American Bar Association  
Commission on Homelessness & Poverty  
Houston, Harris County TX Anti-Poverty Roundtable  
February 6, 2015

SUMMARY OF DISCUSSION AND UPDATE ON COLLABORATION

After brief introductions, Ted Small, Chair of the ABA Commission on Homelessness & Poverty (“Commission”) welcomed the participants from a number of local organizations including Beacon Law, Can Do Houston, Catholic Charities, the Coalition for the Homeless, Gateway to Care, Grandparents Support Group, Inc., Healthcare for the Homeless, the Houston Food Bank, the Houston Police Department, Texas Health and Human Services, Texas Hunger Initiative, We-Collab, and members of the Commission on Homelessness & Poverty from across the country. Mr. Small provided background on the ABA, the Commission and its new Poverty Initiative. For information about the initiative, please visit: http://www.americanbar.org/groups/public_services/homelessness_poverty/poverty_initiative.html

Next, Small framed the conversation by stating the goal of the roundtable dialogue is to build consensus for collaboration on local anti-poverty initiatives. After reviewing how the Commission’s working definition of “poverty” and its top 10 listing of Manifestations of Poverty, he facilitated a dialogue on the most pressing Manifestations of Poverty in the Houston community from the perspective of the local leaders sitting around the table.

A local participant commented that Houston has a strong nonprofit sector, but proposed that greater collaboration—including partnerships with the business community—could foster effective integration of resources. He encouraged more focus on integration of resources.

Another participant commented that while the city has a tremendous amount of resources, they are not allocated equitably. She encouraged more focus on food inadequacy and access issues, lack of personal safety, and education and unemployment (manifestation number 3, 8, 5 and 6 respectively). Ultimately, she highlighted the greatest need for more focus on manifestation number 5: inadequate education outcomes.
Another participant emphasized the need for greater attention to manifestation number 4: 
inadequate healthcare and poor health outcomes. He noted the city has a tremendous amount of 
high-quality medical facilities that are inaccessible to those without health insurance.

A participant discussed the disparities related to healthcare and education as well as the 
accessibility issues. She encouraged a dialogue on outside of the box approaches to examining 
systemic barriers and identifying more accessible locations for resources and services.

Another participant discussed two primary issues from the perspective of grandparents who are 
caregivers/guardians: (1) food insecurity (manifestation number 3, noting the inability of grandparents to secure Food Stamps when they receive grandchildren through CPS), and (2) inadequate education outcomes (manifestation number 5, related to children with special needs and the barriers grandparents face when engaging with school personnel). This participant volunteered to host a follow-up convening to discuss the issues highlighted during the roundtable.

Representatives from local law enforcement discussed their role in outreach to chronically 
homeless individuals, noting the difficulty in securing identification (ID) for this population. They 
explained the need for advocates/providers to shepherd them through the system to secure ID. They also discussed a system they have developed to address the barriers to ID (noting plans to hopefully work with the Social Security Administration soon). The law enforcement representatives also discussed the high incidence of chronically homeless individuals with mental health and/or substance abuse issues and the lack of long term mental health care and detox facilities (relating to manifestation 4: inadequate healthcare and poor health outcomes).

Next, local participants addressed the first manifestation: substandard and unaffordable housing and homelessness, reporting on the success Houston providers have achieved in significantly reducing homelessness, highlighting that the community is on track to end veteran and chronic homelessness in 2015. Participants commented that the homeless providers collaborate effectively and have an excellent network in place. Lastly, participants agreed that systems reform—particularly related to access to mental health services (related to manifestation number 4)—would be of benefit to the community.

Continuing with the discussion on manifestation number 4: inadequate healthcare and poor health outcomes, a participant underscored the importance of healthcare, commenting that the current system of care is “sick” care, not healthcare. She commented that while food, housing and education are critical elements to addressing poverty, her focus is on healthcare and she sees a tremendous value in preventive care as a much needed approach to addressing poverty.

Next, participants discussed the plight of undocumented immigrants, and the additional barriers they face because of their status. A participant underscored the importance of developing services and resources that are accessible to this highly vulnerable and underserved segment of
the population. She also proposed possible policy solutions aimed at removing barriers to employment—lack of opportunity for full employment at a living wage (manifestation number 5).

Participants also discussed a number of other issues including: ID restoration, Social Security (including streamlining access to SSDI and the barriers presented by lack of medical records), housing issues, and access to mental health services.

During the conversation, participants emphasized the importance of education as well as voting—isolation form community and political infrastructure (manifestation number 10).

Participants also discussed structural inequities at the federal, state and local levels. A participant underscored the need for updating the poverty level as well as potential policy solutions such as a living wage and workers’ rights generally. She noted that Dallas has a Coalition against Poverty and proposed that a similar coalition could benefit the Houston community.

It was pointed out that while the local homeless advocates and providers fully collaborate and have built a highly effective Continuum of Care (CoC) that has achieved tremendous success, perhaps more could be done to foster greater collaboration and organization among the anti-poverty advocates and providers whose low income clients are not in the homeless system. More specifically: might there be an interest in using Houston’s successful Homeless Continuum of Care as a model for anti-poverty advocates working with low-income clients? Or perhaps such anti-poverty advocates who aren’t presently engaged in the CoC could participate and provide assistance from a homelessness prevention approach for individuals and families who are at risk of homelessness?

Update
A number of the advocates who participated in the roundtable held a second meeting to discuss next steps and they developed the following list of priority action items: break down the legal barriers regarding household composition used to determine benefits (particularly on SNAP and Medicaid) for grandparents raising grandchildren; obtain recognition from Social Security and Texas Health and Human Services Commission of the Houston Police Department Homeless Outreach Team issued identification card (Department of Public Services does recognize this card); identify programs available to non-traditional families, especially those raising children without granted legal status (e.g., grandparents raising their grandchildren in order to avoid placement in the system); develop a program where policymakers live life of someone seeking services for a day.