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Homelessness and Health Care are Closely Related

By Wendy Rojo

Some of us might not see the need for healthcare in our everyday lives, but one bad day could change that. If you break your leg or are diagnosed with diabetes, healthcare quickly becomes an apparent and important part of your daily life.

For most Americans, health care is one of the first requirements they expect from their employer. Some people choose a job based solely on the type and worth of the healthcare the employer offers. A large community of people think about their health and health care daily. Some within that community lack a home and must make tough decisions every day: Pay rent or buy expensive medicine they need.

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An individual or family dealing with a health crisis can spiral into homelessness due to the lack of access to health care and the financial burdens that reality can create. According to Policy Advice, in 2020, around 31 million American citizens lacked health insurance.

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This number includes individuals who are working part-time. Even if a person who is homeless gets a part-time job, they still would lack access to health insurance from their employer. Additionally, the National Health Care for the Homeless Council found that homeless individuals

are three to six times more likely to get sick than housed individuals. The lack of health care and access to proper health care only increases a person's chances of becoming homeless. However, Medicaid and the Children's Health Insurance Program (CHIP) do provide services to qualifying low-income individuals and families. The introduction of the Affordable Care Act (ACA) increased the threshold of those who could qualify for Medicaid. The expansion increased the number of homeless individuals who could qualify for health insurance by reducing the minimum income level.

Still, according to the National Coalition for the Homeless, many homeless individuals who need health care treatment never get treatment because they are unaware of where to receive help, lack transportation, and lack identification.

By the Numbers

Americans experiencing homelessness pay their medical expenses in these leading ways:

Medicaid	36%
Medicare	15%
Other	4%
Private	15%
Self pay (uninsured)	15%
Unknown	16%

By comparison, Americans who are housed pay their bills in this way:

Medicaid	11%
Medicare	10%
Other	3%
Private	50%
Self-Pay** (uninsured)	15%
Unknown	24%

Source: U.S. Department of Health and Human Services



Streetside Showers provide free showers for Stewpot clients.

Various participants in our Writers' Workshop have voiced their struggles with obtaining proper health care. Economic insecurity is one of their reasons. Luckily, some organizations are working towards ending homelessness by creating an equitable healthcare system.

The National Health Care for the Homeless Council, for example, is working toward ending homelessness by creating a space where those in need can quickly find the resources they require. Parkland Health and the Children's Health Fund created the Homeless Outreach Medical Services (HOMES) program. HOMES provides medical, dental, and behavioral health services. The HOMES program offers services out of The Bridge, The Stewpot, and Homeward Bound.

A collaborative effort known as The Connector provides regularly scheduled transportation to individuals experiencing homelessness. The Connector, which receives funding from partners like the City of Dallas, stops at locations that offer various resources for those experiencing homelessness. They include CitySquare, Austin Street Center,

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STREETZine

STREETZine is a program of The Stewpot.





The **STREETZine** is a monthly newspaper published by The Stewpot, a ministry of the First Presbyterian Church of Dallas. The Stewpot provides services and resources for people experiencing homelessness or who are at risk of being homeless. The organization also offers opportunities for a new life.

As part of this ministry, the **STREETZine** seeks to raise awareness about the issues surrounding homelessness and poverty. The monthly publication also offers financial opportunity for Stewpot clients who sell the paper to Dallas residents. Vendors are able to move towards economic self-sufficiency by using the money they receive from selling copies to purchase bus passes, food, and necessary living expenses. Clients also receive stipends for contributing articles to **STREETZine**.

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The Pastor's Letter: The Joy of the Lord is Our Strength

By The Rev. Amos Disasa

This essay is excerpted from a sermon that Rev. Disasa gave at the First Presbyterian Church of Dallas in January 2022.

The family of four sat on the floor. The apartment was empty. Nothing was there; no furniture, nothing hanging on the wall. It was an odd scene for me to witness. The total absence of things, but the obvious presence of people, in a home, did not make sense to me.

I was eight or nine at the time, too young to figure out this mystery on my own, but old enough to know this wasn't normal. My father told me we were visiting new friends who had just arrived from some country in the Middle East. He was meeting them for the first time. The father was here as a visiting Fulbright Scholar and I suspect his family was wondering if their decision to join him for the duration of the two-year fellowship was wise.

They had nothing but an eighth-floor apartment on a campus they didn't know in the center of a city that was their wilderness. Without a car or money, they could not fill their fridge. Without friends, they were like aliens that accidentally landed on an inhospitable planet.

This was to be their home for the next two years, but right then they looked like they wanted to return to the home they left behind. I can't recall their faces, or their names, but I do remember the moment when I realized that they were more than just lost.

Soon after we walked in, I watched the mother squeeze ketchup from a packet marked with the Burger King logo into the mouth of her young son. A pile of free ketchup packets and a stack of napkins sat on the floor with them.

If there was a crumbled up burger wrapper or an empty carton for fries, the ketchup packets would be irrelevant. But there were no fries for the ketchup. Just ketchup. That was all they ate for two days until we arrived.

They were in the wilderness without any food, and without a clue about where to find it.

The empty apartment, the ketchup packets, the lost look in their eyes, it all begged the question they might have already asked: Is the Lord among us or not?

Nehemiah's story

Nehemiah was appointed governor of Jerusalem at a time when nobody wanted the job. The city sat in ruins after the siege of Jerusalem by the Babylonians. The Babylonians annexed the city, exiled its Jewish residents, and repopulated the city with their own people.

Along with the temple, the walls of the city were destroyed during the take over. The condition of Jerusalem distressed Nehemiah, so he asked permission from the king to return to Jerusalem as governor so he could rebuild the city, starting with the outer walls.

The king granted his request, but Nehemiah discovered that not everyone shared his vision for a rebuilt city. At least four different groups worked to sabotage the wall rebuild, but ultimately Nehemiah's opponents failed.

Against tough odds, Nehemiah rallied the remaining Jewish residents of Jerusalem to rebuild the wall in just 52 days. It was an extreme wall makeover. The quick pace of construction in a hostile environment sent a signal to the exiles that the city was safe enough to return, and that God's presence was still sure.

Just as the wall was a visible sign of God's grace, the opening of the scroll for the first time had to be seen, and the reading of the word for the first time had to be heard. Nobody had a Bible on their nightstand, or a family scroll on the bookshelf. You had to either have scripture memorized or be in the right place at the right time to hear it. The experience was always communal, you had to show up in person and squeeze in tight to hear from God, because the scrolls were too precious and awkward to handle to unroll on demand.

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Executive Director's Report

By Brenda Snitzer

Good health. Good health care services.

Many of us take for granted those essentials of a quality life. Most of my life I have had the blessing of good health, until becoming diabetic in the past 10 years. Still, I have had the privilege of health care resources anytime that I needed them.

Access to doctors and dentists has always been easy. And since my employers have provided health care insurance coverage, the cost for regular checkups or other needed services were never cost-prohibitive.

Many of us who enjoy these same circumstances may not realize our privilege. Similarly, we may not realize that many of our fellow Americans lack this same benefit.

I am thankful that the First Presbyterian Church of Dallas (FPC) members who started The Stewpot long ago realized that folks experiencing homelessness need access to good healthcare. In 1988, Dr. Frank Higginbottom, Dr. Larry Chapman, and Dr. Dee Ogden, each of whom were church members, started the dental clinic. And in 1999, Dr. Elgin Willis Ware Jr. and his wife Karen Ware, along with Dr. Buddy Hurst, launched the medical clinic.

Gradually, Parkland Health and Hospital System was asked to take over the clinics and began operating them at The Stewpot. They greatly enhanced the ability of our clients to receive care. In addition, we provide vaccination clinics, various health screenings, and vision clinics several times a year so that clients can receive eye tests and receive any needed glasses. We also provide mammogram services about once a year through a mobile mammogram bus. I am grateful that we can provide these services.

However, recent eye surgery to correct my cataracts gave me an opportunity to reflect again on how privileged I have been. I started wearing contacts at the age of 16. I always had a pair of glasses to use if I needed. But I played sports so it was better to wear contacts, a privilege that many of our clients may lack.

Contacts and the annual doctor's visits to make sure all is well our cost prohibitive for most of our children, youth and adults. So is the type of surgery I had to remove my cataracts.

Of course, without surgery to remove cataracts, your vision becomes so clouded and distorted that your vision is greatly compromised, even with glasses. Some people then become legally blind. Loss of vision compounds their ability to care for themselves or to get and keep a job.

While writing this column, I researched doctors or clinics that perform cataract surgery for those who have no insurance and no way to pay for the surgery. The closest places I found in Texas were in Amarillo and Houston.

As I have my own sight restored, I will continue to seek other resources for our clients. If you know someone who can help, let me know. Better access to healthcare for all should not be a dream but a reality. We hope we can continue to make this true.

Brenda Snitzer is the executive director of The Stewpot.

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OurCalling, The Stewpot/First Presbyterian Church-Dallas, and The Salvation Army. These organizations are paving the way towards accessibility for all individuals who are experiencing homelessness.

Health care is much more than just feeling well. Health care is about feeling physically, emotionally, and spiritually well. However, our well-being begins by taking care of our bodies.

Health care is about feeling physically, emotionally, and spiritually well

A Writers' Workshop participant, Darin, expressed the ways he takes care of his body. Some of those methods are exercising regularly and eating healthier, while David, also a Writers' Workshop participant, chooses to address his health in a more holistic and natural approach. David also chooses to exercise regularly, and he finds natural methods of helping his body. Regardless of how we choose to take care of our bodies and our health, the issue of healthcare affects us all. Fortunately, there are incredible organizations willing to help those who lack access to healthcare.

Wendy Rojo is managing editor of STREETZine.



Dallas Conector Project Ribbon Cutting. Picture courtesy by City of Dallas.

Can Where **You Live Affect** Whether You Live?

By Poppy Sundeen

For most Americans, access to potentially life-saving medical treatment isn't based on what type of housing you have. But most Americans aren't Bill Gies.

Bill has lung cancer. Depending on what upcoming tests reveal, doctors may decide that he could benefit from surgery. There may, however, be an obstacle if they move from their mobile home into a camper trailer.

"We currently have a mobile home to live in," says Bill's wife Vicki, "but we don't know whether we're going to get to stay there." The property is changing hands, and the couple may be forced to leave. "That's why we bought a camper trailer," adds Bill.

What does a mobile home versus a camper trailer have to do with the cancer in Bill's left lung? Everything. That's because an approved place to reside during treatment is a requirement for the procedures Bill may need.

His second bout with cancer

Bill is no stranger to lung cancer and its treatment. "They took a quarter of my right lung out about seven years ago. I had to go back once a week for chemo, then once a month." At the time, Bill and Vicki were living in an apartment. "When we lost our apartment, they cut my treatment off." Bill attributes the abrupt end of his treatment to the couple's homelessness.

Meanwhile, tumors were growing in his other lung. "I'm going to Parkland to get lung X-rays, CT scans, an MRI, and a blood draw. The kind of treatment I need depends on the size of the tumors. Whether I can even get the treatment I need depends on whether they consider our camper trailer a permanent structure. They'll either accept it as a stable place to live or they won't."

While Bill is wary of the bureaucratic rules governing public health care, both he and Vicki appreciate the care they've received through the years. Vicki has a relationship with Parkland that goes back two decades. "I go to the clinic at The Stewpot, which is part of the Parkland HOMES program for low-income and homeless people. Everybody's been helpful."

Routine visits help with controlling her COPD, chronic migraines, high blood cholesterol, thyroid problems, and acid reflux. "I have an ultrasound coming up for a growth on my leg. A year ago, when we were living in the woods out near White Rock Lake, I tripped over a vine and messed up my knee, so they're going to check it."



Bill and Vicki. Photo courtesy of Suzanne Erick-

She attributes most of her health challenges to drug use in her past. "I wasn't doing what I needed to be doing for my body." In the years since she quit using, Vicki has tried to make up for the previous neglect. She also wrestles with the inevitable changes that come with being 70. "I have lots of arthritis. I call it Arthur being nasty to me — Arthur Itis."

Bill's gratitude for the lung cancer surgery and chemotherapy he had seven years ago is counterposed by his frustrations with the system. "You make an appointment, and then you sit and wait. The longest I waited was eight hours." Bill tells of one doctor who admitted to not caring what happened to him. He also notes that other doctors sympathized with his problems. "The nurses are pretty nice. There's one who gives me a lollipop every time she sees me."

Taking one day at a time

As Bill and Vicki wait for his test results, a treatment plan and a decision as to whether their camper trailer meets the residence requirement, they try to enjoy their life together, as they have since meeting at The Bridge Homeless Recovery Center in 2010. "Best thing for us to do is take the camper to the lake and go fishing and just relax."

Relaxing includes hanging out with their "critter family" of four dogs and four cats. "If it wasn't for our pets, I think we'd go stir crazy," says Bill, who holds Ebony, their longhaired cat, in his lap throughout the interview.

Naturally, Bill hopes to get good news about the lung tumors and a green light to receive whatever treatment he needs, but he's not nervous about it. "Whatever they say, it's okay." Whether the news is good or bad, he plans to enjoy his time.

Poppy Sundeen, a Dallas writer, is a member of the STREETZine editorial board.

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They built a platform so everyone could see and hear what hadn't been heard or seen in the city for a while. When Ezra opens the book in the sight of all the people, for he was standing above the people, and when he opened it, all the people stood up. Then Ezra blessed the Lord, and the people lifted up their hands and said "Amen, amen." Then they bowed their heads and worshipped with their faces to the ground.

Why wouldn't they cry at the sound of God's word being read aloud for the first time in a long time on land they feared they'd never again walk on, in front of a rebuilt wall that's now the only reminder of the place they once called home. Why wouldn't they wail? Mourning came easy to them in exile.

They mourned and weeped for the same reasons we would. All the familiar signs indicate God is near: The rebuilt wall and homes, the sound of God's word being read, the rhythm of the Amens. But each familiar sign is also a reminder of what's missing: The temple is now a wooden platform, many have returned but many more haven't, the rest of the city is still in ruins.

Halfway home existence

We could stop there and commiserate with their condition. There is plenty to lament about the halfway home existence of life these days. It would be routine, right on time, for us to join the worshippers at the rebuilt wall in noticing what's only halfway back to what we remember as normal. And if we are honest with each other, what we are just now acknowledging never was.

Some of us have found refuge inside newly rebuilt walls protecting our health, our money, our access to education, our access to clean water and safe places for our children to play. Walls are being built to protect the vulnerable from being exiled again, but it's taking longer than 52 days.

Some of us have found refuge inside newly rebuilt walls protecting our health, our money, our access to education, our access to clean water and safe places for our children to play. Walls are being built to protect the vulnerable from being exiled again, but it's taking longer than 52 days.

Nehemiah and the priests break the routine with an unexpected instruction to start a party. For all the people wept when they heard the words of the law. But then he said to them, "Go your way, eat the fat and drink sweet wine, and send portions of them to those for who nothing is prepared, for this day is holy to our lord, and do not be grieved for the joy of the Lord is your strength."

Their mourning, not Nehemiah's joy, is more familiar to us. The already but not quite yet nature of their existence recalls our own. It took 52 days for Nehemiah to build the wall, but restoring their hope and renewing their joy will take longer.

Globally, millions of God's children have died from COVID. Our young and old have suffered from the isolation. Parents are just barely hanging on. Relationships at home are stressed. Workers are fed up with their employers. Trust in government to solve problems for the benefit of the common good is fleeting.

More than anything else, what I notice is the absence of joy. It's not that it's been extinguished, never to return. Even a 24-month pandemic induced exile from each other, coupled with twin existential crises of climate change and inequality, can't kill joy. Joy hasn't died. but right now, the social conventions of this season dictate that unless we are outraged, angry, distressed, exhausted, or sad, then it's better to just shut up and mind your business.

But the joy of the Lord is our strength.

Remember the family in the empty apartment? I don't know their names, but I will never forget their faces when we offered to go out and buy them groceries. You might think that they were relieved, or embarrassed that they were dependent, for that moment, on the gifts of someone else. But they were neither relieved nor embarrassed.

They were thankful and we remained friends after that first visit. Several months later, after they settled into their new life and their apartment was filled with enough furniture, they came by our home unannounced, to drop off a gift. Their gift was unusual. It was a set of plates.

At the time, I did not understand the hidden meaning of that gift. Now I do. A family that we first encountered eating ketchup for dinner, expressed their gratitude with a collection of empty dinner plates.

The Rev. Amos Disasa is senior pastor of the First Presbyterian Church of Dallas.

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Quick Take with Kyla Rankin

Kyla Rankin serves as project director of Parkland Health's Homeless Outreach Medical Services program, or HOMES. The initiative operates one of its three fixed-sites clinics at The Stewpot.

A trained social worker, Rankin has been with HOMES for 22 years. She recently fielded questions from STREET-Zine about the work of HOMES and how it attempts to meet the health care needs of people in Dallas County who are experiencing homelessness. Here is an excerpt of that conversation.

Tell us how you all do your work and where do you do it?

We generally do our medical and dental work through two methods.

First, we have three fixed-site clinics. One is at The Stewpot. One is at The Bridge. And one is at Homeward Bound's operation through Dallas Deflects. We provide primary care at those three locations.

We also provide primary care through our mobile medical units. We operate four of those units simultaneously throughout Dallas County. They go to locations from 8 a.m. to 8 p.m., Monday thru Thursday. On Fridays, they go from 8 a.m. thru noon.

Where do the mobile units go?

Generally, they go where we see a presence of people experiencing homelessness, such as a homeless shelter. The mobile units collaborate with shelters and other homeless service providers to offer care.

What health conditions do you all generally see?

Our annual data shows the top diagnoses are related to hypertension, diabetes, mental health, and substance abuse. In other words, not too different from the general population.

At The Stewpot, for example, how do you meet those needs?

We do both a medical and dental clinic there. The Stewpot staff registers patients, a nurse checks them for their chief complaints, and then the nurse practitioner or doctor sees the client and addresses their needs.

Do you see any unusual trends, like the K-2 drug use that was a problem a few years ago among some people experiencing homelessness?

At the moment, we don't see any unusual trends just among the homeless population. But there are factors that

affect our patients that are not community-wide issues. One example is food insecurity. Providing access to healthy foods could help patients better manage their diabetes.

You mentioned the K-2 problem of a few years ago. We have gotten federal funding for medication-assisted treatment (MAT), which is used to sustain recovery and prevent overdoses. We offer a whole-day clinic each Monday at The Bridge in downtown Dallas. We also provide a transgender clinic at The Stewpot on Tuesdays. And we treat people for HIV. There is a focus on integrating that service into primary care. That way, it can help provide education and prevention for HIV.

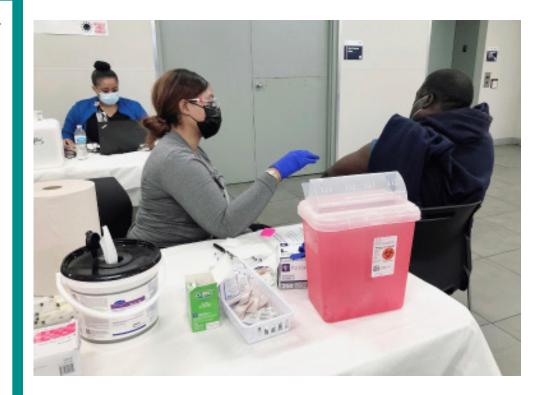
Do you tend to see the same clients repeatedly or do you see people more on a one-off basis?

It depends on the situation. We have some who come frequently to a location. But you have to dig into why they are coming back repeatedly. Are there things we could do from a staffing perspective that are not medically centered? For example, are they coming back for socialization reasons? If so, we may need to get them engaged with our behavioral health team.

Most common chronic health conditions among people experiencing homelessness:

Allergic condition	49.4%
Anemia	29.7%
Asthma	24.2%
Diabetes (mellitus)	26.2%
Heart disease	45.5%
Viral hepatitis	17.5%
High blood pressure	49.4%
Kidney disease	27.5%
Chronic obstructive lung disease.	23.0%
Neoplastic disease	28.3%
Malignant neoplastic disease	20.3%
Obesity	18.5%
Disorder of mouth	24.1%
Disorder of soft tissue of head	18.8%
Ulcer	15.7%

Source: U.S. Department of Health and Human Services



Writers' Workshop Essays

Editor's Note: Each Friday morning at 10 a.m., The Stewpot hosts a Writers' Workshop. During the sessions, participants address selected topics through prose or poetry. In this edition of STREETZine, we feature the essays of writers and the poetry of one of our regular participants.

Living a Healthier Life

By Darin Thomas

My health problems became my death sentence. High blood pressure. Diabetes. I didn't care anything about my health or myself. I had to want help for my health and myself.

One day, I thought that I am slowly killing myself. I looked in the mirror and didn't like what I saw: skin and bones. I then saw that I needed help. At one time, I didn't care about taking my meds or eating right. I also was sick on drugs

Through a series of events, I ended up in county jail. And thank God I did. I was in jail, but at least I wasn't dead.

I went from there back to living on the streets. But I had a new mindset to stay healthy and to stay clean of drugs. Looking back, it was crazy how I used to live. But I woke up and smelled the coffee.

Now I watch what I eat and take better care of myself. I walk and exercise regularly. My health is good and I take better care of myself. I take my meds and treat my life more seriously.

You can do this, too. But don't let it get too late. Take care of yourself so you can live longer. Watch what you eat. Stay focused on yourself. If you want help, it's out there.

And believe that you can get better. I believe that if people want help, they will get help. And if they don't, they won't.

I almost killed myself by not taking care of myself. Now, I am caring for myself.

Darin Thomas is a STREETZine vendor and a participant in The Stewpot's Writers' Workshop.

South Dallas Texas

By QtheGreo

If you've never seen a jungle and you live in the city, a blind man has seen more of the world than you ever have. Although, you can smell South Dallas before you see it.

You smell the dread in the air thick as rotting eggs. It's locked in the air where most can't afford to breathe in. Maybe that's why they call the men with locs here "dreads." When I walk to the MLK DART station, I'm reminded what it feels like to pass the walking dead.

Walking over cracks you don't want to step in because it feels like you'll be sucked in. There's so many here from all the times people broke down to the bones creating it. Their eyes look to the sky asking why they are still here. Their souls slip out of their body and into the cracks, sealing it. You've just witnessed the death of a human and the birth of a zombie.

Finding their new "home" in South Dallas tents. You don't know what it is? Well, look no further than a bus stop, where Marlboro boxes and 40's are bread and water. You are asking "Well, ain't they just killing themselves?" Remember their soul is in a crack somewhere.

"Then leave them alone, they already gave up." If you agree with these statements, then look at it like this. How do you tell these people not to give up when they have no roof over their head, and they still can't see the light? You don't know what misery is till you've seen tears counting cents in these tents.

QtheGreo is a participant in The Stewpot's Writers' Workshop.

Housing

By Ty Umondak

Housing has been a struggle for a man who spent 14 years in a bubble. Society said housing would be affordable so why do I sit in a shelter eating food that's deplorable? Is assistance non-existent for those who say no to vaccination and have chosen to stand on faith within the crisis of our nation? Politics, advocates, what do those words mean to a person living on the street yet living in the land of plenty?

Is lip service a disservice to those who are living this reality? If so, we both have played our part in this awful tragedy!

Ty Umondak is a participant in the Stewpot's Writers' Workshop.

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Writers' Workshop Essays

The Struggle of Summer

By Larry Jackson

The anticipation of the season of summer. Summer alone brings on a buzz in the air. From youth to adulthood there's something special about the summer season. The hottest season of the four in the 12-month calendar.

When I reflect back on summer, I have to look at the many excitements and hazards that come along with the season. From lighter dress clothes to outdoor play to work. The summer breeze opens up the door of enjoyment.

Because of the high temperature, caution has to be taken. Health care must be the focal point. Hydration is very important in this season. Staying hydrated is one of the most important formulas, along with eating proper food, to combat the high heat of summer. Missing these two steps can bring on many health problems. Overheating, anger, excitement could cause problems in this season.

Over the years I have learned to manage these hazards. Now in my adulthood, I've learned to take advantage of the early morning hours and late afternoon hours. This formula has become my way of life. Making way so I can enjoy the special season of summer.

I enjoy all four seasons. All four seasons bring on a different attribute. The best challenge is to live all four seasons without struggle or hazard.

From a kid up to adulthood, summer has always been one of my special seasons. Minimizing the struggle and hazards of life is key to a long life. Summer breezes make me feel fine, blowing through the jazz in my mind.

Larry Jackson is a participant in The Stewpot's Writers' Workshop and a STREETZine vendor.

What I Have Learned Being Houseless

By David Yisrael

A pivotal moment in my life came when I first became "homeless" (though I prefer the term "houseless" as the Earth is my home). My first encounter with houselessness came about two decades ago when I vacated my second habitation when the living situation fell apart. I didn't have enough money to continue there and the place was a dump anyhow.

I remember basically abandoning all my belongings in front of the building even as a distant acquaintance of mine tried to dissuade me from my decision. As I informed him that I believed God would take care of me and that I wasn't worried, a bird flew overhead in such a way that I took it for a sign.

Afterwards I found myself in a facility for "homeless" individuals, one of the many I would find myself in over the years. As I proceeded through the years, I noticed that some organizations and individuals tasked with helping the "homeless" were in fact hellbent on causing more damage than anything else.

I also saw that one's relationship with the Creative Force that runs the universe (God) is imperative to one's survival, especially in these trying circumstances. Becoming houseless has caused me to grow long spiritual roots.

There have been times that I can recall living on the street that have allowed me to see the Creator's power at work. There was a time in particular where I was under severe spiritual oppression, and I felt I had hit rock bottom. But it was my relationship with God and my reliance on Him and Him alone that helped me get through my painful ordeal.

Just when I would think that all hope was lost, a little ray of sunlight of God's favor would reach me in the abyss. That gave me hope to continue one more day.

I have had many experiences like this throughout the years that help cement the fact in my mind that God is real. I believe that a large part of the reason I am houseless is to learn this priceless lesson and to help others going through similar adversities. I want everyone experiencing houselessness to know not to give up but to walk with God and He will provide your every need and some things you weren't necessarily looking for. God has glorious things planned for those who are trying to walk the right path, so never give in and never give up on God!

David Yisrael is a participant in The Stewpot's Writers' Workshop.

From Jobless to Getting a Job

By Gershon Trunnell

Having no job is tough. No power of income and being stereotyped as "homeless."

Fast forward to the greatest depression of our generation. Since the COVID pandemic, the job market is at an all-time high. Everyone is hiring with requirements to get the vaccine. But some good, well-deserving people will remain unemployed because they do not want the shot.

My grandniece told me that she was tired of working for companies with such requirements. I told her to take her gifts and talents to support herself. She started baking and has been doing well.

I myself am disabled after a fall off a seven-store building, where I was working as a leading roofer in Savannah, Georgia.

I adapted to my change the same way I use my gifts and talents to support myself. Thankfully, there are places that I can go to and use these resources.

With the cost of living going up and wages not going up with it, more people are finding life to be more difficult to manage. With some people having to take more than one job, or work more hours with companies being shorthanded, this should be a great opportunity for people to come together with business and start the economic wheel back rolling.

Being a person of spirit, I see the side of the pandemic the world closes its eyes and ears to. Being aware of the signs of the time, I am sure not to fall into the trap of being of the world. I, for one, am thankful to be able to use my gifts and talents to be self-sufficient.

Gershon Trunnell is a Stewpot artist and a participant in the Writers' Workshop.



Artwork by Stewpot artist Edwin Fuller.

A View from Nature

Who is faster: The Tortoise or Her?

By Vicki Gies

I lived the homeless life off and on for 15 years. During that time, I discovered that life was not always depressing! I love nature, being outdoors, and observing all that is happening around me. One day I had the idea to write about my observations, some of which are very amusing. This is one of my short stories about my adventures in homelessness.

To me, life in the country is comforting, adventurous, and exciting. I love looking at various homes, horses, and cows in the pasture, and watching for other bits of nature.

While running errands one day, I spotted something in the road ahead. It was kind of big and round, possibly a large rock. Upon closer observation, I saw that it was a big turtle sitting in the right lane of the road. I got out of our vehicle, thinking I would pick it up and put it in the grass so that it would not get run over.

It was big enough to cause a car or small truck to have a wreck! Upon final approach toward the turtle, I bent down to pick it up, and it turned its head and looked at me as if to say, "You're not picking me up," as it scooted across the road as fast as it could.

It went on into the grass and I thought to myself, "The hare wouldn't have stood a chance with this speed-demon of a turtle!" Its actions caused me to laugh. I was standing in the middle of the road telling this turtle to get out of the road. I had never had a turtle run away from me. Swim away, yes! But not run (or crawl!).

About that time, a truck came down the road, The driver stopped and looked at me, probably wondering why I was standing in the middle of the road and who I was talking to.

I've always wanted to help animals in any physical way I could. I trust animals more than people. Animals won't lie; they won't steal (unless they're hungry!); they're not greedy; and they'll only fight to survive, not to prove anything.

For that reason, I dedicate this essay to all those turtles who didn't make it across the roads and highways.

Vicki Gies is a STREETZine vendor and frequent STREETZine contributor.

Around The Stewpot: Mobile Mammograms

By Becky Zamora

The Stewpot's partnership with Parkland Health and the Mobile Mammography Unit began in the fall of 2012. I was searching online for programs that could come to The Stewpot to provide services that many of our clients would not regularly have access to when I found a flyer for mammogram events that Parkland sponsored.

I submitted an email to Parkland requesting information and soon received an email response from their Community Development Specialist, Vickie Henry. She helped me get started and we set the first date for the Mobile Mammography Unit to come to The Stewpot in January 2013. The Parkland Mobile Mammography Unit comes out every year in January or February and will hopefully continue to do so.

The mobile unit provides breast health education and no cost mammogram screenings.

The mobile unit provides breast health education and no cost mammogram screenings. The providers also help low- income individuals and families sign up for the Parkland Community Health Plan. Each year at least 30

women are screened. In the 10 years that we have partnered together, at least 300 women from our community have been seen.

Each year at least 30 women are screened. In the 10 years that we have partnered together, at least 300 women from our community have been seen.

All women who come to receive a mammogram must be prescheduled. When they arrive, there is a quick check-in where I.D. and proof of address is requested. The next step is the breast health education.

Because a large portion of the clientele that we see are Spanish-only speakers, Parkland provides bilingual educators. The educators are intelligent, kind, and very understanding. They ask what you know about mammograms, share information, and help by teaching correct ways to do breast self-exams at home. They bring props to help us understand and know what lumps in the breast and other abnormalities feel and look like. During this time, the client can ask any and all questions. After this portion, clients wait to be called to screening.

The mobile unit is that — a large R.V. that has been converted into a screening center. Upon walking in, the patient steps into a small waiting area, near the front of the R.V. Once the breast x-ray machine is ready, the patient can change. This is a small

closet where they can lock the door and put the paper gown on. There are two doors to this changing room — the door they walked in from the waiting area and a door that opens to the back room where the machine is located. Only the technician who is running the machine is in there with the patient.

After the exam is complete, the technician informs the patient that the images will be reviewed by the doctors, and they should receive your results within the next week or so. If anything comes up abnormal, they will be contacted and asked to make an appointment to see a specialist.

Clients have commented how they are grateful that we provide this service at our location. Many have said that there is a huge sense of relief knowing that they have been able to have the mammogram. One client who received abnormal results said that she was scared and did not know what to expect after receiving the news. She called me and asked what she should do. I informed her that she was going to receive a call from a scheduler at Parkland for a second appointment. She was able to go in and get reexamined. Second results showed that she had nothing to worry about. Many times, women are not so lucky and end up having to remove affected tissues.

Having a mammogram done is an important part of helping a person reduce breast cancer and related risks. When to begin getting your mammogram done and how often to do it depends on your age. You should get your first mammogram between the ages of 35-40. You should get your mammogram done yearly between the ages of 40-54. After these ages, a mammogram every two years is advised.

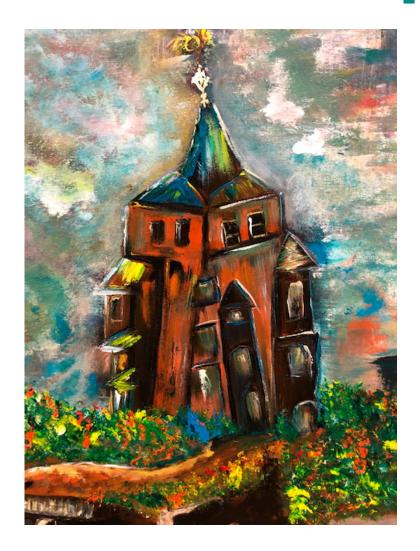
Access to health care is a huge need in our community, so we are grateful for the work of this mobile unit. So much so that we have discussed adding additional dates for it to come out to help serve other community members.

Becky Zamora is manager of Family Stabilization Programs at The Stewpot.



Photo courtesy of Becky Zamora.

Stewpot Artists



Teresa Zacarias



Stephen Kehr







Luis Arispe

Street Newspapers - A Voice for the Homeless & Impoverished

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