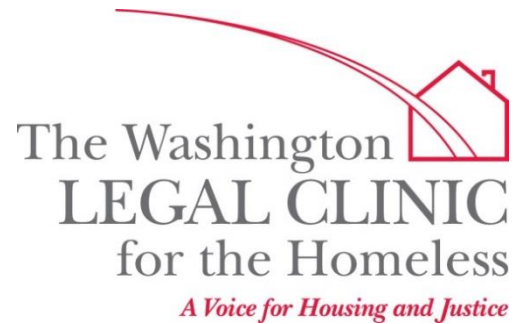


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**Committee on Housing Hearing-Housing is Maternal Health Amendment Act of 2024-  
December 9, 2024**

*Testimony of Joshua M. Drumming, Policy & Advocacy Attorney, and Brittany K. Ruffin, Director of  
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Since 1987, the Legal Clinic has envisioned and worked towards a just and inclusive community for all D.C. residents, where housing is a human right and where every individual and family has equal access to the resources they need to thrive.

In the District of Columbia, a city with less than half of its population identifying as Black (44.4%), Black mothers die from childbirth complications twice as much as the national average. In fact, according to an Office of the Chief Medical Examiner report, ninety (90%) percent of pregnancy-related deaths in the District are among Black women<sup>1</sup>. D.C., of course, is a microcosm of the U.S. as a whole. Eighty-one (81%) percent of all homeless people in the District<sup>2</sup> and seventy-nine (79%) percent of women experiencing family homelessness<sup>3</sup> in D.C. are Black. Black women die from pregnancy-related complications at nearly three times the rate as their white counterparts<sup>4</sup>.

The *Housing is Maternal Health Amendment Act of 2024* makes a minor change in D.C. law that can have a major impact on local Black maternal healthcare outcomes. This legislation

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<sup>1</sup> Black People Accounted for 90% of Pregnancy-related Deaths In D.C., Study Finds  
,<https://dcist.com/story/22/04/28/dc-maternal-mortality-study-2022/>).

<sup>2</sup> How Homelessness in DC Compares Nationally, [How homelessness in DC compares nationally - Street Sense Media](#)

<sup>3</sup> Homelessness in Metropolitan Washington: Results and Analysis from the Annual Point-in-Time (PIT) Count of Persons Experiencing Homelessness, [2024 PIT report FINAL rev Wash DC.pdf](#)

<sup>4</sup> Working Together to Reduce Black Maternal Mortality, [Working Together to Reduce Black Maternal Mortality | Women's Health | CDC](#)

alters the definition of “family” in the Homeless Services Reform Act (HSRA) by including expectant mothers in their second trimester.

Studies show that housing instability fosters and precipitates more adverse perinatal outcomes. Housing instability has been linked to low birth weights, preterm births, the need for neonatal intensive interventions soon after infants are born, as well as delivery complications. Unfortunately, these outcomes are what many homeless expectant mothers in the District will experience. Currently, two-thirds of their pregnancies do not meet the legal definition of “family” and will be denied access to D.C.’s family shelters. Instead, their only shelter access is to congregate shelters for individuals that are more congested, more likely to suffer from safety and sanitation issues, less private (something that can detrimentally impact expectant mothers’ mental health-another factor in the health of a pregnancy), and less stable in terms of one’s ability to access and remain in them. Undoubtedly, earlier access to safe and stable family shelter will have a positive impact on pregnancy outcomes.

Furthermore, this bill has the potential to increase positive health effects throughout D.C.’s Black community for generations to come. Many people are keenly aware of how the criminal justice system has negatively impacted the Black population in comparison to other racial demographics. Significantly fewer people are aware of how disparate housing, healthcare, and health outcomes have done the same. Studies have shown a range of lifelong issues linked to birth complications. For example, low birth weights, a frequent condition of babies born into homelessness, have been linked to a higher likelihood of developing adult diabetes and cardiovascular diseases. Preterm births, another common issue tied to unstable housing, has been linked to learning disabilities, cerebral palsy, sensory issues, and respiratory illnesses<sup>5</sup>. This legislation is a step forward in acknowledging, addressing, and preventing many of these unnecessary and debilitating health outcomes. Through this legislation, D.C. acknowledges the

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<sup>5</sup> A Comprehensive Review on Social Inequalities and Pregnancy Outcome-Identification of Relevant Pathways and Mechanisms, <https://www.mdpi.com/1660-4601/19/24/16592>

importance of safe shelter and its moral responsibility to safeguard and fund the wellbeing of its marginalized residents while uplifting its stated interest in promoting racial equity.

We urge D.C. Council to expand access to family shelter by passing the *Housing is Maternal Health Amendment Act of 2024*, crucial legislation that moves D.C. further along in its goal of closing its racial and health equity gap.