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#### Illinois Chapter, American Academy of Pediatrics (ICAAP) Testimony on Housing Insecurity as a Social Determinant of Health

# Senate Human Services and Public Health Committee Subject Matter On: Social Determinants/Influencers of Health and Health Disparities October 9, 2020

#### Deanna Behrens, MD, FAAP Chair, Social Determinants of Health Committee Illinois Chapter, American Academy of Pediatrics

One in thirty children are exposed to housing insecurity. Additionally, the racial demographics of homelessness in Chicago reflect deep inequities that must be addressed. According to data from the city of Chicago's 2019 Point in Time Count, 79% of sheltered and 74% unsheltered individuals experiencing homelessness were Black, despite making up less than one-third of the city's population. These disparities extend to the city's children as well. In 2018-2019, Black students made up more than 80 percent of the 16,451 students experiencing homelessness in Chicago Public Schools (CPS), despite making up only 37 percent the overall student population.

Housing insecurity and instability in childhood are social determinants of health that can have lifelong effects on the health and well-being of the individual. Housing insecurity is a spectrum that includes literal homelessness and situations like doubling up with friends or relatives. Evidence shows that it is associated with lower weight, poor health, and developmental risk among young children, and that policies to decrease housing insecurity in this population should be a priority.

Along with other adverse childhood experiences (ACEs), housing insecurity can lead to an activation of the body's natural stress response. While this response can be healthy or normal, it has the potential to develop into a toxic stress response if the situation does not change and if it is not mitigated by the presence of a stable and supportive relationship with a parent or caregiver. The effects of ACEs can be additive, so a child experiencing housing insecurity and poverty who also witnesses violence in the home or neighborhood is at an increased risk of poor health outcomes.

This stress response can start to affect a child even while the mother is pregnant. Infants born to women experiencing homelessness are more likely to be born prematurely and with low birth weights, to require a ventilator upon birth, and to require admission to an intensive care unit than those born to women who are stably housed.

Toxic stress can cause permanent changes in the structure of the brain and alter gene function, leading to physical and mental pathophysiology including increase in depressive disorders, chronic obstructive pulmonary disease, increase in suicide attempts,

ischemic heart disease, alcoholism, and other disease processes. Policy Recommendations to Prevent and Mitigate the Health Consequences of Child Housing Insecurity include:

- Racial equity should be centered in the design and provision of all housing and support services.
- Families comprising children ages birth to six and pregnant women with housing insecurity should be prioritized for homelessness prevention services.
- Social supportive services should be provided to children and families experiencing housing insecurity with the goal of preventing homelessness.
- Pregnant women and families with children experiencing literal homelessness should be prioritized for permanent supportive housing, rapid rehousing, and other permanent housing programs.
- Families must be universally considered in the development and/or expansion of supportive and affordable housing.

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