

**HEALTH CARE FOR THE HOMELESS TESTIMONY
IN SUPPORT OF
SB 154 Landlord and Tenant - Eviction Action - Right to Counsel**

**Senate Budget and Taxation Committee and Judicial Proceedings
Committee
January 28, 2021**



Health Care for the Homeless strongly supports SB 154, which would provide low-income renters a right to a lawyer (“right to counsel”) in eviction cases. With hundreds of thousands of Maryland households on the brink of eviction, the right to counsel empirically reduces housing displacement and stands to save the state significant costs.

For nearly 40 years Health Care for the Homeless has supported thousands of adults and families in their struggle to find safe and secure homes in the Baltimore metropolitan area. As part of our full, integrated medical and behavioral health care, Health Care for the Homeless provides permanent supportive housing to over 400 people every year. By passing SB 154, Maryland can help further access to safe, secure housing — because a safe place to call home is necessity for all, not a luxury for the few.

Housing is the proven first-line response to fixing dramatic health disparities across populations. When tenants experience unsafe conditions or are unable to pay an unnecessarily high amount of money up front, they are often forced to live unsafely or even be pushed into homelessness. This is unacceptable. Tenants should not have to experience homelessness or live in unsafe conditions because they do not have enough resources to keep them safe and healthy. After decades of enduring a housing crisis and a pandemic that exacerbated such a crisis, this bill helps ensure that Maryland’s tenants are treated with the dignity and fairness they deserve.

A recent [report](#), *The Impact of an Eviction Right to Counsel in Baltimore City*,¹ underscored the social and financial devastation eviction has on tenants and families and, conversely, the clear social and economic benefits as a direct result of tenants having legal representation at their eviction hearings. Among other findings, this report highlighted the following:

¹ <https://bmorerentersunited.org/rtc/stoutreport/>

- For tenants facing eviction, having legal representation is often the difference between keeping their home or experiencing homelessness. **Eviction is the leading cause of homelessness.** As reported in the study, Baltimore’s 2019 point-in-time count of people experiencing homelessness asked respondents what the primary cause(s) of their homelessness were. Twenty-two percent of people experiencing homelessness indicated that eviction was the primary cause of their current homelessness.²
- The report estimated that 92% of represented tenants would avoid disruptive displacement with a right to counsel in Baltimore City. This translates to 5,777 households and 17,300 people each year. Even apart from the current COVID-19 emergency, Baltimore’s eviction rate is almost 2.5 times the national average, with 6,500 families evicted each year.
- Aside from the state’s cruelty in the lack of attempts to prevent eviction and curb homelessness, the State can realize significant cost savings in investing in the right to counsel for tenants. As shown in the Stout study, **an annual investment of \$5.7 million in a right to counsel for tenants in one Md. jurisdiction would yield \$18.1 million in benefits/costs avoided to the State** (and \$17.5 million to the locality). Cost savings or benefits include costs related to homeless shelters, Medicaid spending in hospitals, homeless student transportation, and foster care costs. [See our report fact sheet](#). According to Stout, **92% of represented tenants would avoid disruptive displacement** with a right to counsel in one Maryland jurisdiction, and **in areas of New York City where right to counsel was implemented, 86% of represented tenants stayed in their homes.**
- Included in these cost savings is the significant savings in the provision of health care. The connection between housing and health cannot be overstated. According to data received from the Maryland Hospital Association, the average charge per patient for inpatient hospital care is approximately \$37,200 for patients not experiencing homelessness in Baltimore.¹⁹² For patients experiencing homelessness, the average charge per patient for inpatient hospital care is approximately \$37,900.¹⁹³ The average length of stay for inpatient hospital care is approximately nine days for patients not experiencing homelessness and approximately 15 days for patients experiencing homelessness – a length of stay 66 percent longer than patients not experiencing homelessness.¹⁹⁴ The average charge per patient for emergency department care in Baltimore for patients not experiencing homelessness is approximately \$2,100.¹⁹⁵ For patients experiencing homelessness, the average charge per patient for emergency department care in Baltimore is approximately \$7,600 – more than 3.5 times the cost for patients not experiencing homelessness.

² <https://bmorerentersunited.org/rtc/stoutreport/>

Housing is a significant determinant of health. Poor housing conditions are associated with many adverse health outcomes in both adults and children, according to a well-established body of evidence. These include, but are not limited to: a) infectious diseases such as respiratory infections, tuberculosis, and HIV; b) chronic illnesses such as asthma and cardiovascular disease; c) chronic health problems from toxic exposures, such as asbestos and lung cancers, or lead poisoning and neurodevelopmental deficits; d) injuries, especially falls and burns; e) mental health disorders such as anxiety, depression, substance misuse, and post-traumatic stress disorder; and f) poor nutrition.³ As such, it is no surprise that the Baltimore study found significantly increased costs on the public health system as a result of homelessness.

For the aforementioned reasons, Health Care for the Homeless strongly urges a favorable report on this bill.

Health Care for the Homeless proudly supports the Housing Justice Package, of which Right to Counsel in Eviction cases is a part. For more information, visit www.rentersunitedmaryland.org.

Health Care for the Homeless is Maryland's leading provider of integrated health services and supportive housing for individuals and families experiencing homelessness. We work to prevent and end homelessness for vulnerable individuals and families by providing quality, integrated health care and promoting access to affordable housing and sustainable incomes through direct service, advocacy, and community engagement. We deliver integrated medical care, mental health services, state-certified addiction treatment, dental care, social services, and housing support services for over 10,000 Marylanders annually at sites in Baltimore City, and in Harford, and Baltimore Counties. For more information, visit www.hchmd.org.

³ See Office of the Surgeon General. The Surgeon General's Call to Action to Promote Healthy Homes. Rockville (MD): Office of the Surgeon General; 2009; Krieger J, Higgins DL. Housing and Health: Time Again for Public Health Action. Am J Public Health. 2002 May; 92(5): 758–768; Fazel S, Geddes JR, Kushel M. The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations. Lancet. 2014 Oct 25;384(9953):1529-40; Hwang SW, Burns T. Health interventions for people who are homeless. Lancet. 2014 Oct 25;384(9953):1541-7.