

Eviction moratorium key weapon in pandemic fight, physicians say

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If landlords are allowed to evict people by the same rules they did before COVID-19 hit, the nation's health will be put at even further risk than it already is during this deadly pandemic, physicians tell a federal court that will decide whether a Centers for Disease Control and Prevention (CDC) order to prevent certain residential evictions is constitutional.

Eviction moratoriums help prevent overcrowded living situations, homelessness and housing instability. These are all scenarios that make it difficult for people to comply with some of the best tools the nation has to slow COVID-19's spread now: physical distancing, self-quarantining and hand hygiene, says a brief that the AMA filed with nearly two dozen other national associations and experts in the case, *Brown v. Azar*.

"Eviction moratoriums are a critical public health tool that should be employed now," the brief tells the court.

Evidence suggests that earlier eviction moratoriums effectively slowed COVID-19's spread and reduced deaths. When protection under the CARES Act expired, in August, for renters affected by COVID-19, evictions rose quickly. The evictions tapered off after the CDC's September order banning certain evictions.

"There is a close, proven connection between eviction and public health," the brief tells the court, citing a study that showed lifting moratoriums was associated with 1.4 times higher COVID-19 mortality after seven weeks. "The CDC order may be able to help control the pandemic, protect the public health and prevent severe harm for millions of adults and children especially in communities of color."

This case is being heard in the U.S. District Court for the Northern District of Georgia Atlanta, but it is one of several cases filed in federal courts challenging the CDC's order.

“Without a nationwide, uniformly adopted eviction moratorium, evictions will likely increase to unseen heights. This would place families and individuals at risk of contracting COVID-19, as well as related and severe health harms,” the AMA brief tells the court, noting that 34% of households with children in Georgia, North Carolina, South Carolina and Virginia told U.S. Census Bureau pollsters in September that they had slight or no confidence in their ability to pay next month's rent as the economy's downturn as hit lower income families especially hard.

Higher risk for those already vulnerable

People who face the greatest risk of eviction are the same ones likelier to have chronic illnesses and disabilities that already put them at higher risk for serious complications or death if they contract COVID-19, the AMA brief tells the court.

In other words, nullifying the CDC order would have the biggest impact on the same people hardest hit by the pandemic: low-income essential workers and those in communities of color. It would force people into transiency and crowded residential environments and increase the chances of “couch surfing” and staying with relatives and friends who may be at high risk for COVID-19.

Studies have shown that adding as few as two new members to a household can as much as double the risk of other illness. During the 1918 influenza epidemic, having 45 square feet of living space per person compared with 78 square feet was associated with a tenfold increase in the rate of illness, the brief tells the court.

And eviction also decreases the odds of an individual will seek timely medical attention that could stem COVID-19s community transmission

“Without government interventions like the CDC order, the downward fall will be immediate and precipitous for millions of Americans,” the brief says. “During this severe economic downturn and the long-term negative consequences of housing instability, eviction may represent a death-knell of financial stability, housing security and health for many families and communities.”

Stay up to speed on the AMA's COVID-19 advocacy efforts and track the fast-moving pandemic with the AMA's COVID-19 resource center, which offers a library of the most up-to-date resources from JAMA Network™, the Centers for Disease Control and Prevention, and the World Health Organization.