

February 17, 2021

To the Committee of Labor and Housing,

I am advocating for LD 211. As an infectious disease physician and addiction specialist, I have spent the past 13 years treating patients, many of whom have experienced homelessness. In addition, I conduct health services research, including a recent study where we interviewed several people living on the streets during the COVID-19 pandemic.

When asked about housing instability in Maine during the pandemic, one participant told our study team, "I'm a firm believer that everybody deserves to have a place to go home at night and lay their head down and know that they're going to be safe, and they're going to be okay until morning. And unfortunately, that's just not the case." Another participant told us, "Pretty soon we're going to be left with absolutely nowhere to go."

People experiencing homelessness have higher disease burdens and mortality rates. Studies have shown that individuals with housing instability have frequent emergency room (ED) visits and have high health care expenditures. I treat many patients with infections such as HIV, viral hepatitis, as well as other infectious complications like endocarditis, which are serious heart infections. In my research with a health care for the homeless program, our study team found that patients experiencing homelessness were nearly 4 times more likely to have uncontrolled HIV than housed patients (1). In another study, we found that hepatitis C was one of the biggest predictors of ED visits among a homeless population (2). In 2018, Maine had the 9th highest rate of acute hepatitis C in the U.S. Stable housing is necessary in order to both prevent and treat hepatitis C and HIV, in addition to many other medical conditions.

From our research during COVID-19, we know that people experiencing homelessness are struggling to obtain basic human needs, such as a safe place to sleep, food, water, and bathrooms. At the very least, we need emergency shelters to avoid making our patients sleep outside in harsh conditions.

In addition to knowing that shelter is essential to stabilize health, emergency shelters may also help reduce costs, as ED visits and hospitalizations are expensive (3). Housing is health, and at a minimum, we need emergency shelters to keep Mainers safe and link patients to treatment when needed.

Thank you,

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References:

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