

SUBJECT: Housing Affects Health Care

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REFERRED TO: 2019 ACOFP Congress of Delegates

RESOLUTION NO. 18

- 1 WHEREAS, the 2017 Annual Homeless Assessment Report (AHAR) stated that nearly 600,000
2 people were experiencing homelessness on any given night in the United States; and
- 3 WHEREAS, the rates of homelessness increased for the first time in over seven years in 2017, and
4 the population living outside when compared to those living in shelters substantially
5 increased; and
- 6 WHEREAS, homelessness, including living outside or in a shelter, has been found to increase the
7 risk of mortality by 60% when compared to populations with homes due to unmanaged
8 chronic disease, poor mental health, exposure to infectious disease, and injury; and
- 9 WHEREAS, individuals experiencing homelessness access care at the emergency department three
10 times more than the general population, and are often hospitalized for conditions that
11 could be managed in a primary care setting; now, therefore be it
- 12 RESOLVED, that the American College of Osteopathic Family Physicians (ACOFP) encourage all
13 physicians to partner with their communities to understand barriers to health and
14 improve access to health care for people living without homes; and, be it further
- 15 RESOLVED, that the ACOFP promote programs that deliver primary and preventive health care to
16 all underserved populations, including those experiencing homelessness.

References:

1. The United States Department of Housing and Urban Development. 2017 Annual Homeless Assessment Report (AHAR) to Congress. December 2017.
2. Morrison, DS. Homelessness as an independent risk factor for mortality: results from a retrospective cohort study. *Int J of Epidemiology*. 2009;38: 877-883
3. White, BM, Newman, SD. Access to Primary Care Services Among the Homeless: A Synthesis of the Literature Using the Equity of Access to Medical Care Framework. *J Primary Care & Comm Health*. 2015;6(2): 77-87.

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