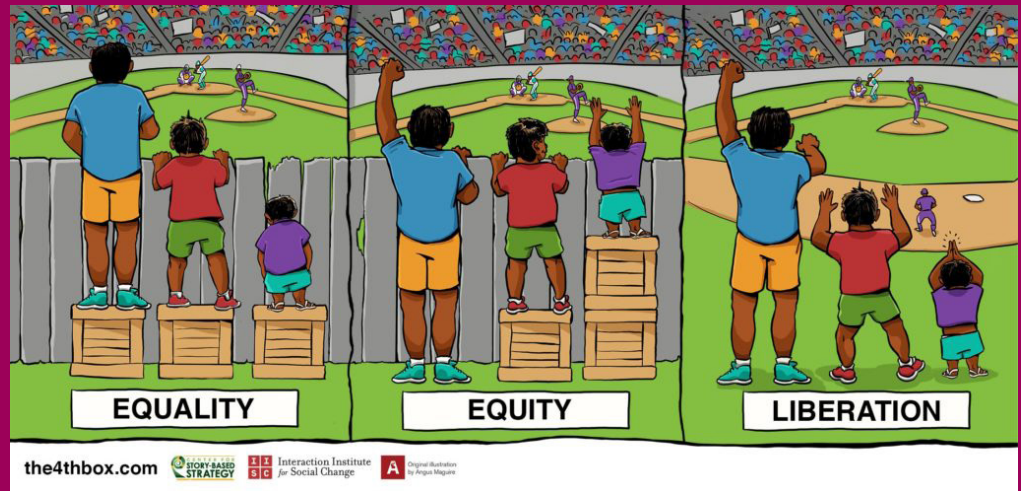
*Source: Human Rights Campaign*



Learn how you can create safe space for TGNC community members at: [www.glaad.org/transgender/allies](http://www.glaad.org/transgender/allies)

# Racial equity and inclusion is front and center

In August, the Center for Urban and Racial Equity (CURE) completed a racial equity assessment of our agency. They conducted an anonymous staff survey, four focus groups (with staff, former staff and clients), interviews with senior leaders, as well as a review of our policies and procedures. At our August All-Staff meeting, CURE presented the results and held small group discussions to gather feedback and answer questions.



Areas identified for improvement and attention include:

- Training and tools
- Hiring, promotion and retention practices
- Client engagement in both their care and agency decision-making
- Policies and procedures
- Delivery of care
- Measures of care quality
- Contracting and procurement

Here's what we know: The work of racial equity and inclusion requires transformation in everything we do—from hiring to providing care to measuring success to building business relationships. And we need to have a plan to begin the methodical, long-term re-envisioning of our organization.

This fall, our Racial Equity Working Group, composed of the Staff REI Committee and executive leadership, is creating a Racial Equity Plan that identifies priorities and assigns responsibilities. This Plan will be critical to our strategic planning process, scheduled to begin in January 2022. During that time, we will also engage in a review of our mission statement and core values.

We look forward to sharing the Plan with you and thank you for being our partners in the work to making the Health Care for the Homeless community truly safe, responsible, respectful and compassionate. Read more at [www.hchmd.org/rei](http://www.hchmd.org/rei)

**“ We know that adopting a racial equity lens is indispensable to accomplishing our agency’s mission. Seventy-eight percent of people experiencing homelessness are People of Color, and 65% of people experiencing homelessness are Black. We are serving individuals and working with communities dealing with the realities of institutional and structural racism, and we have to make addressing these inequities front and center in our work to prevent and end homelessness. ”**

**Eddie Martin, Jr.**  
*Senior Director of Equity & Engagement*



# Living healthy shouldn't be this hard

Darrin Chambers is preparing to celebrate eight years with his fiancé Audre\* this November. "We got it all here," he laughs. "I got boys, she got girls. We've made ourselves a 'Brady Bunch' situation."

Darrin has brought himself a long way from the years he spent on the street, navigating piecemeal treatments for HIV and schizophrenia, to his sunny apartment in South Baltimore. "I learned to be a survivor out there," he says, "living in those abandoned houses, that's where I stored all my important documents and HIV medication."

"I turned to using [drugs] as a way to self-medicate," says Darrin, reflecting on the state of his care at that time.

What began as a means of mental health maintenance quickly developed into dependency. "My motivation being out there was just to make it through the day intact," he says, "but I lost myself in addiction."

Darrin's journey changed when he met Audre, just months into her own recovery. "I made those first steps on my own," he says, "because I loved her so much. It created something in me and I wasn't going to let that go." Over the next several years Darrin worked at his recovery with support from Helping Up Mission, who recommended Health Care for the Homeless to him.

Darrin quickly bonded with his new primary care provider, Dr. Iris Leviner, who outlined a tailored course of HIV treatment. "She really sat down and explained the function of white blood cells and 'viral load,' and what it means for my body," he remembers. Based on Darrin's requests, Dr. Leviner identified a therapist and psychiatrist at the agency to help him manage his schizophrenia and substance use disorders.

"Once I was prescribed the appropriate medications to



*Darrin now has the space to care for others in his life.*

manage my mental health and HIV, the quality of my life improved dramatically." Today, Darrin's HIV viral load is undetectable and he cannot transmit the virus to others. With proper medication and a strengthened immune system, Darrin began to feel an easing in schizophrenic episodes. He was also able to build up a greater commitment to his sobriety.

From the comfort of home, Darrin has space now to care for himself and the people in his life.

"I've equipped myself mentally, physically and spiritually to deal with life," he says proudly. "Now I'm a provider for my family and I love that."



*No one should have to manage their health alone. To learn more about our whole-person approach to care, visit: <https://www.hchmd.org/health-home-model-care>*

*\*this is a pseudonym*



**41%**

of people experiencing homelessness in Baltimore are living with severe mental illness. 1 in 3 go untreated every year



**52%**

of individuals experiencing homelessness have multiple diagnoses

The rate of Black men living with an HIV diagnosis is

**11.4x**  
that of white men



Sources: Baltimore Journey Home, National Health Care for the Homeless Council, AidsVu

# MARK YOUR CALENDAR

## ROCK YOUR SOCKS 5K | Saturday, November 6

Swag? ✓ Socks? ✓ Ready to rock? ✓ There's still time to save your spot at the start line at Patterson Park. [Register at giving.hchmd.org/5K](https://giving.hchmd.org/5K)

## COMMUNITY OF PRACTICE | Thursday, November 18

Register for our virtual discussion on Disinvestment, Displacement and Gentrification. [www.hchmd.org/community-practice-homelessness](https://www.hchmd.org/community-practice-homelessness)

## HOMELESS PERSONS' MEMORIAL DAY | Tuesday, December 21

Join us in person or virtually to honor our neighbors without homes who died in 2021. [www.hchmd.org](https://www.hchmd.org).



## All aboard the Sole Train



*David Dexter has a challenge for you.*

**As a former staff member at Health Care for the Homeless, what inspired you to personally fundraise for the Rock Your Socks 5K when you worked here?**

After seeing the magic at the event and watching coworkers lead successful teams, I was inspired to start my own. It's a way that I can stay connected and use my skills to help.

**Any top fundraising tips for people looking to start a team for the first time?**

I had never done peer-to-peer fundraising so it was

about getting up the courage to send that initial email. Homelessness is a national crisis that can feel overwhelming—so I try to make those emails very personal while also tying our services into what is going on in the world. It's a reminder that while everyone I reach out to doesn't have a connection to Baltimore, they have a connection to me and this is a tangible way they can help. Don't be afraid to reach out—you never know who will come out of the woodwork.

**How do you plan to keep team Sole Train running this year?**

Between family, friends, neighbors and my new coworkers, I'm confident. Last year, my mom joined virtually from California and some people just donated. All you need is a hip pair of socks and a passion for supporting our neighbors without homes. It's always "all aboard!"

**What are you most excited about this year?**

The feeling of unity. Passionate communities come together and client advocates are so excited to be cheering people on. Everyone knows why they are there—it's really powerful.

**Any words of advice to anyone thinking about coming for Sole Train's title?**

I'm not giving up without a fight – we've raised \$10,000 over the last two years. But, nothing would make me happier than another team taking the crown. Come beat us.



[Register at giving.hchmd.org/5K](https://giving.hchmd.org/5K)