

# 2023 Annual Report Social Determinants of Health Taskforce

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SOCIAL DETERMINANTS OF HEALTH TASKFORCE  
FOR BALTIMORE CITY

Social Determinants of Health Taskforce for Baltimore City & Advisory Board

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## EXECUTIVE SUMMARY

In its sixth year, the Social Determinants of Health Taskforce in Baltimore City (“the Taskforce”) continued to work within West Baltimore City communities and with their community leaders addressing the imbalance of social determinants in West Baltimore City. Additionally, the Taskforce members worked towards implementing different equity projects within West Baltimore City. Hence, the limited activities of the Taskforce’s subcommittees in 2023.

The Taskforce’s subcommittees continued to collaborate with community organizations to develop social determinants of health recommendations for the constituents of West Baltimore City. The Taskforce maintained its deep, trusting relationships with community members, organizations, and stakeholders.

### **Summary of subcommittee activities for 2023 include:**

**Health and Human Services:** Continued its collaboration with Baltimore City Health Department and Office of Minority Health, participating in activities related to Charmcare.org, LHIC, and COVID disparities work in the community.

**Housing:** Continued its comprehensive review of housing policies and practices to improve health and the impact that poor housing has on health. Connecting with health and housing leaders across Baltimore City.

**Social Justice:** Continued its collaboration with community organizations (BUILD and TAT) to assist returning citizens with leadership and workforce development skills. Working with the Sandtown Winchester Harlem Park Master Plan Collective and the Housing and Community Development.

**Education:** Continue plans to complete comprehensive review to understand the impact of violence in schools in Baltimore and the challenges and opportunities with virtual education during the post pandemic period.

**Workforce Development and Jobs:** Continued collaboration with Minister Conference of Baltimore and Vicinity-Coalition (group of 125 churches), workforce development training in partnership with Verizon, Comcast, Baltimore City, Tech training program, gaming, and machine summer camp for youths.

*Dr. Yolanda Ogbolu and Dr. Chris Gibbons  
Chair and Co-Chair, Social Determinants of Health Taskforce*

## Legislative History

On May 15, 2018, Governor Larry Hogan signed into law Senate Bill 444 *The Taskforce on the Social Determinants of Health in Baltimore City* (SDoH-TF). The SDoH-TF was quickly convened thereafter, with an advisory board appointed by both Senator Shirley Nathan-Pulliam and the University of Maryland, Baltimore President, Jay Perman, MD. The bill “establishes the Taskforce on Social Determinants of Health in Baltimore City and an associated advisory board. The University of Maryland, Baltimore Campus provides staff support for the Taskforce. By December each year, the Taskforce must submit a report to the Governor and the General Assembly. The bill takes effect July 1, 2018, and terminates June 30, 2025” (cited: p. 1, 2017 SB 444 Fiscal Policy Note).

## Taskforce Goals and Responsibilities

The Taskforce is charged with identifying and analyzing the cyclical, multi-generational negative social factors, which create hardship for residents of Baltimore City, and to design and implement solutions to improve the environment in which Baltimore City residents live, work, play, and worship. The Advisory Board of the Taskforce must appoint members of the Taskforce, manage Taskforce activities, and adopt bylaws or rules to govern the Taskforce operations. The Advisory Board is required to consult with the Office of Minority Health and Disparities and to appoint chairs and co-chairs of the five SDoH-TF specific subcommittees. The Taskforce may apply for grants from public and private entities to perform its duties (cited: p. 2, SB 444 Fiscal Policy). Note: SDoH-TF subcommittees are tasked with developing recommendations and collaborating with community organizations on projects to address specific social determinants of health (SDH).

The SDoH-TF focus areas include, but are not limited to:

1. **Education:** Focused on the lack of adequate schools, educational materials, opportunities, and low graduation rates across Baltimore City.
2. **Housing:** Focused on areas where urban blight, neglect, abandoned housing, poor street lighting, and broken pavement are contributing to unacceptable housing conditions for city residents.
3. **Workforce Development and Jobs:** Focused on the lack of economic opportunities (sustainable employment/chronic unemployment, underemployment/training opportunities/need for more training programs to spur opportunities) for residents living in the low-income neighborhoods of Baltimore City.
4. **Health and Human Services:** Focused on addressing the high rates of communicable and chronic diseases, including Hepatitis C, HIV/AIDS, diabetes, high blood pressure, cardiovascular disease, stroke, as well as mental health, suicide, high infant mortality, low birth rates, poor and inadequate nutrition, excess morbidity, high rates of alcoholism, as well as opioid and other substance use.
5. **Social Justice/Civil Unrest - Changed to Social Justice:** Focused on reducing neighborhood crime, homicides, rape, robbery, domestic violence, gang activity, and inappropriate police activity.

## Taskforce Policy Recommendations

Recommendations presented here are based on proposed federal legislation which offers innovative ideas for state level legislation. The following section offers a summary of policy recommendations from the Taskforce.

- **Address mental health and teen pregnancy.** According to the Centers for Disease Control (2021), there is an extremely limited number of behavioral health service providers in the state of Maryland. The availability of mental health providers is strikingly low across the entire state. Caroline County has zero psychiatrists and zero psychologists, Baltimore City with only 11 psychiatrists for every 10,000 children and 30 psychologists per 10,000 children. The pandemic caused a substantial rise in mental health cases. The current workforce number is insufficient to meet the demand. Thus, community members in Baltimore City expressed a need to increase the number of mental health providers and resources, including expanding the quality of mental health care services in housing shelters. One innovative option proposed was the federal bill (HR4198 introduced 6/28/2022). This bill seeks to develop a pipeline of behavioral health providers and expand mental health services in schools by allowing graduate behavioral students pursuing careers in school counseling to provide services in public schools. Developing this program in Maryland could strengthen mental health service provision while at the same time developing a pipeline of workers to address the stark gaps in the behavioral health workforce.
- **Develop Legislation to Implement Crisis Response Teams** like ideals proposed in Federal Legislative Bills HR6448 and HR7666. Both bills support training programs for civil service workers responding to individuals experiencing a mental health episode. Crisis Response Teams help to prevent unnecessary violence and loss of life among people in mental health crisis and to expand co-responder models. Co-responders are Community Response Teams (CRTs), where the mental health professionals accompany police officers when they respond to calls from families who report mental health crises with their loved ones. The federal bill aims to assist local communities with less than 125 law enforcement officers. Maryland could develop similar legislation to support its communities that may have greater than 125 enforcement officers.
- **Prioritize funding of additional permanent supportive housing** – especially to house and maintain vulnerable persons including people experiencing homelessness, who have a significantly higher risk of death and morbidity from injuries, mental health, infectious diseases, chronic diseases, and disorders. **There is inadequate permanent supportive housing due to limited federal resources and Maryland needs to develop additional programs for supportive housing.** In 2019, Baltimore’s public housing authority announced that it will cease accepting applications for low-income housing. The Housing Authority cited that with an average wait time greater than five years, the application threshold reduced to 14,000 (Baltimore Sun, 2019). Resources are urgently needed. **One innovative approach that could work in Maryland is enacting a law like the U.S. Senate Bill 4482, Coordinating Substance Use and Homelessness Care. The purpose of the federal bill is to establish a program within the Department of Housing and Urban Development to provide grants to homelessness organizations.**

**Further, the program would help to develop the capacity to access supportive services and bill Medicaid or pay a third party to bill Medicaid.** Medicaid pays for supportive housing services but is often inaccessible to local homelessness systems. Maryland could pass a similar bill to develop a billable housing program for permanent supportive housing implemented through the Maryland Health Care Resources Commission. This bill would build capacity to generate funding through Medicaid billing and strengthen interagency collaboration and capacity between HUD and local housing organizations.

- The Social Justice subcommittee **recommends that voter registration become automatic for residents receiving Temporary Cash Assistance (TCA) and Electronic Benefit Transfer (EBT) benefits.** According to data from the Stanford Social Innovation Review (2020), voter turnout rate among those earning more than \$100,000 to \$150,000 per year remains higher than those earning less than \$20,000. To empower communities of color in critical civic engagement, the Social Justice subcommittee recommends automatic voter registration to citizens who inherently depend on taxpayer/ state / federal funding support.
- **Support returning citizens to obtain formal employment:** People returning to Baltimore City from prison need support with expungement of their criminal records, where appropriate. The Department of Justice (2019) recognizes that consequences of criminal records not only have a detrimental effect on individuals and family economic security, but it also creates a range of lifelong obstacles (i.e., voting, civic participation, education, employment, professional licensing, housing, and receipt of public benefits that impedes re-entry into society).
- **Review and revise policies related to penalties regarding one losing his or her driver's license for delinquency in child support.** Under Maryland law, child support arrearages automatically result in suspension of the debtor's driver's license, significantly hampering an individual's ability to have personal transportation that would allow one to secure and maintain income.

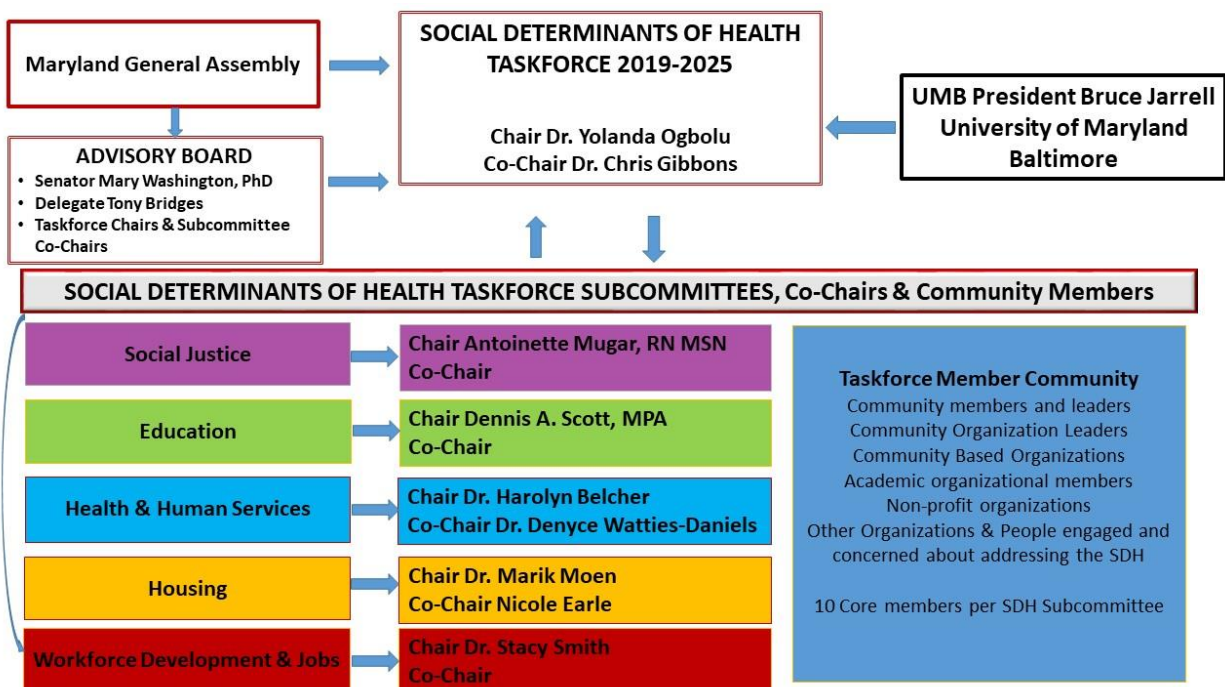
## **TASKFORCE SUMMARY & LESSONS LEARNED 2023**

For the Taskforce, 2023 proved to be a challenging yet busy year. The Taskforce in its sixth year experienced a laggard momentum in work. Some Taskforce members were inactive i.e., Antoinette Mugar and Stacey Smith, while others faced professional and personal transitions. The Co-Chair, Yolanda Ogbolu, transitioned into a new role and lost her mother, who passed away this year. Other Taskforce members were busy working on social determinants of health through professional activities including actively writing and collaborating on research grants and equity projects, as well as meeting with community organizations and leaders. As the Taskforce winded down the last year (and in its final year), much of the effort in meetings was spent planning on how to end the Taskforce's work with a final report and closing conference that would detail lessons learned. Functioning without a budget for the past seven years has been challenging and the personal commitment of the members to continue to work without financial support is waning. In this report, we continue to make recommendations for policy change and in the coming year we will plan for the discontinuation of the taskforce.

Thank you for this opportunity to report on our progress over the last year. We hope that this report and the insights gathered from our work over the last year is a trusted resource that will be useful as you continue to deliberate and propose legislation in 2024 and beyond.

## APPENDICES

### APPENDIX I: Taskforce Organizational Chart and Contact list



### Taskforce Contacts

#### Taskforce

Chair Dr. Yolanda Ogbolu  
Co-Chair Dr. Chris Gibbons

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#### Education Subcommittee

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#### Health & Human Services Subcommittee

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#### Housing Subcommittee

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#### Social Justice Subcommittee

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#### Workforce Development and Jobs

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## **APPENDIX II- Meeting Agendas**

### **A. SDH Taskforce Leadership Meeting January 19, 2023**

#### **Meeting Agenda**

- I. Administrative**
  - a. SDoH Annual Report
- II. Subcommittee reports-** Workforce Development; Education, Housing; Health; Social Justice
- III. Public meeting planning**
- Adjourned**

### **B. SDoH Taskforce Leadership Meeting April 20, 2023**

#### **Meeting Agenda**

- I. Administrative**
  - a. Financial disclosures and ethics discussion,
- II. Subcommittee reports-** Workforce Development; Education, Housing; Health; Social Justice
- III. Public meeting planning**
  - a. Discuss planning closing ceremony.
- Adjourned**

### **C. SDoH Taskforce Leadership Meeting June 15, 2023**

#### **Meeting Agenda**

- **Administrative**
- **Subcommittee reports-** Workforce Development; Education, Housing; Health; Social Justice
- **Public meeting planning**

**Adjourned**

### **D. SDoH Taskforce Leadership Meeting August 17, 2023**

#### **Meeting Agenda**

- I. Administrative**
- II. Subcommittee reports-** Workforce Development; Education, Housing; Health; Social Justice
- III. Public meeting planning**
- Adjourned**

### **E. SDoH Taskforce Leadership Meeting November 16, 2023**

#### **Meeting Agenda**

- IV. Administrative**
- V. Subcommittee reports-** Workforce Development; Education, Housing; Health; Social Justice
- VI. Public meeting planning**
- Adjourned**

## **APPENDIX IV – House/Senate Bills**

[H.R.4198 – Mental Health in Schools Excellence Program Act of 2021](#)

[H.R.6448 – Invest to Protect Act of 2022](#)

[H.R.7666 – Restoring Hope for Mental Health and Well-Being Act of 2022](#)

[Maryland’s Clean Indoor Air Act of 2007](#)

[S.4482 – Coordinating Substance Use and Homelessness Care Act of 2022](#)

## **APPENDIX IV - Highlights**

**Presentations available on our website and YouTube, Website:**

<https://www.umaryland.edu/sdh-taskforce/>