

The Faces of BRC

A Q&A with Andrew Apicella, Director of BRC Street Outreach

BRC
HOPE. HEALTH. HOME.

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*If you have ever volunteered to serve food in a soup kitchen, folded clothes for a clothes drive, or put some money into the cup of someone asking for help on the subways or the streets, you'll know the feeling....As grateful as your beneficiary seems, the experience leaves many of us wondering: **Did I really help? Isn't there something more that can be done?** We asked Andrew Apicella, Director of BRC's Street Outreach – He's out there every day!*

Q: Most of us have a very strong urge to help our homeless neighbors in need. It's painful to see someone so desperately in need of basic food, clothing and shelter. What's the best thing we can do to help?

A: I tell people to call BRC's homeless helpline: (212) 533-5151. It's really the most responsible and constructive thing to do. BRC has several vans patrolling Manhattan's streets and teams working the subways at all times, 24/7, who will respond to your call promptly. Our outreach teams will not only attend to the person's emergency needs immediately, they will also begin the process of helping the individual find a permanent solution. And you won't be left wondering what happened. BRC will call you back with an update, if you request that.

Q: What is the most surprising thing you have learned about the issue of homelessness in all the years you have been doing street outreach?

A: That homelessness does not discriminate. That is contrary to what many people would like to think. Certainly poverty places you at greatest risk. One major crisis, such as loss of subsidized housing or a job layoff, can force someone into the street. But poverty is not the only risk factor. Prolonged alcoholism and drug addiction breaks family ties, causes people to become isolated, reverses fortunes and can leave a person extremely vulnerable and without resources.

What is the best way to help?

Q: I've heard that when BRC offers to bring a homeless person in from the street, many people refuse your help at first. Why is that? And what happens to change a person's mind?

A: It's not that they don't want a way off the street. It's about trust and about gaining courage and facing vulnerability.

The truth is, people who live on the street want the same thing the rest of us want: at the end of the day, to have a safe and comfortable place to go, out of the weather, a space to rebuild and preserve their strength and health in dignity and privacy. But everything about the street is hostile to those goals so privacy is achieved through social isolation, safety is achieved through trusting no one, and the physical and psychological discomforts are managed by creating a separate reality – either through mental illness or chemical addiction. Some people are simply frightened by the unknown or by the notion that they will fail again.

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This is a coping mechanism that is both highly adaptive and protective of personal dignity – but also one built on a total lack of hope that anything else will ever be possible. These are people who have given up on family and who long ago wore out any welcome with friends. BRC’s outreach worker is often the only positive relationship the individual has.

The outreach worker becomes the personification of the idea that hope exists. And *that relationship* eventually transforms the old methods of coping, replacing it with one founded on hope for a better future. That’s what happens when people change their mind. It’s really amazing.

Q: You talk about the importance of the relationship. It sounds like you get to know your clients or prospective clients really well.

A: Absolutely. That’s the goal. We know lots of people on the street by name – at least a first name or a nick name – and others we recognize by face. Most individuals have been on the streets for years and have a favorite location or neighborhood. We keep notes on our contacts with them so even if a new team member goes out, he or she has the history and can carry the relationship forward.

We look in on people with regularity, at least weekly, over months and sometimes years. We engage them in conversation. We become those familiar “folks in the blue shirts” who care enough to come back over and over, to never give up. We check in, inquire about the client’s health, take the sick to the hospital if needed, and – most importantly – remind people as frequently as it takes that *there is a path back to a healthier life*. They learn that we are not going to arrest them or harass them – that we really just want to help. Eventually, trust is established.

Then we can begin the process of making a lasting change by escorting people to programs where they can get permanent help.

Q: If you could change something about your work, what would that be?

A: I think I would follow-up longer after placing the client in their first program. BRC invests weeks, months, and even years in building relationships of dignity and mutual respect with people on the streets, with the goal of helping a client off the street. At that moment, outreach often must end their engagement with the client. That does not always make sense. We say “goodbye and good luck” just as the client needs a familiar face, a trusted and supportive advocate, the most.

It takes a while for the person to develop new relationships in the new service setting. That first year is critical. Some of us at BRC are asking if the mission of the outreach worker should not be re-defined a bit. We think outreach workers can enhance the clients’ success by engaging in a longer period of supportive service facilitation – helping them through the first year. It’s an

innovation that, given private funding, we can test.

Beyond that, I would not change anything about my work. Giving someone their life back is a dream job. ♦

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