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Testimony Before the District of Columbia Council Committee on Housing December 9, 2024

Public Hearing: Housing is Maternal Health Amendment Act of 2024 (B25-0945)

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Introduction

Good afternoon, Chairperson White, Councilmember Parker, and members of the Committee. My name is Makenna Osborn. I am a Policy Attorney at Children's Law Center and a resident of the District. Children's Law Center believes every child should grow up with a strong foundation of family, health and education and live in a world free from poverty, trauma, racism and other forms of oppression. Our more than 100 staff – together with DC children and families, community partners and pro bono attorneys – use the law to solve children's urgent problems today and improve the systems that will affect their lives tomorrow. Since our founding in 1996, we have reached more than 50,000 children and families directly and multiplied our impact by advocating for city-wide solutions that benefit hundreds of thousands more.

Thank you for the opportunity to testify regarding B25-0945, the Housing is Maternal Health Amendment Act of 2024 (the "Act").¹ Each year, Children's Law Center works with hundreds of families that utilize homeless services and housing administered by the Department of Human Services (DHS).² We also serve as a member of the Department of Health Care Finance's (DHCF) Maternal Health Advisory Group and were deeply involved in the creation of the District's Perinatal Mental Health Task Force.³ Through the experiences of our clients and our partners in the perinatal health⁴ and family homelessness spaces we have observed the prolonged instability and adverse health outcomes that pregnant people in DC experience when they cannot access family homelessness services until their third trimester.⁵ Therefore, Children's Law Center supports this legislation, which will amend the definition of "family" under DC law to include pregnant people in their second trimester,⁶ because it is an important step toward ensuring that all pregnant people in the District have access to stable housing throughout their pregnancy and postpartum period.

Ensuring Pregnant People in the District Can Access the Family Homeless System Before Their Third Trimester Will Help Improve Maternal and Infant Health

Housing stability during and immediately after pregnancy improves birth outcomes and the well-being of parents and infants. Pregnant people experiencing homelessness are less likely to receive adequate prenatal care or have access to nutritious food, which are crucial for healthy fetal development, and more likely to develop adverse pregnancy-related conditions and complications including high blood pressure, iron deficiency, and hemorrhage.⁷ Additionally, when a pregnant person experiences stress, their elevated stress hormones can be passed on to the fetus, disrupting healthy brain development and possibly causing lifelong reduced and impaired brain function for the infant.⁸ As a result, homelessness and housing insecurity at any point in a pregnancy are associated with a higher risk for preterm birth, birth complications, low birth weight, and neonatal intensive care unit (NICU) admissions.⁹

If the District wants to promote healthy pregnancies and healthy babies – and address the disproportionately high rates of perinatal mortality and poor birth outcomes among Black pregnant and postpartum people in DC¹⁰ – we should prioritize connecting pregnant people with the foundation of a home where they know they and their baby can stay as soon as possible in a pregnancy.¹¹

However, our current homeless services law does not align with that priority. DHS operates two homeless services systems, one for families and one for individuals (also referred to as singles or unaccompanied adults).¹² To determine eligibility for the family system, DHS applies the definition codified in DC law:

(A) A group of individuals with at least one minor or dependent child, regardless of blood relationship, age, or marriage, whose history and statements reasonably tend to demonstrate that they intend to remain together as a family unit; or

(B) A pregnant woman in her third trimester.¹³

Under this definition, pregnant people in their first and second trimester who do not have other minor children have historically been directed to the individual rather than the family system.¹⁴

Until their third trimester, pregnant people experiencing homelessness are primarily offered a bed in one of DC's singles shelters, which are crowded and poorly maintained instead of having access to a private room in one of the smaller family shelters, known as Short-Term Family Housing (STFH).¹⁵ A calm, private space is more appropriate for pregnant people to rest and receive prenatal care. Additionally, it can take months from the time a family enters shelter to when to when they transition to more permanent housing through Rapid Re-Housing or a voucher. If a pregnant person does not enter the family shelter until their third trimester, they could still be there and deeply stressed about an uncertain housing future during the critical final stages of their pregnancy.¹⁶

Therefore, Children's Law Center supports this Act and the change it would make to the definition of "family" in the District's Homeless Services Reform Act to extend access to the family homelessness system to pregnant people in their second trimester. Expanding this definition is a much-needed step toward improving maternal and infant health outcomes for District residents and will bring the District closer to other jurisdictions like New York City¹⁷ and San Francisco¹⁸ that do not put any trimester restrictions on when a pregnant person can access specialized emergency shelter and housing services for families.

Conclusion

Thank you for the opportunity to testify today. Children's Law Center welcomes the opportunity to continue working with Councilmember Parker and the Committee as the Act moves forward. We also encourage the Committee to speak with DHS, STFH providers, and the organizations that work every day to serve homeless families and pregnant people about how the Act will be implemented and what, if any, additional support or resources will be needed to ensure the District can provide safe, stable shelter for both families with children and single pregnant people. <u>https://childrenslawcenter.org/ourimpact/health/</u>. Additionally, Children's Law Center attorneys represent children who are the subject of abuse and neglect cases in DC's Family Court. CLC attorneys fight to find safe homes and ensure that children receive the services they need to overcome the trauma that first brought them into the child welfare system. DC Children's Law Center, *available at*: https://www.childrenslawcenter.org/content/about-us.

⁴ We have chosen to use perinatal health instead of maternal health in this testimony. Perinatal health recognizes that not everyone who carries a pregnancy is a woman, and we respect the diversity of all people who have given birth. At times we may use gendered terms like maternal health or woman when it is needed either to ensure consistency with programmatic names or to stay true to reports/information we are referencing. We utilize this inclusive language when we are more broadly discussing this population who people who can be pregnant, have been pregnant, or have recently given birth. We have also chosen to utilize the term pregnant and postpartum people to encompass those who do not identify as a woman but can and do become pregnant and give birth.

⁵ In 2024, Children's Law Center participated in a Housing is Maternal Health working group convened by Mamatoto Village with Washington Legal Clinic for the Homeless, Community of Hope, and My Sister's Place where we discussed challenges faced by pregnant and postpartum people experiencing homelessness or housing insecurity in DC. After the working group met, both Mamatoto Village and Community of Hope published reports centered on the intersection of housing/homelessness services and perinatal health in DC. *See Housing Justice is Reproductive Justice: A Review of Housing Justice as a Structural Determinant of Black Women and Birthing People's Reproductive Health in Washington, DC*, Mamatoto Village and Georgetown University Health Justice Alliance (March 2024), <u>https://mamatotovillage.app.box.com</u> /s/e2nm4i3ikacrj3o985libea9rj0b7977?utm_source=newsletter&utm_medium=email&utm_campaign=new <u>report_housing_justice_is_reproductive_justice&utm_term=2024-03-14</u>; Christina X. Marea et al., *Navigating Homelessness Assistance While Pregnant: A Rapid Qualitative Research-to-Policy Collaboration in Washington, DC*, 8 Health Equity 1 (May 2024), *available at: <u>https://www.liebertpub.com/</u> doi/10.1089/heq.2023.0235.*

⁶ B25-0945, Housing is Maternal Health Amendment Act of 2024, available at:

https://lims.dccouncil.gov/downloads/LIMS/56141/Introduction/B25-0945-Introduction.pdf?Id=197162. ⁷ See Homelessness in Year Before Delivery Linked to Reduced Levels of Prenatal and Postnatal Care, Guttmacher Institute, Digest Vol. 43 (December 2011), https://www.guttmacher.org/journals/psrh/2011/12/ homelessness-year-delivery-linked-reduced-levels-prenatal-and-postnatal-care; Fiona H. Mckay et al., Systematic Review of Interventions Addressing Food Insecurity in Pregnant Women and New Mothers, Current Nutrition Reports (May 2022), available at: https://pmc.ncbi.nlm.nih.gov/articles/PMC9381473/; Homelessness Hurts Moms and Babies, National Partnership for Women and Families (May 2021), https://nationalpartnership.org/report/homelessness-hurts-moms-and-babies/.

⁸ *The In Utero Experience: Trauma Before Birth,* ACT Government Community Services (2019), *available at:* <u>https://www.act.gov.au/___data/assets/pdf_file/0004/2380459/The-in-utero-experience-web.pdf;</u> Poggi Davis, Elysia, et al., Prenatal Maternal Stress Programs Infant Stress Regulation, Journal of Child

¹ B25-0945, Housing is Maternal Health Amendment Act of 2024, *available at*: <u>https://lims.dccouncil.gov/downloads/LIMS/56141/Introduction/B25-0945-Introduction.pdf?Id=197162</u>.

² Children's Law Center's innovative medical legal partnership, Healthy Together, places attorneys at primary care pediatric clinics throughout the city with Children's National, Unity Health Care, and Mary's Center to receive referrals from pediatric providers for assistance with non-medical barriers to a child's health and well-being. See Children's Law Center, *available at*:

³ See Maternal Health Projects, DHCF, <u>https://dhcf.dc.gov/maternalhealthprojects</u>; Perinatal Mental Health Task Force, DHCF, <u>https://dhcf.dc.gov/publication/perinatal-mental-health-task-force</u>.

Psychiatry (February 2011), *available at*:

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3010449/pdf/nihms-227503.pdf.

⁹ See St. Martin, Brad S. et al., Homelessness in Pregnancy: Perinatal Outcomes, Journal of Perinatology (December 2021), *available at*: <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9507167/</u>; Leifheit, Kathryn M., et al., Severe Housing Insecurity During Pregnancy: Association with Adverse Birth and Infant Outcomes, International Journal of Environmental Research on Public Health (November 2020), *available at*: <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7700461/pdf/ijerph-17-08659.pdf</u>; Rhee, Jonegun et al.,

Effects of Maternal Homelessness, Supplemental Nutrition Programs, and Prenatal PM2.5 on Birthweight, International Journal of Environmental Research and Public Health (September 2019), available at: https://www.mdpi.com/1660-4601/16/21/4154. ¹⁰ Colleen Grablick, Black People Accounted for 90% of Pregnancy-Related Deaths in DC, Study Finds, DCist (April 28, 2022), https://dcist.com/story/22/04/28/dc-maternal-mortality-study-2022/. ¹¹ As homelessness and housing insecurity at any point in a pregnancy can have adverse impacts for a pregnant person and their child, Children's Law Center encourages the Council to view this legislation as a first step. Moving forward, we hope the Council will explore how the District can ensure pregnant people experiencing homelessness have access to appropriately supportive and specialized housing services as early as their first trimester without decreasing the availability and quality of Short-Term Family Housing (STFH) units and other homeless services for families with children. ¹² DC Department of Human Services, Homeless and Homelessness Prevention Services, https://dhs.dc.gov/page/homeless-and-homelessness-prevention-services. ¹³ D.C. Code § 4–751.019(16) Services for Homeless Individuals and Families: Definitions. ¹⁴ See Leah Potter, With Barriers to Finding Shelter, Pregnant Women and Mothers Turn to Small-scale Operations for Housing, Shelter in DC, Street Sense Media (September 5, 2019), https://streetsensemedia.org/article/dc-homeless-pregnant-expecting-mother/; Candace Y.A. Montague, Pregnant Women with No Children Are Shut Out of Family Shelter Spaces Until Their Third Trimester, Street Sense Media (April 7, 2021), https://streetsensemedia.org/article/dc-homeless-shelter-maternalhealth/#:~:text=They%20cannot%20access%20a%20private%20space%20in%20a,or%20%E2%80%9Ca%20p regnant%20woman%20in%20her%20third%20trimester.%E2%80%9D. ¹⁵ See Jenny Gathright, DC Completes Ward 1 Family Homeless Shelter, Capping Years-Long Effort, WAMU (February 4, 2021), https://www.npr.org/local/305/2021/02/04/964014402/d-c-completes-ward-1-familyhomeless-shelter-capping-years-long-effort (describing newly constructed family shelters); Candace Y.A. Montague, Pregnant Women with No Children Are Shut Out of Family Shelter Spaces Until Their Third Trimester, Street Sense Media (April 7, 2021), https://streetsensemedia.org/article/dc-homeless-sheltermaternalhealth/#:~:text=They%20cannot%20access%20a%20private%20space%20in%20a.or%20%E2%80%9Ca%20p regnant%20woman%20in%20her%20third%20trimester.%E2%80%9D (describing conditions at the Harriet Tubman Women's Shelter, the primary shelter for individual women in the District). ¹⁶ See e.g., Christina X. Marea et al., Navigating Homelessness Assistance While Pregnant: A Rapid Qualitative Research-to-Policy Collaboration in Washington, DC, 8 Health Equity 1 (May 2024), available at: https://www.liebertpub.com/doi/10.1089/heg.2023.0235. ("Participants strongly believed that pregnant people experiencing homelessness should have access to family housing as early in the pregnancy as possible to establish a stable foundation, and were frustrated by policies restricting access to family housing until the third trimester. ... By the third trimester, participants felt they had been accumulating stress and perinatal risk and had not been caring for themselves well."(emphasis added).

¹⁷ In New York City, "single pregnant women" have access to the same emergency shelter assistance as families with children. *See Homeless Shelters*, NYC.gov, <u>https://portal.311.nyc.gov/article/?kanumber=KA-02501</u>.

¹⁸ In San Francisco, there is a dedicated emergency shelter for "pregnant people experiencing homelessness, without minor children" and other emergency accomodations available to both families with children and pregnant people. *See Temporary Shelter for Families and Pregnant People*, SF.gov, https://www.sf.gov/information/temporary-shelter-families-and-pregnant-people.