

Cumberland District Public Health Council (CDPHC) Statement on Health Risks Posed to Unhoused Persons

The current housing crisis is posing significant threats to the health and well-being of community members experiencing homelessness. This is happening, concerningly, during the coldest time of the year, and as federal funding for emergency rental assistance has ceased. Most notably, new parents, post-operative patients, and those in need of isolation with infectious illness, may be released into the community, in the absence of stable housing. In the past, new parents, or other individuals have been able to discharge from the hospital to a room at the family shelter, or to a funded hotel, in the greater Portland area – however, those are often no longer options. This leaves community partners scrambling to find space for families or individuals, at a city warming shelter, or temporary shelter through a loose network of churches and social support organizations (none of which provide 24/7 shelter), as the only options for medically fragile individuals, upon discharge from a hospital. This is a complex, multi-layered situation, involving overflow conditions at area hospitals and emergency departments amid outbreaks of Flu, RSV, and the continuing Covid-19 pandemic.

Healthcare partners, hospitals, emergency department staff, and public health nurses are responding with on-site visits in hotel settings, free care at facilities, and connecting people to care through our federally qualified healthcare center, and at other sites. Shelter staff, hotel managers and municipal staff are making heroic efforts to provide shelter for our neighbors. Schools are working hard to ensure the needs of our youngest neighbors are met. But it is not enough to meet the need, and our most vulnerable community members are at risk. A critical problem is the lack of data on how many people are where, and how to accurately assess actual needs.

As a coalition of public health stakeholders, Cumberland District Public Health Council promotes solutions, and supports community partners who are working hard to address the urgent health crisis, resulting from the current housing conditions. We applaud the Governor's Office and the Legislature for the recent positive steps they took with the passage of LD 3, and the relief that will provide to some- however, more inclusive, more sustainable solutions are needed.

We have identified the following short and longer-term steps, that could create a safer environment and better health outcomes for all members of our communities, and we will work to support and promote these:

- Identify and disseminate permanent, sustainable substitute funding to replace federal ERA funds, thus preventing the eviction of hundreds of vulnerable people in Cumberland District, and thousands of others across the State
- Establish a designated, coordinated, and centralized intake, and health assessment, when new members arrive in our communities, to allow for accurate assessment and planning to respond to the needs of this population
- Create a system for providing comprehensive reproductive health care for persons in the impacted communities, especially those who are pregnant or have recently given birth
- Establish coordination for timely and additional primary health care and mental health care for community members experiencing homelessness
- Support improved communication and coordination between hospital emergency departments, healthcare and community partners, to avoid medically vulnerable persons being discharged to the street
- Encourage State housing and municipalities to create proactive policy environments that fast track development of low-income and truly affordable housing
- Actions to address the many aspects of this complex problem should be a priority of State, federal, and municipal funding