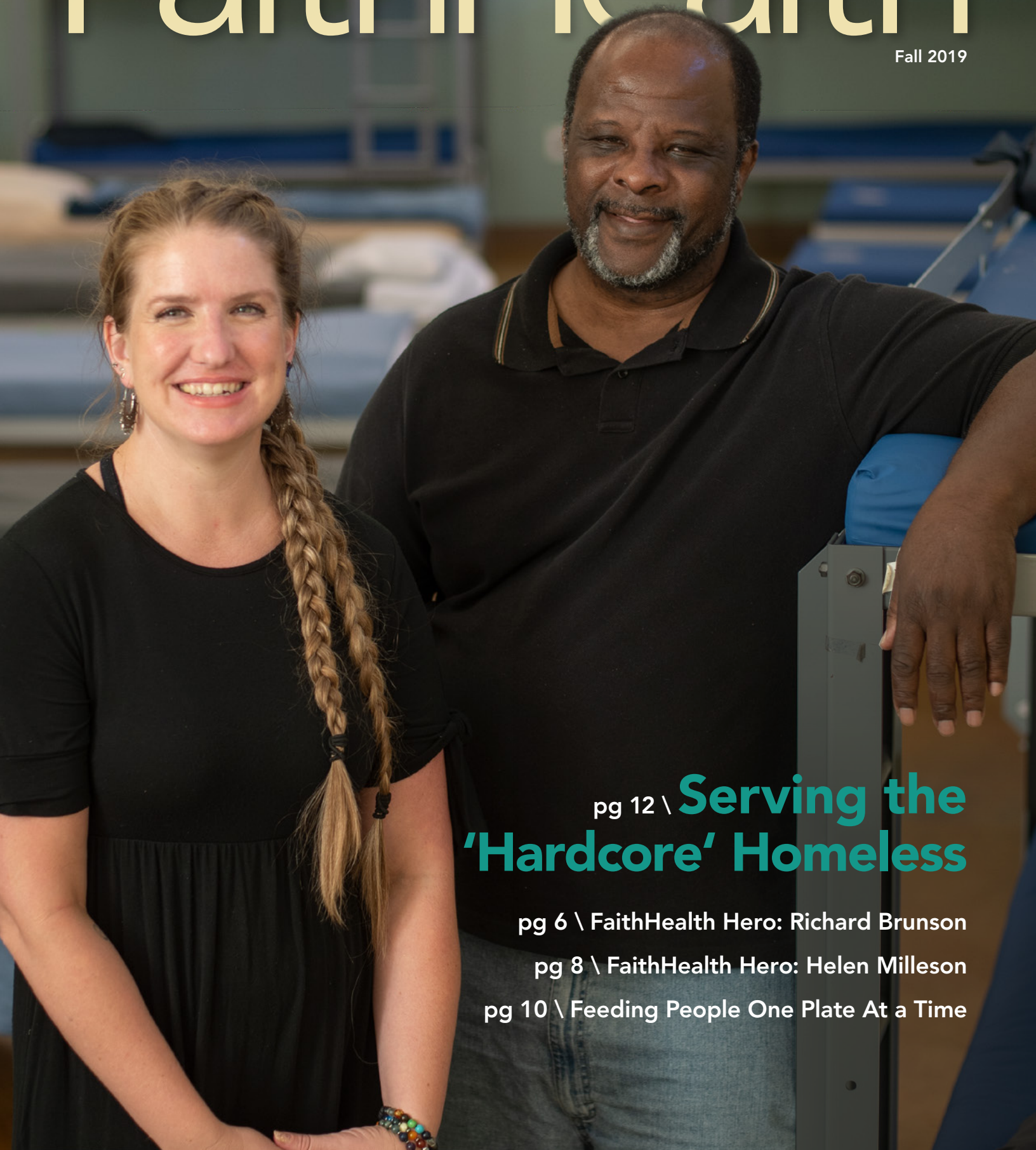


A MAGAZINE OF THE DIVISION OF FAITHHEALTH \ WAKE FOREST BAPTIST HEALTH

# FaithHealth

Fall 2019



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## What If the Heroic Act Were Simply Normal?

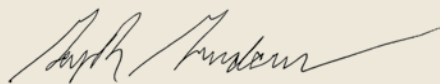
This issue of *FaithHealth* looks like it is about heroes and heroines who spend their lives nurturing the lives of others. You know people who could have been one of these stories. You might be one yourself! They are noble, tenacious, generous and often clever at finding a way out for people at the very end of their rope of hope. They find a way to bring together assets and resources others simply can't see and weave it into the safety net someone needs just before they hit the ground.

This issue, though, is really about something different: how these heroes and heroines are lighting the way to what should simply be normal in every hospital, church, social service organization and local government on the planet. What if what now seems heroic were simply normal?

I used to work at another hospital that gave out awards to employees who did beyond-the-call-of-duty things for patients and families—"Miracles. In Motion." It feels good to honor those actions. But it should not take a miracle for every relevant human being to come together when another human needs help. It may not be—but should be—normal to rush toward the burning house to rescue the homebound elder, to step into the line of fire aimed at a child and to step into the line of invective aimed at an undocumented family. A heroic individual might do that one time. A grown-up makes sure that all the systems and structures are organized to do it every time.

FaithHealth is generous, proactive, merciful. It hopes for justice and won't quit. It is normal behavior informed by mature faith and relevant science. It is simply doing what is possible and therefore obligatory. We know what it looks like: Everyone gets to the right door, at the right time, ready to be healed, and never alone.

We see thousands of patients every single day at Wake Forest Baptist Health. And almost 2,800 clergy are registered to visit our patients—their members and neighbors. We don't get it right every time. But we are beginning to see a world in which the right thing is the normal thing.



Gary Gunderson, MDiv, DMin, DDiv  
Vice President, FaithHealth



Rev. Gary R. Gunderson

*FaithHealth is  
generous, proactive,  
merciful.*



# FaithHealth

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# Life's Most Fundamental Current *Shapes* FaithHealth

BY GARY GUNDERSON

**N**orth Carolina sticks dangerously far out into the Atlantic Ocean, so we pay close attention to hurricanes and how they move. The vortex of swirling winds seems like it could bludgeon its way anywhere it might want to go. Actually, those winds go where greater forces allow. They are pulled, more than pushed, by “steering currents.” That’s what you watch.

We learn from pain and things we fear. Dr. Jonas Salk figured out how to eliminate polio by knowing the virus so intimately he could imagine how it spread. Then he asked whether health could also spread like an epidemic! He began to think of himself as a positive viral agent. We can learn from hurricanes, too, beginning with the role of steering currents.

Hospitals have millions of square feet and billions of dollars of technology. Sometimes we think we could do anything we want. But without steering values and relevant science, we just spin in place. Watch the steering current. It is drawing us into very unprecedented places these days along with churches, government, media, schools and anything social. We are all being steered into alignment. Although none of us is

powerful enough to organize it, we are becoming part of each other’s systems. And this is happening fastest where the stormy social conditions are the hottest, the problems drawing us across old boundaries.

Hurricanes are deadly because of everything they do, not just the wind OR rain OR storm surge OR tornadoes. FaithHealth is powerful the exact opposite way. It’s the whole thing, not this or that program. It’s the trust engendered by kind-hearted faith, the practical tenacity of the Samaritan, the empathy amid the trauma, the audacity of building massive institutions, the constant curiosity about what might be possible and the humility to do just one more right thing to help some stranger. That whole tumbling swirl crosses over any boundary to do good.

Hurricanes are hard to predict from one day to the next. But they follow patterns and seasons in which small storms in the African Sahel turn into the largest natural weather phenomenon

**WITHOUT STEERING  
VALUES AND RELEVANT  
SCIENCE, WE JUST SPIN  
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thousands of miles away — every year. FaithHealth begins with a small spinning storm of values and science that rides social currents and sometimes grows into a massive phenomenon capable of creating hundreds of billions of dollars of hundreds of hospitals. That’s why there’s a hospital on Hawthorne Hill in Winston-Salem. An even smaller thing happened in the 1840s when a single Episcopal laywoman started two mustard-seed hospitals in Charlotte (one black, one white) that grew up to be Atrium.

Today the currents of values and science are blowing in a new direction. Health organizations (hospitals, clinics and public health) are moving beyond the era of high-tech interventional medicine into complex engagement with social, psychological and spiritual drivers. Once, we could draw the line at fixing the broken arm; now we cannot ignore what we know about the interpersonal violence that broke it — and the signals of even more damaging wounds. Once, we had empathy with the emotional damage suffered by the young; now we know those “adverse childhood experiences” shape health problems decades later in the form of high-cost chronic and debilitating conditions. We have to act. We once felt sorry about babies born into poverty; now we know that the patterns of poor nutrition and anxiety before age 3 are nearly impossible to reverse later. We have to act.

Programs built to fix things find there is no end to fixing. Medicaid, designed to help the health of the poor, ends with an endless array of targeted medical interventions to fix the bodies of those “at risk of risks.” The poor are prey to every negative process in our towns and neighborhoods — bad schools, sanitation, housing, food, safety, transportation, employment. Even the churches tend to be tattered, some from



over (and some under) use. We now know how to score these stressors of adverse experience. A score of more than six (out of a possible 20) predicts many times higher rates of diabetes, depression and other chronic conditions in middle age. Of course, it does. We have to act in entirely new ways.

You could stand on the roof of Baptist Hospital right where we put the world's largest Moravian star on Christmas and see every bit of this going on in the neighborhoods below — the very same neighborhoods where these deadly swirling currents recreated another generation of poor conditions 40 years ago. We will never catch up with the damage. Are there any steering currents that lead toward life, fullness, hope and health?

A good place to start would be exactly where the Baptists did a hundred years ago, facing a similarly daunting array of social disruptions. They created two institutions in the very same meeting: the Children's Home and the hospital. Both were intended to be extensions of the church into medicine and social work. The linkage worked the other way, too. The hospital had a nursing school with each nurse assigned to a local congregation to bring medical science into its ministries with the most vulnerable. That is still a good idea, essentially the logic of FaithHealthNC in a mustard seed.

FaithHealth is one word precisely because science and faith are inseparable in the phenomenon we call life. You can describe a lifespan using the language of health indicators or by using more spiritual terms — meaning, awe, lament and faith. The new science steers us back into human complexity in which every broken elbow has biomedical, psychological, social and spiritual facets best dealt with in an integrated way. And the struggle of faith — especially at the

congregational level — steers us back toward Jesus' model of constant failure to look away from the bodies crying out for healing, the demons screaming for release, the loneliness of the stigmatized and unforgiven.

Religious scholar Martin Marty once noted that Jesus spent a third of his time healing. Looking through today's science helps us recognize a more complex weave of bio-psycho-social-spiritual drivers of shalom. Jesus spent 98 percent of his time doing FaithHealth and beckons us to do the same. That's why the Baptists invented a hospital in the early 1900s. It's why there are faith-based hospitals of every faith in every corner of the world.

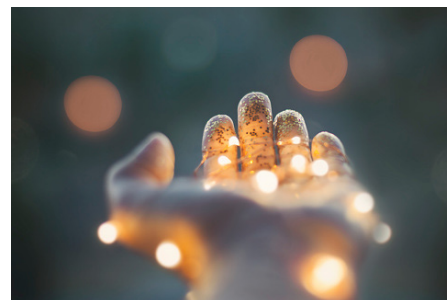
The steering currents draw us to learn the arts of generativity, not just fixing bad things. This forces us to turn around, as currently all the "helping professions" are organized around an ever-more-detailed list of things gone wrong. A hospital electronic medical computer has 87,000 codes for the conditions we will try to fix (and charge for). The problems compete, fracturing our attention, time and money amid a goose chase of appointments, billings and big boxes of expensive pills.

The steering currents are not entirely new. Jesus didn't offer healing in the sense of a reversal to a previous state. You don't go back in life. Rather, he offered freedom to align our life with generosity and generativity. This was — and is — abundance of such degree that you never need to measure it whether talking of healing, forgiveness, mercy or justice. It's not a miracle; it is moving with the most fundamental current of life.

All humans heal and hurt in different seasons as we are born, die and live all along the way, dependent on the kindness of others, especially in these hard-hearted times. Jesus started by healing the disconnection, the original

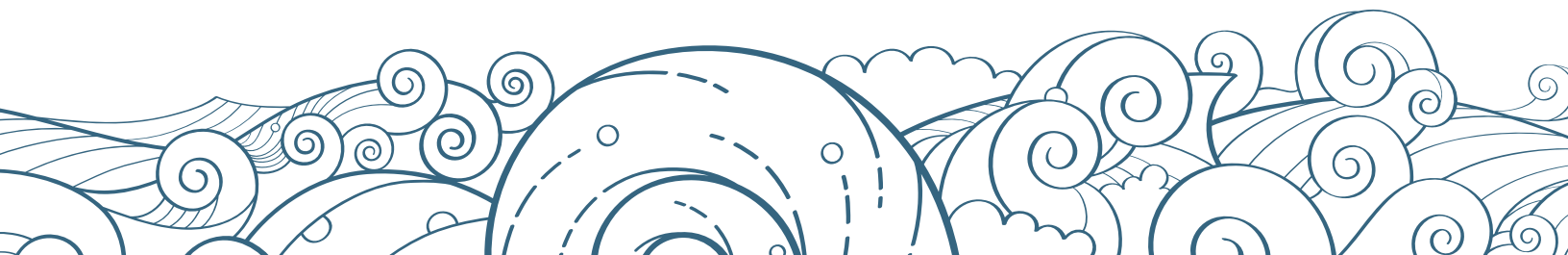
adverse experience of human separation from each other and our source of life. The season of vitriol makes it seem smart to bet on short-term politics, perverse business models, stealing from health-creating work to build bigger barns of privilege. Foolishness, said Jesus along with every prophet and grandmother for 4,000 years. In the spirit of the prophet

## THE STEERING CURRENTS DRAW US TO LEARN THE ARTS OF GENERATIVITY, NOT JUST FIXING BAD THINGS.



Micah, we know where to steer: love mercy, do justice and work with a kind and humble heart. Anything else is sinking sand.

Maybe we are being steered toward communities in which it is normal to be connected with such grace and generosity that we could all expect that in our moment of dependency we could count on the human and institutional networks to help us toward the right door (and unlock it). And help us recognize the right time in our struggle to get there (diabetes, depression and gunshots being different). And help us be ready to be a partner with those ready to heal (having our bag of pills and paperwork). And that we're already in relationships of trust that we knew were part of the human systems of life, never alone.





# FaithHealth Hero

## Richard Brunson, Baptists on Mission

BY MELANIE RASKIN



**R**ichard Brunson is waiting. It is Sept. 4, and Category 2 Hurricane Dorian is churning up the East Coast toward North Carolina. He has done all he can: He has contacted churches to help stage people and supplies, alerted volunteers and reached out to other states for possible support.

There is a tingle, a feeling he gets in his gut: It is a familiar high-alert energy that needs someplace to go. Fast. He is strung tight like an archer's bow, ready to release into the disaster area hundreds of caring Baptists on Mission volunteers. Their target? Anyone who is hurting and needs help in the aftermath of the storm.

That's why Richard Brunson is a FaithHealth Hero.

Brunson joined Baptists on Mission part time in 1982, went full time in 1987 and became executive director in 1992. He mobilizes churches and individuals across the globe to make an impact using their gifts of spirit. Volunteers serve in 18 ministries around the world, including medical/dental, reconstruction/rebuilding/handyman, meals, colleges, families, international missions, prayer, children, men, church renewal,

**BRUNSON USES AN UNUSUAL COMBINATION OF EMPATHY AND ACTIVATION TO KEEP PEOPLE READY AND ENGAGED.**

agriculture, sports/recreation, aviation and disaster relief/recovery.

An ordained pastor, he doesn't serve a church; he serves the world. His flock isn't in a church pew; they are in the trenches, volunteering in communities to help others in need. Jesus' words perfectly sum up his service philosophy: As the Father sent me, I am sending you. Brunson firmly and enthusiastically believes every Christian is a minister. They're just waiting for God's prodding. But he is quick to point out that he is part of a team, quipping, "There is a sign on my wall I refer to often. It says, 'Lord let your miracles break forth every day, and let me not get in the way.' Our staff and volunteers are tremendous — my job is to stay out of their way!"

Leland Kerr, Baptist health care liaison, has seen Brunson's philosophy in action for more than 30 years. "A hero is someone who shares the love of Christ in any situation they find themselves. That's Richard," says Kerr. "He loves people — both those who are hurting and those who want to serve. He has a real passion for helping volunteers find their gifts in ministry. He puts people where they need to be and turns them loose to do the work."

It's working. National agencies (the Federal Emergency Management Agency, the Red Cross, state governments) trust Brunson because they've seen his integrity and follow-through, reliability and accountability, over the last 37 years.

"They know Baptists on Mission won't hit-and-run," Kerr explains. "After

Hurricane Katrina, Baptists on Mission stayed for over five years to finish the job of helping folks rebuild their homes and move forward. And they have a long-term, two-year commitment to rebuild after 2018's destructive Hurricane Florence. They work as long as it takes to get people back into their homes. Richard reminds us when people are hurting, we need to respond."

Case in point: Brunson tells a story of a homeowner devastated by Hurricane Florence in 2018. His wife had a stroke, and his house was flooded. The man was in such despair, he was contemplating taking his own life. Baptists on Mission arrived and turned everything around for the family.

"Hope is the greatest thing we can provide in times of uncertainty and change," Brunson comments. "Yes, people need professionals on the job to rebuild homes and clean up communities, but I believe they also need us. We are different. We take the time to get to know the people we are helping, we pray with them, we talk with them, we listen to them. Knowing that we make a difference in even one person's life motivates me. This is what I was created to do. This is where I get my biggest joy."

Brunson uses an unusual combination of empathy and activation to keep people ready and engaged. "Empathy is all about seeing people who need support and wanting to help," he explains. "The activation part has me always thinking three steps ahead, whether it's placing people or getting



**Richard Brunson leads Baptists on Mission into areas dealing with the aftermath of disasters, as they did in eastern North Carolina following Hurricane Florence in 2018.**

supplies. For instance, if the food hasn't shown up on a site, I've already thought about where I can go to get some and keep our mission on track. Yes, there are obstacles. Sure, we can feel overwhelmed. But at the end of the day, we follow our gut, we block out that little voice that only wants to talk about the problems, we return to God's leading and we make progress."

To Brunson, the perfect world in terms of service is one of great activity — and great surrender. "I think about all the needs," he says. "I think about the volunteers. I think about all the ways we could make a difference. But we have to remember what Ephesians 3

tells us: God is able to do more than we can ever imagine. This is God's work, and He is going to accomplish what is important and makes a difference. That is my perfect world: a place where all Christians see that they are gifted, called and sent to use their gifts to glorify God and help others."

Sometimes, bad things happen — natural and manmade disasters, personal failures, tough times. But Brunson is quick to point out a verse from Romans: "And we know that all things work together for good to those who love God, to those who are called according to His purpose." For many people, Christian or not, North Carolinian or a member

of a village half a world away, that good comes thanks to Richard Brunson and Baptists on Mission. When the yellow shirts start showing up, hurting people know help — both physical and spiritual — has arrived.

"You always wonder, are we going to be in the right place with the right things to serve people?" Brunson says. "Then we remember that God has opened a lot of doors. So, we'll be faithful, we'll be listening, and when the door opens, we'll confidently walk through with the right people and the right tools. We'll be God's hands and feet — whether it's a dental bus or disaster relief."



# FaithHealth Hero

## Helen Milleson, Randolph County Navigator

BY MELANIE RASKIN



**H**elen Milleson is living the dream, but it's not what you would expect.

For most people, that would mean wealth and fame, privilege and power. But for Milleson, a pastor's-kid-turned-pastor's-wife-turned-social worker, it is fulfilling her calling to unite her strong faith with her professional expertise to lift up people who fall through the cracks.

Milleson is a FaithHealth navigator in Randolph County. She is the compassionate, savvy professional who helps hospital patients bridge a wide gap: staying healthy after leaving the hospital. And that is about so much more than just medicine, Milleson discovered. Issues that affect health and drive patients back to the hospital emergency department include lack of transportation, unemployment, challenging living situations and homelessness, the absence of dental and pregnancy care, and a missing safety net (no agency or family support). In Randolph County, there is a lot of need, the work is endless ... and Milleson loves every second of it.

"I had been praying for so long for God to push me in another direction," she says. "When I heard about FaithHealth NC, I got chills. I knew this was what I was meant to do."

Her conviction shows. Milleson and her team of 19 volunteers have screened 1,363 patients since 2016. Their active caseload for August 2019 was more than 300 people. But this work is not for the faint-hearted. For inspiration,

she looks to John Wesley, the 18th century founder of Methodism, who said: "Do all the good you can, By all the means you can, In all the ways you can, In all the places you can, At all the times you can, To all the people you can, As long as ever you can."

"I love that quote," she says. "That's what I try to do—as much good as I can right now. One person at a time, we are making a difference."

Milleson's team has chosen to focus on supporting self-pay patients with their basic health needs, people who have lost or don't have insurance and can't qualify for Medicaid or the ACA. They are the working poor. FaithHealth Randolph takes a three-pronged approach to whole-person care:

- They help patients get medications for free via NC MedAssist (FaithHealth clients with diabetes receive \$2,000 in free medicines each month, with a total distribution of more than \$350,000 in free medications for patients since the program started in 2016).
- They direct patients to their federally qualified health center, Merce (giving program patients a primary care doctor and a new urgent care center for health emergencies).
- They arrange for financial aid at Randolph Health, the area hospital, as needed.

**MILLESON'S TEAM HAS CHOSEN TO FOCUS ON SUPPORTING SELF-PAY PATIENTS WITH THEIR BASIC HEALTH NEEDS, PEOPLE WHO HAVE LOST OR DON'T HAVE INSURANCE AND CAN'T QUALIFY FOR MEDICAID OR THE ACA.**

In a word: paperwork. They help patients get through mountains and mountains of complex paperwork. With a mission to connect patients to better health, Milleson's team has perfected a mapping process that identifies and introduces volunteers to vital community assets. In turn, volunteers then connect patients to the help and support they need.

It is especially important work today, considering how many rural hospitals are closing across the southeastern United States. FaithHealth improves patient outcomes and hospital bottom lines.

"There are no coincidences," Milleson states. "God puts people in your path to inspire you. For me, it's my parents, my husband, my kids, my FaithHealth colleagues and our team. Many of our volunteers have gone through rough times and come out on the other side even stronger. Now they are able to help others going through rough times. I love seeing volunteers get bitten, watching that light bulb go off as they realize they are making a difference to patients. I get a high from that!"

Milleson's program is so powerful, student interns who move on to other internships or get full-time jobs come



back to serve as volunteers. On the other end of the spectrum, Glenn, a retired Navy officer and a master of order and organization, volunteers 32 hours a week with FaithHealth Randolph County. That kind of passion is irrepressible—and unstoppable.

“Helen is a heroine whose whole life has been lived at the intersection of faith and health,” says Gary Gunderson, vice president for Faith and Health with Wake Forest Baptist Health. “She truly lives the utter integration in institutional settings that traditionally split them far apart. But thanks to her enormously practical credibility, she has carved out support for the integrated work. She is also amazing in that she always invites others to live into their more heroic selves

as part of the answer she manages to weave together around the needs of one human being at a time. And as she does this, one person at a time, she creates a pattern, a web of relationships. Everyone experiences the clean air that blows through the windows she throws open.”

The key to the program’s success is connections—to health care, to service agencies and nonprofits, to churches, to the community college, to the county and its citizens. “If I don’t know the answer, I know somebody who does,” Milleeson says. “That’s what navigation is all about: connecting the dots. And heart—you have to have a heart for this.”

But sometimes, hearts can be tried. Milleeson tells the story of a man who finally got Medicaid. Everyone was

excited, until they realized the reason he got it was because he was very sick. Only when he was dying of cancer did he finally get the help he needed. She is quick to point out that prayer is a big part of her FaithHealth ministry.

“Sometimes, obstacles and setbacks come. You just have to dig deeper and completely trust in God. We know God’s got this,” she says. “I really feel like this is a ministry that God wants us to do. He is blessing us with the outstanding volunteers who donate time and the patients we get to meet. But, when God blesses you, He expects a lot of you. We have a lot to live up to. I’m blessed to be a blessing.”



**“SOMETIMES, OBSTACLES AND SETBACKS COME. YOU JUST HAVE TO DIG DEEPER AND COMPLETELY TRUST IN GOD. WE KNOW GOD’S GOT THIS.”**

**HELEN MILLESON**



Vivián Joiner (left) and Stephanie Tyson

# Feeding People One Plate at a Time

## Restaurateurs Serve Up Great Food and Second Chances

BY ERIC WHITTINGTON

As restaurant owners, **Vivián Joiner** and **Stephanie Tyson** share a purpose. They own and operate a pair of restaurants in Winston-Salem's downtown arts district that are shining stars on the local food scene. The couple enjoy their work and take great pleasure in feeding people, literally and figuratively.

"Some people need a plate," Joiner says. "Some people come because they need a hug. Some people come because they need that place of comfort where they can just be, and people know them and they feel safe. Some people come for a combination of those or other things.

"Every day, we get to feed people, and it is one of the greatest privileges you can have."

For 17 years, Joiner and Tyson have managed the award-winning Sweet Potatoes, which serves southern-inspired, downhome cooking. In 2017, they opened Miss Ora's Kitchen, where Tyson serves fried chicken just like her grandmother, the restaurant's namesake, used to make.

Joiner runs the front of the house, managing the wait staff and hospitality. Tyson runs the back as the chef, managing the menu and the cooking staff.

Together, they feed the community in ways that go beyond preparing and serving meals.

### 'We Take People as They Come'

Since opening Sweet Potatoes in 2003, Joiner and Tyson have chosen to hire people that others would not. Perhaps they have served prison time or otherwise encountered troubles that might concern prospective employers.

"What is much more powerful about Chef Tyson and Vivián Joiner is the way in which, with a lot of grace, love and compassion, they hire individuals who otherwise would not have employment anywhere else," says Rev. Maria Teresa Jones, chaplaincy program manager for staff support at Wake Forest Baptist Health. "Maybe there's a blemish on their record, and others are not willing to take a chance.

"Stephanie and Vivián are intentional about hiring persons who, with a lot of love and grace and honoring their dignity as individuals, are able to generate income to support their families and do all the wonderful things that we all have a God-given right to do. They live their ministry of justice, compassion



and inclusion through the ways in which they hire and feed people."

Joiner and Tyson insist they did not plan to staff their restaurants in any specific fashion. It was more organic, they say, a matter of taking people as they come.

"I can only speak for myself, but I have a real, clear sense of what I consider to be fair," says Tyson, whose brothers and father got into trouble as young men and had difficulty regaining their footing in life. "It's not fair to keep punishing someone for the same thing over and over again. I mean, how are you supposed to make a living if nobody gives you a chance?"

"We pretty much take people as they come. If you're ready to do the right thing and you're willing to work hard and not do what you did anymore, we'll give you a chance. But make no mistake about it. If we hire you and you're not doing the right thing, bye. Because it's not right."

For the most part, the hiring approach has worked well.

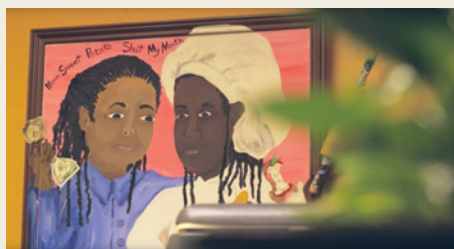
"If someone is just getting out and they are transitioning from prison to the population, maybe they're in a halfway house, people will say, 'Go down to Sweet Potatoes, and they'll get you a job,'" Joiner says. "Sometimes that works, even a lot of times, but it's not 100%, because you can't come just any kind of way and have it be OK."

One man they hired shortly after he completed a prison sentence has been with them for almost the entire 17 years Sweet Potatoes has been in business. Others who had "marks on their resume," in Joiner's words, have stayed for six or eight years and done well. One former Marine used his two-and-a-half year stint at the restaurant to help launch a hair salon business in Florida and a career as a motivational speaker.

"He had a plan," Joiner says. "And then there are the others. If you listen to your own hype, sometimes you slip back into old patterns. For the most part, those who come through have continued to soar beyond."

### Blessed with Success and Purpose

Growing up in Winston-Salem, Tyson was sure she wanted to soar someplace else. She "left here on the first thing smoking" to attend East Carolina, then headed to New York before



stopping in the Twin City on her way to Washington, D.C., where she met Joiner, a D.C. native.

They have been together for 34 years and have traveled to and lived in a number of places— Arizona, Florida, Maryland, South Carolina, Virginia. They settled in Winston-Salem in 2001 so Tyson could help care for her parents, who were in declining health.

Two years later, they opened Sweet Potatoes. Since then, they and their restaurant have gained regional and national acclaim. They've been covered by The New York Times, National Public Radio and USA Today, which included it among its list of 10 great places for pie in the South.

Tyson has written the well-received cookbooks, "Well, Shut My Mouth!: The Sweet Potatoes Restaurant Cookbook" and "Soul Food Odyssey."

Their community work also has gained notice. In April, the Winston-Salem YWCA honored Joiner and Tyson with the Women of Vision Trailblazer Award for their leadership, vision and achievement.

Through it all, they've learned a lot about people. They agree that they have been blessed not only with success but with purpose.

"Taking people how they are, whether they are black, white, green, whatever makes for a more interesting stew than if you just have one kind of thing in that soup," Tyson says. "We have all sorts of flavors, it tastes great and it works."

Jones, who officiated at the couple's wedding, sees grace at work amid the cuisine.

"Their food is good, and their ambiance is good. Most important, though, are the ways in which they care for persons with trust and grace and love and compassion," Jones says. "That is the core of FaithHealth."



# A Unique Partnership Serving the *'Hardcore'* Homeless

BY LES GURA

Most of us don't think too much about the hardcore homeless.

The men and women who approach our cars at major intersections or highway off ramps asking for change. The ones we see walking along the side of a road, head down, toting a bag or pushing a cart. The faces we imagine when we spy makeshift beds wedged amid the concrete of an overpass.

There are two people in Forsyth County who not only see these homeless people but spend hours hoping to penetrate their secret worlds.

They offer kindness.

Bree Ferguson and Obie Johnson — outreach workers with The Empowerment Project, a nonprofit that partners with Wake Forest Baptist Health's Division of FaithHealth — come

from disparate backgrounds.

Ferguson was the child of a family frequently involved in helping out through fundraising and volunteering for causes such as the Salvation Army. She attended the University of West Virginia and upon graduating became a staff member at a treatment home for women with a dual diagnosis — they had mental health and substance abuse issues.

She later worked in a wilderness camp in North Carolina working with children age 12 to 18 who were dual diagnosis, teaching them survival skills. Then she made her way to Winston-Salem, working in a mental health case management position before landing in 2010 with The Empowerment Project.

Johnson was raised in South Florida as the son of a seasonal agriculture







Obie Johnson and Bree Ferguson

worker, the eighth of nine children. He discovered marijuana at age 12 — “it was like a miracle drug to me” — and after getting hooked on crack cocaine while attending Winston-Salem State University on a wrestling scholarship, survived four hellacious years of addiction and homelessness.

Today, Johnson and Ferguson try to bring human contact and a window to further care to the hardcore homeless. It can take months to win so much as a grudging nod, much less a conversation, with someone on the street. But Johnson and Ferguson have been doing this for nearly 10 years; Ferguson most often makes rounds during the daytime and Johnson at night and in the wee hours.

Ferguson says when she was contacted about a position with The Empowerment Project, she was happy to

learn who she'd be teaming up with.

“I knew Obie,” she says. “Everybody around working in this field knew Obie.”

She jumped at the opportunity, she says, because “we need to reach out to those people typically not coming in for traditional services; people with severe mental illness or substance abuse or both. They're usually not open to accepting help. They've lost trust in the system.

“We're known as the people in the community who won't say no to anyone.”

### Addiction, Recovery, Commitment

You know things have gotten bad when, penniless and trying to kick a cocaine addiction, the only place you have to stay is the sofa of a liquor house in the dead of winter.

Johnson had fallen into addiction after dropping out of WSSU two classes shy of graduation, when the pressure and the drugs got to be too much. His dream of becoming a mental health worker seemed far off. Using drugs became his primary motivation as he lost his marriage and contact with his child.

“I was working two jobs and still having to eat out of a trash can. Cut off from my kids. I couldn't look in the mirror,” he says. “I got sick and tired of being sick and tired.”

Johnson sought help from a local reverend who helped people with addiction problems. He went to a recovery center to get clean. His residence in the liquor house came about in the early stages of his recovery, after Johnson, jobless, had used up the 90 days he was allowed to stay at a homeless shelter in Winston-Salem. A friend told him the liquor house had an old sofa, and he humbly asked and was granted permission to use it to sleep.

“What was very strange about living in the liquor house was seeing old friends I knew from getting high with. I didn't have no money, and I was hungry,” he says. The old friends wouldn't buy him a \$2 fish sandwich at the liquor house, but they would buy him a beer. The bartender and Johnson worked out a deal: He'd sneak the bartender back the free beers, and the bartender would give him a dollar.

“At the time I was motivated by desperation,” Johnson says. “Even though that dirty couch in the drink house wasn't the safest place, it was the best and safest place for me at that time.”

His deal with the bartender helped him survive. A couple of months later, he found a job working at a produce company.

In that period, Johnson also learned about kindness and generosity. Some of the churches in Winston-Salem in that era would open their doors and offer orange juice or cake in the morning. The people there would buy him breakfast when he attended 12-step meetings with them. He stayed clean.

Johnson would complete his missing classes and obtain his bachelor's degree before moving to Florida to take a position as a substance abuse counselor in a home for pregnant, addicted women. As a newcomer to behavioral health, it was difficult for Johnson. A fair number of his clients were HIV-positive and their treatment with the drug AZT didn't always work. Their deaths weighed heavily on Johnson.

**IT CAN TAKE MONTHS TO WIN SO MUCH AS A GRUDGING NOD, MUCH LESS A CONVERSATION, WITH SOMEONE ON THE STREET. BUT JOHNSON AND FERGUSON HAVE BEEN DOING THIS FOR NEARLY 10 YEARS.**

## A Unique Partnership ...

continued

In 1995, Johnson returned to Winston-Salem, becoming a mental health technician for Centerpoint Human Services; a year later he became a case manager. In that role, he met fellow employees whose passion and heart for their work fed his own motivation to help people. It led to his decision to join a federally funded program through Centerpoint that reached out to those with severe, persistent mental illness.

It was that program which, over time once Centerpoint closed in 2005, would become the present-day Empowerment Project.

Johnson has grown to understand a key concept behind what he does: His own skills and his lived experiences on their own are not guaranteed to allow a connection, much less persuade people to change.

"What I found was enough was when you learn the art of reaching into peoples' souls, not to psychoanalyze them but just to have a presence with them," he says. "I use reflective listening, active listening and paraphrasing to let them know I'm hearing them. And I'm allowing them to inform and direct their own treatment."

### Persistence, Patience, Hope

Ferguson graduated from the University of West Virginia with a degree in psychology. Her parents told her that even as a child she would hug random strangers.

That inner core translates well to her understanding about her work. Reaching the hardcore homeless, she and Johnson know, is largely about making inroads and not changing lives — certainly not immediately.

Ferguson shares a story about one man she has seen close to daily (including weekends) for about a year. He's been on the streets of Winston-Salem for 20 years and has obvious mental health issues, she says, but he won't accept traditional

## PERSISTENT ENGAGEMENT CAN BUILD THE TRUST THAT MIGHT EVENTUALLY ALLOW A PERSON TO CONSIDER COMING TO A SHELTER FOR A MEAL, OR SEEING A DOCTOR ABOUT MEDICATION



assistance such as outreach supplies; he simply doesn't trust.

"Usually when I find him I can park my car and get out. He's very, very incoherent so you can't have a regular conversation," she says. "But sometimes he'll say 'Hey' and acknowledge me. He'll fist-bump me every now and then. One time he said something about my hair being different. Those are considered progress."

The goal with these interactions is to let people know there are resources available and that someone cares. Persistent engagement can build the trust that might eventually allow a person to consider coming to a shelter for a meal, or seeing a doctor about medication or even thinking about longer-term desires such as reconnecting with family or getting an apartment.

"I know the downfalls of our systems," Ferguson says. "The number one priority is to just be with them and love them."

### The Art of Help

There is a certain art to assisting people who struggle to accept help or flat out deny it — especially while working with government systems whose rules often create other sets of problems.

For example, to solicit, homeless people must have a permit. A lot don't know about them, don't have them or don't care about them. But if they accept money and a police officer sees them,



that could result in a citation. And when they don't show up for a court date, that's another citation, failure to appear. The people Johnson and Ferguson work with often have lengthy lists of such citations. They don't blame the police, who Ferguson says often support and help the homeless in myriad ways. It's just a systemic problem.

Johnson and Ferguson manage all of these issues with a preternatural calm.

"There is art of accountability," Johnson says. "Sometimes I make a lot of mistakes. But I don't rationalize and justify. I just say, 'Wow, I blew that and I messed up.'"

The key, he reiterates, is to be authentic with his homeless clients. Ferguson has similar thoughts.

"I know the downfalls of our systems, and it can be hard to keep hope or wonder 'Is this actually helping?'"

Even then, Ferguson says, she tries to focus on the people who do come back or give her a nod or a smile. She says she gets a lot of mileage knowing someone feels better because she gave them her time.

"This is definitely a traumatic job," Ferguson says. "You have to learn what could be a crisis and what is a crisis—and you have to learn not to make a big deal. Nothing is going to happen really fast, and you're not going to solve problems quickly."

"But when you see people on the street, know they have the same heart as you. That's huge."



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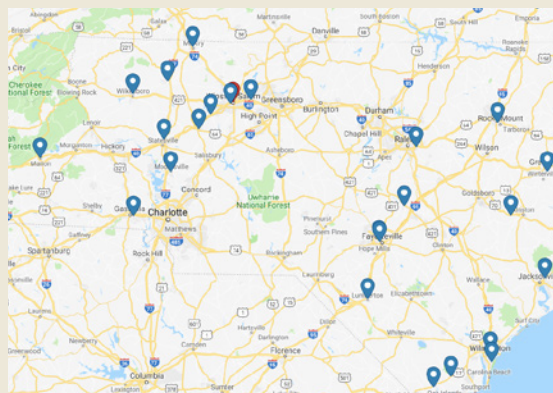
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