Whereas, The civil unrest that occurred in Baltimore, Maryland in April 2015 not only was triggered by the death of Freddie Gray and the dysfunctional relationship between law enforcement and citizens, but also reflected a long-standing dissatisfaction with the legacy of structural poverty and housing policy in Baltimore;¹ and

Whereas, More than 550 per 10,000 housing units are vacant in Baltimore City, and almost 2500 per 10,000 housing units are vacant in the Sandtown-Wincester and Harlem Park neighborhoods of Baltimore;¹ and

Whereas, In Baltimore, the average time on the waiting list for the Section 8 Housing Choice Voucher program is almost ten years;² and

Whereas, In Maryland, a minimum-wage worker would have to work a 138-hour work week in order to afford a two-bedroom rental unit at fair market rent;³ and

Whereas, Housing is an important social determinant of health as evidenced by the fact that homeless persons struggle under greater levels of physical disease, mental illness, and substance abuse than housed individuals;⁴ ⁵ and

Whereas, Housing instability is associated with a lack of health insurance, poor access to a usual source of ambulatory care, postponement of needed medical care and medications, and increased emergency room use and hospitalizations;⁵ ⁶ and

Whereas, Current AMA policy supports eradicating homelessness through clinically proven, high quality, and cost effective approaches and through the development of an effective national plan by appropriate organizations (H-160.903); therefore be it

Resolved, That MedChi will adopt the AMA policy on eradicating homelessness (H-160.903) as MedChi policy and monitor the activities of the AMA on issues around housing and public health; and be it further

Resolved, That MedChi work with policymakers and relevant stakeholders to study the public health implications of affordable housing and other issues that impact the public health of those who are homeless to identify evidence-based, cost-effective solutions to those issues.

As amended and adopted by the House of Delegates at its meeting on September 19, 2015.

References:


Relevant AMA Policy:

H-160.903 Eradicating Homelessness
Our American Medical Association: (1) supports improving the health outcomes and decreasing the health care costs of treating the chronically homeless through clinically proven, high quality, and cost effective approaches which recognize the positive impact of stable and affordable housing coupled with social services; and (2) supports the appropriate organizations in developing an effective national plan to eradicate homelessness. (Res. 401, A-15)