



The Maryland State Medical Society

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**Senate Finance Committee
State Court Administrator – Warrants of Restitution and Writs of Possession – Data Collection and Reporting, SB0544
February 18, 2020
Position: Support**

My name is Dr. Gwen DuBois. I am President of Chesapeake Physicians for Social Responsibility and serve on the legislative and public health committees of the Maryland State Medical Society, MedChi. I speak in support of SB 544 for both MedChi and the Chesapeake Physicians for Social Responsibility, a bill which will require the statewide collection of eviction data to improve policies and expenditures related to housing stability.

Homelessness and therefore evictions are a medical issue. Did you know that in Boston, a recent report found that sheltered homeless people had a mortality rate that was 3x higher than the housing secure but that among the rough homeless, those unsheltered, the mortality rate was increased 10 fold. Cancer and heart disease were the leading causes of death in all groups but chronic drug addiction and liver disease were a close 3rd and 4th cause of death in the homeless rough sleepers (shelterless). Not surprisingly, there is higher utilization of hospitals and emergency rooms and expenditures for health among the homeless population.

Unaccompanied homeless youths are more likely to be HIV positive, suffer with substance abuse, experience violence, and develop mental health issues. Homeless youth are also more likely to be pregnant, be associated with a pregnancy and/or become a parent. Homelessness in children is associated with developmental delays and poorer health. Recently there has been reports that among public school children there has been a disturbing increase in homelessness. Adults are more likely to have mental health and substance abuse problems, and when they suffer with chronic illnesses like diabetes and HIV, have difficulty managing their medicines and controlling their illnesses.

Hospitals, clinics, and health departments need data detailing the numbers and ages of people experiencing housing insecurity by locality so that there can be proper planning for this population with special needs. Transportation, nutritional help, and case management services are all crucial to help manage chronic illness in a population without stable housing. Schools will benefit from this information as well to keep these youth from falling behind academically.

Finally, and most important, research is essential on how to improve outcomes, reduce mortality, and hopefully ultimately eliminate homelessness. To achieve these objectives, there must be accurate data to document the scope of the problem and follow up data to provide evidence over the years of what types of intervention have and have not been successful. Data collection will help define the scope of the problem, will call attention to its magnitude, and help to plan for services to treat the problem and develop interventions to reduce homelessness in the future.

In medicine, prevention is better than treatment and solutions must be data driven. Accurate Data is where we start. MedChi and the Chesapeake Physicians for Social Responsibility request a favorable report on SB 544.

Gwen L DuBois, MD, MPH, President Chesapeake Physicians for Social Responsibility