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Las Cruces, New Mexico

Mesilla Valley Community of Hope

2018

Hope Stories

Interview 3

James Sassak Transcript Index & Excerpt

Revolving Door of Homelessness and Emergency Care

Interviewed by David Lee del Norte

29 March 2018

La Paz Room at Jardin de Los Niños on the Hope Campus

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Project History

The Mesilla Valley Community of Hope (MVCH) is a homeless services corridor in Las Cruces, New Mexico. In the 1970s, Saint Andrew's Episcopal Church began a small lunch service which later became El Caldito Soup Kitchen. As need for food and healthcare clinical service increased, the Las Cruces community supported the Saint Andrew's congregation with the opening of Saint Luke's Health Clinic. With a long history of compassionate services for visitors, the City of Las Cruces recognized the importance of limiting distance and travel-time between public health and human service organizations located throughout different parts of the city.

Incorporated as a non-profit in 1991, additional support continued to shape collaborative alliances with operations at 999 West Amador nearby to downtown Las Cruces. In 2011, following a particularly harsh "Deep Freeze" winter that caused health concerns and exposure deaths for the homeless, Mesilla Valley Community of Hope staff banded together with Hope Campus clients, appealed to the City of Las Cruces for sanctioned overnight camping status, and soon founded Camp Hope transitional living program.

In 2018, the Hope Stories project collected fifteen oral history interviews to learn about the legacy of organizational homeless services at Mesilla Valley Community of Hope. The term "Corridor of Care" refers to a healthcare industry perspective known as the Consolidated Services Model that helps people to access health and human service related programs quickly, reliably, and within centrally located "Hub" or "Node" areas of potentially consistent preventative care.

This public history graduate project asked participating narrators questions about how the Las Cruces community first began to advance, reinforce, and collaborate with the actions necessary to become the Hope Campus at Mesilla Valley Community of Hope. Rather than conduct interviews with those who experienced homelessness, the project features staff and volunteer narrators who shared community engagement stories about consolidated services “Campus” concepts.

The project ended without narrators to represent the community’s food pantry. Founded in 1979, Casa de Peregrinos relocated to the Hope Campus as an alliance member during the 1991 opening, and today continues to serve Doña Ana County with increased food delivery and expanded satellite locations. Two additional perspectives from outside the Hope Campus: the fourth interview with Glenn Trowbridge took place at CARE Complex in Las Vegas, Nevada, an out-of-state counter-balance to the history of homeless consolidated services in the United States; while this fifteenth interview with Kit Elliott and Meg Long occurred at Aggie Cupboard on the NMSU campus, a satellite food pantry inspired by Casa de Peregrinos.

Today’s work to help the homeless in Las Cruces is the result of a compassionate, multi-organizational approach by non-profit service providers. In 2018, these five core non-profit organizations include Mesilla Valley Community of Hope; Casa de Peregrinos food pantry; El Caldito soup kitchen; Jardin de Los Niños educational program; and Amador Health Center (formally Saint Luke’s Health Clinic). With Hope Campus the geographic center of non-profit homeless service providers in Las Cruces, it is important to note assistance and resources offered by the City of Las Cruces, the New Mexico Department of Health, and the New Mexico Department of Human Services. For an updated and comprehensive list of regional community services, insightful for anyone experiencing homelessness, inquire City of Las Cruces or MVCH with search term “Las Cruces Community Resource Guide.”

Narrator Summary

James Sassak was born in Pontiac, Michigan, moved to Las Cruces in 1986, and later attended college in Orlando, Florida. Sassak returned to Las Cruces after a 2011 winter storm known as the “Deep Freeze” threatened health conditions for both housed and unhoused people of the region. With organizational support to help establish Camp Hope on Mesilla Valley Community of Hope Campus, and recover from personal experiences of homelessness, Sassak eventually became a Peer Support Specialist with Saint Luke’s Health Clinic. Peer Support Specialists work to strengthen relationships of trust by connecting Hope Campus clients to relevant resources, programs, and caseworkers.

An advocate for military veterans, Sassak and others proposed that mobile, rent-to-own “Tiny Homes” be built to increase shelter options for homeless veterans. To promote awareness, the Las Cruces Veteran’s Theater Foundation produced stage plays about Post Traumatic Stress Disorder (PTSD), drug and alcohol abuse recovery programs, and the destigmatization of being identified as “Homeless.” With Sassak’s help, the Veteran’s Theater addressed the problem of illegal “Spice,” a deadly synthetic marijuana substance sometimes made available to minors through distribution by underground smoke shops.

In addition to Jail Diversion or “Homeless Court” programs on the Hope Campus, Sassak advocates for the Hope campus consolidated services model to increase coordinated communications between the criminal justice system and City of Las Cruces resources, hospitals, and non-profit organizations working in unison to provide help.

Index of first hour

00:14 - Interview introduction

01:45 - Biography of James' father

03:14 - First employment in Las Vegas, Nevada

04:08 - Sports career ambitions

05:25 - College Engineering program

07:44 - Early days of Camp Hope

09:33 - Winter preparation after 2010 "Deep-freeze" exposure deaths

11:26 - Emergency response and Hope Campus Safety Team

13:02 - Community awareness of homeless winter conditions

15:09 - Toward City of Las Cruces sanctioned over-night camping

17:17 - Personal experience with homelessness

18:50 - Economic downturn of 2008

20:34 - The rise of the new homeless

22:32 - Camp Hope self-governance

23:00 - Resource access of consolidated services model

24:27 - SSI/SSID Outreach, Access, and Recovery (SOAR)

Index of first hour (cont.)

25:56 - Military veteran disability outreach

27:34 - Tiny-Home community

31:04 - Veteran's Administration (VA) issues

32:47 - Post Traumatic Stress Disorder (PTSD) therapy

34:27 - "Functional Zero" unhoused veterans

35:29 - Increased workforce training for homeless

36:47 - Oak Street veteran's housing complex

37:57 - Overcoming systemic homeless services

40:50 - "Spice" synthetic marijuana crisis

43:08 - Overdose "Bad Batch" weekend prior to City Council ordinance

49:17 - Chemical attack and Emergency Response costs

50:35 - "Spice" sales to underage children

52:14 - Behavioral health revolving door

53:36 - Chronic homeless legal issues

56:32 - Problem of being identified homeless

57:56 - Medical condition revolving door

Index of second hour

01:00:04 - Jail Diversion program on Hope Campus

01:01:58 - Coordinated communication effort to limit revolving doors

01:05:21 - Origins of Saint Luke's Health Clinic

01:06:55 - Hurry Home program for chronic homeless

01:08:01 - Mesilla Valley Community of Hope partnership

01:10:19 - Housing First program follow-up process

01:12:16 - Linkages program housing vouchers

01:12:41 - Saint Luke's Health Clinic mission statement

01:13:36 - Peer Support Specialist homeless reintegration

01:17:24 - Difficult path to Las Cruces treatment

01:18:44 - Hope Campus consolidated services model

01:20:00 - Albuquerque Healthcare for the Homeless and Saint Martin's Hope Works

01:20:46 - Coordination of communication lines between organizations

01:21:52 - El Caldito Soup Kitchen and Las Cruces Gospel Rescue Mission meals

01:22:40 - Casa de Peregrinos food distribution

Index of second hour (cont.)

01:23:45 - Supplemental food and income economics

01:25:30 - Saint Luke's Health Clinic transition to Amador Health Center

01:27:35 - Hope Campus coordination linked to In-patient options

01:29:11 - New medical hospital versus need for Dona Aña County treatment center

01:30:25 - Shelter for women, men, and children in Las Cruces

01:31:29 - Onsite family counseling and Trauma Informed Care

01:34:44 - Overwhelmed clients and access services documentation

01:38:12 - Displaced homelessness and "Economic refugees"

01:40:21 - Trade, training, and vocational support with dignity

01:41:54 - "Together we stand, divided we fall"

Interview 3 Excerpt — Narrator James Sassak:

Well, from their perspective it's a manpower issue, and resources. So, what is happening is, the resources are being drained by this revolving door, or this constant flow, or the same conditions of being picked up, going to the hospital, going to the fifth floor, the psychological floor. They get on medications. They're released without follow-up treatments or their medications because usually they prescribe the medications for thirty days. So, they have to go to another doctor to get their medications, psych medications or other medications, to the pharmacy.

So, there's the gap there where they're not getting follow-up services, where a mentally ill person or somebody that has physical health issues they're not getting the medical attention that they need on the follow-up after they're released from the emergency room.

So, what happens after thirty days without medications? They revert back, and they're going to the same hospital. The same conditions. The same reasons why they're going to the hospital in the first place is the same thing. So, it's this thirty day process of constant rotation of medical and emergency attention. It transitions right into the legal issues.

James Sassak:

The legal issues for most chronic homeless people are: they don't have a place to stay, so they usually are out on the streets in public view. People will call the police. They will be trespassed [ticketed or fined] usually if they're consistently showing up.

So, just by— You have no record at all, and you're just trying to find a place to sleep, you will be trespassed by a business or someone else, and the situation starts. You are in the system then. You have to go to court. So, you go to court, and it's usually a ninety day or a ninety dollar fee for trespassing. So, a person that has done nothing but lay their head down on — At the wrong place, at the wrong time, doesn't have any record, or [are not] in the court system — They get in the court system for a trespass charge. The trespass charge goes to court.

They need a place where they get mail or documentation to say when to show up to court. So, they don't know they're supposed to show up to court at a certain time, or forgot it, or moved on. So, what happens after that? You don't go to court, failure to appear for your— for a trespassing case or a basic misdemeanor. You get a warrant put out for you. So, the warrant takes time, and the police officers usually know these individuals, or have seen them around town because they probably trespassed [ticketed] them. So, they pick them up on a warrant to failure to appear.

James Sassak:

So, they get them into the detention center. It usually takes— Maybe it depends if they have any fines at the time because you can pay off your fines by doing “Time served.” But, if you don’t have any fines, you’re gonna get a fine because “Failure to appear” is a legal issue. So, you go to court. They charge you with “Failure to appear,” and then they give you a fine.

So, then this— Say, “You’re indigent. You don’t have any income. You’re homeless. We’re gonna make this a twenty-five dollars a month payment.” You’re not gonna be able to pay it. So, after a month or two, you have “Failure to pay” fines.

Had nothing, had no charge, could be an elderly person. Could be a young person that was kicked out from their house, their parents. Could have other issues, behavioral health. I would say, a few at the beginning— That you get into this situation: you’re not thinking about drugs and alcohol. You’re trying to survive. Then when you get into the system, you start meeting people. Just like every jail, you— It’s like a college. So, you get to meet people in jail even if you’ve never been there. You get released.

They go, then you’re in— You get released with some other individuals that have the same charges. They go, “Hey. Do you need a place to stay? We’re staying over behind the dumpster here, or behind Caliche’s [Frozen Custard on South Valley Drive], or we’re staying ‘Here.’ ”

James Sassak:

Yeah, and then, and you get, like the camp started— You get safety in numbers. The difference is safety in numbers on the street draws attention. So that— (Chuckles)

del Norte: So, they're actually being targeted because they're grouping together. And hence, the criminalization occurs because they might have substance abuse issues—

Sassak: Yes. They have no direction. They're just trying to survive in a, now, they're li-, we call it their "Street family." So, you're indoctrinated into the street family, and then, guess what? You get identified as that. So, you just came into town. You had no criminal charge. You've never been in jail, let's say, and all of a sudden, just because of your circumstances, you're in the system now. And now you're identified with a criminal element. And this continues the rotation.

Then, when you get tired and sick, you start getting into the medical. You start having mental breakdowns, physical breakdowns, your health is going. So, now after the jail, you're gonna get into the medical "Revolving door," and it's all usually emergency room visits which is very expensive. And so, now they're diagnosing you with certain issues. You have a medical condition, and there's no follow-up.

James Sassak:

They put you seventy-two hours in either the psychological evaluation or seventy-two hours of medical dehydration. It takes you about a couple of days to get rehydrated. They put you right back in the environment. There's no follow-up. There's no case workers that are going from the hospital and saying, "Okay. We need a shelter." We talked about this in my [Las Cruces Sun News] article with Yoli Silva.

We have one shelter in this town.

So, when these individuals, who never did anything wrong, didn't have health issues at the time, now they are in the legal system, and now they have health issues, and then they're being released within seventy-two hours with no follow-ups. So, they're still homeless. Now they have two problems that they have to solve. They have a medical issue, and now a legal issue. They're not capable of handling it. So, this is now a permanent revolving door of sickness, and legal issues, that they can't get out of.

Recommended Citation

Sassak, James, interviewed by David Lee del Norte. March 29th, 2018.
Hope Stories oral history project, New Mexico State University
Library Archives and Special Collections.

Recording Information

Hope Stories 03 — 1h 42m duration. Recorded at Jardin de Los Niños
La Paz Room on the Hope Campus.

Transcripts and Recordings

Listen, read, and request Hope Stories complete transcripts, sound
recordings, and 2018 project research box at New Mexico State
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