



**Access to Transportation, Health Care, and Disaster Preparations and Relief  
in South Florida**

**Submission to the United Nations Special Rapporteur on Extreme Poverty and Human  
Rights in Preparation for his Official 2017 Visit to the United States**

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Catalyst Miami is an organization whose mission is to develop and support individual leadership and strong organizations that work together to improve health, education, and economic opportunity in our community. Catalyst Miami envisions a thriving Miami in which residents, organizations and communities work together toward common goals. Collaboration, partnership and networks drive our work and are central to all of our programs.<sup>2</sup>

The Miami Law Human Rights Clinic (HRC) works for the promotion of social and economic justice globally and in the U.S. The Clinic uses international human rights laws and norms, domestic law and policy, and multidimensional strategies, such as community organizing, political activism, and global networking, to draw attention to human rights violations, develop practical solutions to those problems, and promote accountability on the part of state and non-state actors.

**Introduction**

According to the United States Census Bureau, about 20% of Miami-Dade County residents are living in poverty, a significantly higher proportion than the national average of 15.5%.<sup>3</sup> We identify three major areas of concern wherein marginalized communities experience disproportionate levels of disenfranchisement in Miami: access to transportation, healthcare, and disaster preparations and relief. After comprehensive consideration of these issues, we offer solutions which aim to provide equitable relief for the undue burdens confronting these communities.

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<sup>2</sup> *What We Do*, Catalyst Miami (October 26, 2017 6:46 PM), <https://catalystmiami.org/our-work/what-we-do/>.

<sup>3</sup> United States Census Bureau, *QuickFacts: Miami-Dade County, Florida*, United States Census Bureau (July 1, 2016), <https://www.census.gov/quickfacts/fact/table/miamidadecountyflorida#viewtop>; Douglas Hanks, *How Poor is Miami? The Rich Earn \$40 For Every \$1 Earned by the Poor*, Miami Herald (May 24, 2016), <http://www.miamiherald.com/news/local/community/miami-dade/article79670752.html>.

## **Issue I: Transportation**

### **A. Transportation Facts & Spotlights**

For people living in poverty in Miami, public transportation is often the only transit option available. Miami-Dade County's public transportation system consists of the MetroRail, a train system consisting of only two lines and 23 stops. The Metrorail exclusively runs North to South, leaving many neighborhoods without accessible stations. In addition to the Metrorail, there is the Metrobus, a bus system with unreliable schedules and limited routes, and the Metromover, a free, elevated people mover, which circulates mostly in affluent areas and has poor ridership rates.<sup>4</sup> A comparative look at the public transportation system in Medellin, Colombia presents a stark contrast to Miami's system. Medellin relies on an integrated transit system using buses, trams, cable cars, trains, and a bus rapid transit system known as the Medellin Metro. Medellin's public transportation system, by and large, successfully supports its population of 2.45 million people.<sup>5</sup> In fact, Medellin's significant achievements in terms of poverty and crime reduction and improved health outcomes are in part attributed to the City's investment in its public transportation system.

However, for a county with a population of 2.7 million and high levels of poverty, Miami-Dade County's ridership rates for all public transit are extremely low.<sup>6</sup> One significant factor contributing to these low rates of ridership is the very limited access many communities have to public transportation. A look at the Miami-Dade Transportation Planning Organization website further suggests that the city has inadequate plans for improvement.<sup>7</sup> So while Miami residents wait for a solution, the government of Miami is stagnant in this area.

The Miami-Dade County neighborhood of Shorecrest is noteworthy for the diverse socio-economic status of its residents, all of whom are extremely vulnerable to the effects of climate change.<sup>8</sup> Each year, the neighborhood experiences massive flooding events due to what is known as "King Tide."<sup>9</sup> The safety tips created and distributed by the government of the City of Miami repeatedly emphasize the dangers associated with commuting through these flood waters. However, it is difficult for residents in affected areas in Shorecrest to heed this advice as King Tide flooding persists for several days. What is more, public transportation access points are minimal, if not non-existent, in this area of Miami.

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<sup>4</sup> *Ridership Technical Reports*, Miami-Dade County (October 22, 2017 11:00PM) <https://www.miamidade.gov/transit/ridership-technical-reports.asp>.

<sup>5</sup> *Metro de Medellin*, Metro de Medellin (October 29, 2017 10:15PM), <https://www.metrodemedellin.gov.co/viajeconnosotros/mapas>.

<sup>6</sup> *Ridership Technical Reports*, Miami-Dade County (October 22, 2017 11:00PM), <https://www.miamidade.gov/transit/ridership-technical-reports.asp>.

<sup>7</sup> *Long Range Transportation Plan*, Miami-Dade Transportation Planning Organization (October 22, 2017 10:33PM), <http://www.miamidadetpo.org/long-range-transportation-plan.asp>.

<sup>8</sup> David Smiley, *Mainland Miami Ponders Returning Neighborhoods to Nature in Order to Survive Rising Seas*, Miami Herald, (October 29, 2017 10:00PM), <http://www.miamiherald.com/news/local/community/miami-dade/article155213369.html>.

<sup>9</sup> *South Florida King Tides*, The City of Miami [http://www.miamigov.com/home/docs/Headlines/2017/10-27%20king%20tide%20flyer%2017%20NOV%20SHORECREST%20v1\\_.pdf](http://www.miamigov.com/home/docs/Headlines/2017/10-27%20king%20tide%20flyer%2017%20NOV%20SHORECREST%20v1_.pdf).

## B. Transportation & Other Poverty Determinants

Miami-Dade County is defined by urban sprawl. This results in heavy dependence on private vehicle ownership with a severe lack of transportation alternatives. However, approximately “one in ten [Miami] families do not have access to a vehicle.”<sup>10</sup> Further, according to the Pew Research Center, about 18% of Miami’s significant immigrant population is undocumented, barring tens of thousands of people from obtaining driver licenses.<sup>11</sup> As such, many of Miami’s marginalized communities live in “transportation deserts.” Deeper examination of these deserts reveals a web of interlocking issues contributing to systemic poverty in Miami’s marginalized communities.

As one Miami-Dade community member relayed during a County budget meeting, “ the best way to judge a community [is] by its public transportation system.”<sup>12</sup> Miami is widely known for its “car culture” and notorious traffic. As such, focus on transportation is chiefly couched in terms of reducing vehicle congestion and improving road conditions and infrastructure.<sup>13</sup> For example, the Miami-Dade County Department of Transportation and Public Works cites technological advancements and integration as the optimal ways to overhaul Miami’s transportation networks.<sup>14</sup> The ultimate goal, asserts the Department’s Assistant Director, is “true multi-modal mobility,” which includes a consolidation of ride-sharing applications, private car ownership, and public transit systems.<sup>15</sup> However, such plans for improvement reflect a fundamental disregard for the role Miami’s public transportation system plays in perpetuating poverty and widening income gaps.

As of 2014, only 16% of jobs in Miami are accessible by public transportation within 90 minutes<sup>16</sup> and the majority of Miami’s 11,000+ public housing units are located well outside

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<sup>10</sup> Megan Lawson, Ph.D., *Disasters and Populations at Risk: Lack of Vehicles Makes Evacuation Difficult*, Headwaters Economics, <https://headwaterseconomics.org/economic-development/climate-change/evacuation-difficult/> (last visited Oct. 28, 2017).

<sup>11</sup> Jeffrey S. Passel and D’Vera Cohn, *20 Metro Areas are Home to Six-in-Ten Unauthorized Immigrants*, Pew Research Center FactTank, (Feb. 9, 2017), [http://www.pewresearch.org/fact-tank/2017/02/09/us-metro-areas-unauthorized-](http://www.pewresearch.org/fact-tank/2017/02/09/us-metro-areas-unauthorized-immigrants/?utm_content=buffer9b00b&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer)

[immigrants/?utm\\_content=buffer9b00b&utm\\_medium=social&utm\\_source=twitter.com&utm\\_campaign=buffer](http://www.pewresearch.org/fact-tank/2017/02/09/us-metro-areas-unauthorized-immigrants/?utm_content=buffer9b00b&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer).  
<sup>12</sup> Douglas Hanks, *Metrorail Cuts Reversed, PAMM Takes Funding Hit for Cuban Museum in Miami-Dade Budget*, Miami Herald (Sep. 29, 2017), <http://www.miamiherald.com/news/local/community/miami-dade/article176069821.html>.

<sup>13</sup> Isabella Vi Gomes, *As County Prepares to Gut Public Buses and Trains, Angry Commuters Plan to Protest*, Miami New Times (Aug. 18, 2017), <http://www.miaminewtimes.com/news/transit-alliance-fights-miami-dade-county-budget-cuts-to-buses-trains-9594060>.

<sup>14</sup> Ryan McCauley, *Miami-Dade County Demonstrates How to Overhaul Urban Mobility Through Integration*, Future Structure (June 1, 2017), <http://www.govtech.com/fs/Miami-Dade-County-Demonstrates-How-to-Overhaul-Urban-Mobility-through-Integration.html>.

<sup>15</sup> *Id.*

<sup>16</sup> Lecia Imbery, *Bridges to Economic Opportunity: Why We Need Transportation Equity*, Coalition on Human Needs (Aug. 8, 2014), <https://www.chn.org/2014/08/08/bridges-economic-opportunity-need-transportation-equity/#.We9APBNSx0t>.

walking distance of the Metrorail and Metromover.<sup>17</sup> Further, most of the housing options located around the southern half of the Metrorail corridor are prohibitively expensive for low-income families.<sup>18</sup> Finally, the walking distance between transit stops is frequently more than one-half of a mile, with roundtrip fares costing as much as more than \$5.<sup>19</sup> Beyond the disparate geographic distribution between employment opportunities, affordable housing options, and public transit access points, another symptom of perpetuated poverty surfaces: lack of access to healthcare.

For many Miami citizens living in poverty, affordable healthcare coverage is only half the battle. The spatial mismatch of employment opportunities, affordable housing, and accessible public transit is another obstacle to accessing healthcare facilities and services. While the Metrorail and Metrobuses do have major hospital-adjacent stations, walking up to half a mile in scorching tropical heat or inclement weather to access public transportation is not practical, or in some cases even feasible, for many people with medical needs—especially seniors and people with disabilities.

Additionally, emergency care is extremely expensive for patients and hospitals alike, and many medical facilities and providers in Miami are not located inside or near hospitals. For patients living in impoverished communities, expensive ride-share applications or private cars are already an unfeasible option. This is yet another financial burden unaccounted for in discussions regarding public health and transportation programs. Further, other transit alternatives such as bicycles, are inadequate due to health or physical limitations. For those with serious and/or chronic conditions or physical disabilities, just the trip to a healthcare provider may prove to be a potentially deadly medical excursion. Indeed, in some situations, patients without a viable means of transportation may be forced to wait for a medical emergency before seeing a provider, making emergency rooms the main source of care for many impoverished patients.<sup>20</sup> As studies have proven, “ultimately, transportation barriers may mean the difference between worse clinical outcomes that could trigger more emergency department visits and timely care that can lead to improved outcomes.”<sup>21</sup> Therefore, the lack of public transit to seek preventative care thus leads to untimely treatment for curable conditions, possible uninformed self-care, and in extreme cases, preventable deaths.<sup>22</sup>

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<sup>17</sup> Federal Transit Administration, *Transportation Needs of Disadvantaged Populations: Where, When, and How?*, FTA Report No. 0030, 32 (Feb. 2013), [https://www.transit.dot.gov/sites/fta.dot.gov/files/FTA\\_Report\\_No.\\_0030.pdf](https://www.transit.dot.gov/sites/fta.dot.gov/files/FTA_Report_No._0030.pdf).

<sup>18</sup> *Id.* at 33.

<sup>19</sup> *Id.* at 66.

<sup>20</sup> Imran Cronk, *The Transportation Barrier*, *The Atlantic* (Aug. 9, 2015), <https://www.theatlantic.com/health/archive/2015/08/the-transportation-barrier/399728/>.

<sup>21</sup> Samina T. Syed, Ben S. Gerber, Lisa K. Sharp, *Traveling Towards Disease: Transportation Barriers to Health Care Access*, 38 *Journal of Community Health* 976, 976 (Oct. 2013), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4265215/#R22>.

<sup>22</sup> Robert Wood Johnson Foundation, *Low Income Patients Say ER is Better Than Primary Care*, Robert Wood Johnson Foundation (July 9, 2013), <https://www.rwjf.org/en/library/articles-and-news/2013/07/low-income-patients-say-er-is-better-than-primary-care.html>.

### C. Transportation Accessibility & Disaster Relief

Miami's tropical climate and weather patterns present unique problems for every method of transportation. Tropical storms with heavy rains and dangerous wind gusts, along with rising sea levels, frequently result in flooding and often render train and bus systems inoperable.<sup>23</sup> As such, natural disasters, such as Hurricane Irma, "are disproportionately debilitating for marginalized social groups."<sup>24</sup> In fact, a 2013 study by the Federal Transit Administration reveals that just over 14% of Miami-Dade County's population would "require transportation assistance in the event of a major evacuation."<sup>25</sup>

Indeed, just days before Hurricane Irma made landfall in September 2017, when Miami-Dade County Mayor Carlos Gimenez released statements identifying shelters that would be open to Miami residents,<sup>26</sup> he advised that shelters were to be considered only a "refuge of last resort for people who truly have no place to go."<sup>27</sup> This does not account for the many people who are not in an evacuation zone, but who cannot afford to properly secure their homes in order to protect their families from strong winds, flooding, or other life-threatening damages. Further, the Red Cross instructed Miami residents that staying in a shelter also required bringing enough survival supplies to last at least three days.<sup>28</sup> However, many of these community residents live on a fixed or limited income, which makes buying pre-and-post-disaster supplies nearly impossible.<sup>29</sup> Further, these disaster preparation instructions were compounded by warnings that public transportation systems would stop running once winds approached 35 mph, eliminating public transit as an option for completing hurricane preparations.<sup>30</sup> Additionally, the severe lack of public transportation northbound and inland away from Miami made evacuation very difficult without a car. Indeed, a 2017 study by the research group Headwaters Economics shows the most vulnerable neighborhoods in Miami and Miami Beach, where "one-in-ten families is living in poverty and one-in-ten families does not have access to a vehicle."<sup>31</sup> As a result, staying in a shelter is often the only viable evacuation option for many. However, there is also insufficient space in shelters to house all of those who are evacuated. Consequently, a large number of residents (at least 10%) in Miami's impoverished communities are forced to remain in their home during the hurricane.<sup>32</sup> In many of these neighborhoods, homes are also ill-equipped to

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<sup>23</sup> Angel Streeter, *South Florida Assessing Climate Change on Roads, Bridges, Railroads, Airports*, HuffPost (June 18, 2013), [https://www.huffingtonpost.com/2013/04/19/south-florida-climate-change-impact\\_n\\_3113985.html](https://www.huffingtonpost.com/2013/04/19/south-florida-climate-change-impact_n_3113985.html).

<sup>24</sup> Alejandra Maldonado, Timothy W. Collins, and Sara E. Grineski, *Hispanic Immigrant's Vulnerabilities to Flood and Hurricane Hazards in Two United States Metropolitan Areas*, 106 *Geographical Review* 109, 109-10 (Jan. 2016).

<sup>25</sup> Federal Transit Administration, *Transportation Needs of Disadvantaged Populations: Where, When, and How?*, FTA Report No. 0030, 53 (Feb. 2013), [https://www.transit.dot.gov/sites/fta.dot.gov/files/FTA\\_Report\\_No.\\_0030.pdf](https://www.transit.dot.gov/sites/fta.dot.gov/files/FTA_Report_No._0030.pdf).

<sup>26</sup> CBS Miami, *700k Residents Under Evacuation Orders in Miami-Dade County*, CBS Miami (Sep. 7, 2017), <http://miami.cbslocal.com/2017/09/07/miami-dade-hurricane-irma-preps-carlos-gimenez>.

<sup>27</sup> *Id.*

<sup>28</sup> *Id.*

<sup>29</sup> Nadege Green, *Hurricane Irma Brings Issues of Poverty in Miami into Stark Relief*, MarketPlace Weather Economy (Sep. 28, 2017), <https://www.marketplace.org/2017/09/28/economy/hurricane-irma-brings-issues-poverty-miami-stark-relief>.

<sup>30</sup> CBS Miami, *supra*.

<sup>31</sup> Lawson, Ph. D., *supra*.

<sup>32</sup> *Id.*

withstand hurricane conditions, further highlighting the disproportionate impact natural disasters have on marginalized communities.<sup>33</sup>

While access to transportation is an everyday struggle for many Miami residents, the stakes become much higher when faced with natural disasters and evacuation orders. As one Miamian who was unable to evacuate his home put it, “the main thing I’m worrying about is surviving.”<sup>34</sup>

## **Issue II: Health Care Coverage**

### **A. Facts about Healthcare Coverage in Southern Florida**

The Affordable Care Act has significantly lowered the uninsurance rate in the United States.<sup>35</sup> However, there are still millions of individuals in the United States and hundreds of thousands in Florida who remain uninsured due to policy decisions made by federal and some state elected officials. Despite Miami-Dade County being awarded a Robert Wood Johnson Foundation Culture of Health Prize in 2016,<sup>36</sup> there are still dire health care issues that must be addressed. One out of five Miami-Dade residents say that their health status is “fair” or “poor”.<sup>37</sup> It is also important to note that 26% of individuals in Miami-Dade are uninsured, compared to 20% of uninsured individuals in the state of Florida overall. This number rises to about 30% for minorities.<sup>38</sup> A lack of healthcare coverage leads to poor health outcomes, which is both a cause and consequence of poverty. Individuals living in poverty who are not eligible for Medicaid because their income is above the income eligibility requirement are not able to afford private insurance, nor are they able to pay for medication and medical visits out of pocket. In addition, there are not sufficient public health facilities which provide low-to-no-cost services to these individual. All of these barriers to healthcare exacerbate conditions of individuals living in poverty.

A significant factor contributing to the high rates of uninsured individuals in Florida and Miami-Dade County is the State’s refusal to expand the Medicaid program under the Affordable Care Act (ACA). The ACA is a health care reform law that was enacted in March 2010 with the goal of increasing insurance coverage and access to healthcare. The law has three primary goals and many provisions that aim to achieve these:

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<sup>33</sup> Rebekah Entralgo, *Irma is ‘Not a Storm You Can Sit and Wait Through.’ What If That’s Your Only Option?*, Think Progress (Sep. 8, 2017), <https://thinkprogress.org/unable-to-evacuate-irma-d240985fda5e/>.

<sup>34</sup> Nadege Green, *Poor In Miami: Hoping to Ride Out Irma on Bread and Cans of Tuna*, NPR Around the Nation Blog (Sep. 8, 2017), <http://www.npr.org/2017/09/08/549295524/poor-in-miami-hoping-to-ride-out-irma-on-bread-and-cans-of-tuna>.

<sup>35</sup> Nicholas Bakalar, *Nearly 20 Million Have Gained Health Insurance Since 2010*, The New York Times (May 22, 2017), <https://www.nytimes.com/2017/05/22/health/obamacare-health-insurance-numbers-nchs.html>.

<sup>36</sup> *Home Page*, Florida Health Miami Dade (October 26, 2017 6:48 PM), <http://miamidade.floridahealth.gov/>.

<sup>37</sup> *Health*, Florida Health Miami Dade (October 26, 2017 6:56PM), [http://www.miamidade.gov/greenprint/planning/library/milestone\\_one/health.pdf](http://www.miamidade.gov/greenprint/planning/library/milestone_one/health.pdf).

<sup>38</sup> *Florida Miami Dade*, County Health Rankings (October 26, 2017 7:05 PM), <http://www.countyhealthrankings.org/app/florida/2017/rankings/miami-dade/county/factors/overall/snapshot>.



“[1] Make affordable health insurance available to more people. The law provides consumers with subsidies (“premium tax credits”) that lower costs for households with incomes between 100% and 400% of the federal poverty level.

[2] Expand the Medicaid program to cover all adults with income below 138% of the federal poverty level. (Not all states have expanded their Medicaid programs.)

[3] Support innovative medical care delivery methods designed to lower the costs of health care generally.”<sup>39</sup>

In June 2012, a Supreme Court ruling made it optional for states to expand Medicaid<sup>40</sup> eligibility to nearly all low-income individuals with incomes at or below 138% of the federal poverty rate.<sup>41</sup> Florida is one of the states that opted to not expand Medicaid coverage, becoming the second largest state with a coverage gap comprised of poor uninsured adults whose “income is above current Medicaid eligibility but below the lower limit for Marketplace premium tax credits”<sup>42</sup> (only behind Texas<sup>43</sup>). This decision has made Florida one of the ten most difficult states for working parents to get Medicaid.<sup>44</sup> Additionally, this decision makes it impossible for childless adults who do not have a disability to be eligible for Medicaid. Florida makes up about 20% of the population of individuals who fall within this gap, leaving 567,000 individuals who would otherwise be eligible for Medicaid, uninsured.<sup>45</sup> Moreover, 54% of those affected are people of color.

More recently, Congress has allowed the Children’s Insurance program (CHIP) to expire.<sup>46</sup> CHIP is a program that “provides low-cost health coverage to children in families that earn too much money to qualify for Medicaid.”<sup>47</sup> There are 5.7 million children in the United States who have insurance through this program. Specifically, in Florida there were 374,884 children enrolled in CHIP in 2016.<sup>48</sup> Now that this program has expired, it is unclear what will

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<sup>39</sup> *Affordable Care Act*, Health Care (October 26, 2017 7:16 PM), <https://www.healthcare.gov/glossary/affordable-care-act/>.

<sup>40</sup> *A Guide to the Supreme Court’s Decision on the ACA’s Medicaid Expansion*, The Henry J. Kaiser Family Foundation (August 01, 2012), <https://www.kff.org/health-reform/issue-brief/a-guide-to-the-supreme-courts-decision/>.

<sup>41</sup> Rachel Garfield and Anthony Damico, *The Coverage Gap: Uninsured Poor Adults in States that Do Not Expand Medicaid*, The Henry J. Kaiser Family Foundation (October 19, 2016), <https://www.kff.org/uninsured/issue-brief/the-coverage-gap-uninsured-poor-adults-in-states-that-do-not-expand-medicaid/>.

<sup>42</sup> *Id.*

<sup>43</sup> *A Guide to the Supreme Court’s Decision on the ACA’s Medicaid Expansion*, The Henry J. Kaiser Family Foundation (August 01, 2012).

<sup>44</sup> Garfield and Damico, *supra* note 40.

<sup>45</sup> *Id.*; Daniel Chang, *With High Uninsured Rate, Miami-Dade Faces Health Crisis, Report Says*, Miami Herald (April 13, 2016), <http://www.miamiherald.com/news/health-care/article71640637.html>.

<sup>46</sup> Valerie Strauss, *9 Million Kids Get Health Insurance Under CHIP. Congress Just Let It Expire.*, The Washington Post (Oct. 1, 2017), [https://www.washingtonpost.com/news/answer-sheet/wp/2017/10/01/9-million-kids-get-health-insurance-under-chip-congress-just-let-it-expire/?utm\\_term=.09b84614e274](https://www.washingtonpost.com/news/answer-sheet/wp/2017/10/01/9-million-kids-get-health-insurance-under-chip-congress-just-let-it-expire/?utm_term=.09b84614e274).

<sup>47</sup> *The Children’s Health Insurance Program*, Health Care (October 26, 2012 9:43 PM), <https://www.healthcare.gov/medicaid-chip/childrens-health-insurance-program/>.

<sup>48</sup> *Unduplicated Number of Children Ever Enrolled*, Medicaid (October 26, 2017 9:48 PM), <https://www.medicaid.gov/chip/downloads/fy-2016-childrens-enrollment-report.pdf>.

happen to the insurance coverage of these children. The state of Florida has projected that they will run out of funding for CHIP by January 2018. This is very alarming, as Florida is one of the five states with the highest enrollment, meaning that about 374,884 children will not have coverage beginning in January 2018.<sup>49</sup>

## **B. Inadequacy of Disaster Relief Measures**

When the food stamp program was created in 1939, it served as a tool through which the Department of Agriculture could reduce massive surpluses on farms by subsidizing the costs that citizens had to pay to receive those overproduced goods.<sup>50</sup> The program has since been reimagined multiple times and now exists as SNAP – The Supplemental Nutrition Assistance Program.<sup>51</sup> Its primary purpose is no longer assisting farms in selling off their goods; instead, it is the means through which qualifying low-income citizens may receive financial assistance from the Departments of Social Services or Children and Families to purchase necessary food, while also stimulating the economy through their patronage of their favored market.<sup>52</sup> Eligibility for the basic SNAP program depends on financial status; to qualify, applicants must have a “gross monthly income at or below 130% of the poverty line (about \$26,600 a year).”<sup>53</sup> The Disaster Supplemental Nutrition Assistance Program – or DSNAP – has existed since 1988. DSNAP allows SNAP benefits to be repurposed during any national emergencies which are formally recognized by the President of the United States of America. However, provision of these disaster-time benefits relies on far more relaxed standards than the basic program. Each state chooses how DSNAP will be distributed, with the Department of Children and Families (DCF) being responsible for the implementation of the program in Florida.<sup>54</sup>

In the wake of Hurricane Irma, implementation of the DSNAP program in Miami-Dade fell far short of expectations, with thousands of individuals being turned away without receiving the aid they had been waiting for.<sup>55</sup> While evidence of the crowd growing steadily following the program’s start earlier in the week should have placed the DCF on notice, the officials in charge of organizing the assistance centers failed to adequately prepare for the massive crowds by the weekend.<sup>56</sup> This eventually led to the DCF shutting down operations in the interest of public

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<sup>49</sup> Tricie Brooks, Joan Alker and Karina Wagnerman, *What are the Consequences of Congressional Delay on CHIP?*, Georgetown University Health Policy Institute Center for Children and Families (October 2017), <https://ccf.georgetown.edu/wp-content/uploads/2017/10/CHIP-delay-10-25.pdf>.

<sup>50</sup> *A Short History of SNAP*, United States Dep’t of Agric. Food and Nutrition Serv., <https://www.fns.usda.gov/snap/short-history-snap>. (Last visited October 29, 2017).

<sup>51</sup> *Id.*

<sup>52</sup> *Introduction to the Supplemental Nutrition Assistance Program*, Ctr. on Budget and Policy Priorities, <https://www.cbpp.org/research/policy-basics-introduction-to-the-supplemental-nutrition-assistance-program-snap?fa=view&id=2226> (Last visited October 29, 2017).

<sup>53</sup> *Id.*

<sup>54</sup> *Food Assistance in Disaster Situations*, United States Dep’t of Agric. Food and Nutrition Serv., <https://www.fns.usda.gov/disaster/food-assistance-disaster-situations>. (Last visited October 29, 2017).

<sup>55</sup> Monique Madan, *Why did thousands wait hours in hot sun for post-Irma food stamps?*, Miami Herald, <http://www.miamiherald.com/news/weather/hurricane/article179220496.html> (Last visited October 29, 2017).

<sup>56</sup> Monique Madan, *Food assistance centers close after people suffer heat exhaustion in line*, Miami Herald, <http://www.miamiherald.com/news/local/community/broward/article178932506.html> (Last visited October 29, 2017).



safety.<sup>57</sup> Despite the existence of multiple distribution centers, the numbers in attendance at the Tropical Park location rose as high as 50,000, with many reportedly camping overnight to ensure that they were not turned away.<sup>58</sup> The DCF has since offered assurances that those vulnerable groups which rely on their aid will not be ignored, but their continued failure to provide the necessary accommodations for the elderly and disabled citizens who are most likely to require that aid renders their gesture meaningless. Until the DCF can provide transportation both to and from the distribution centers, conduct in-home visits, or outright waive the in-person requirement for those who are unable to travel to the centers, they will be unable to reach those populations which are most in need of aid.

### C. Lack of Protection for the Elderly

Florida has the second-largest population of senior citizens in the United States, with almost a quarter of the state's 20 million residents being aged 65 or over.<sup>59</sup> The costs of caring for these individuals vary greatly, depending on whether they remain in their home or are moved to a nursing facility due to the need for more involved care. On average, the cost of staying in a nursing home is in the vicinity of \$60,000 per year. While much of that is billed back to the government, citizens who require round-the-clock treatment for themselves or their loved ones must contend with the remaining costs.<sup>60</sup> Despite the high cost for residency in a nursing home, poor regulatory practices have allowed the quality of care to vary greatly between facilities, with the practices of one nursing home in South Florida causing fourteen residents to die due to complications in the aftermath of Hurricane Irma.<sup>61</sup> That nursing home, named "The Rehabilitation Center at Hollywood Hills," has since been shut down, and is the subject of a criminal investigation for the deaths of its residents, with the actions of its staff being placed under close scrutiny after it came to light that some residents had been reported as being healthy even hours after their deaths.<sup>62</sup>

Hollywood Hills was not the only nursing home that lost power during the aftermath of Hurricane Irma. Many others also lacked the generators necessary to restore air conditioning and other amenities.<sup>63</sup> As a response to the failure of those facilities to maintain proper health and

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<sup>57</sup> *Id.*

<sup>58</sup> Glenn Garvin, *50,000 line up outside Tropical Park seeking post-hurricane food assistance*, Miami Herald, <http://www.miamiherald.com/news/local/community/miami-dade/article178996361.html> (Last visited October 29, 2017).

<sup>59</sup> Laura Green, *Florida can't care for all of its frailest seniors*, Palm Beach Post, <http://www.mypalmbeachpost.com/news/national-govt--politics/florida-can-care-for-all-its-frailest-seniors/pPAysE0LVXWcx6Vo4pIVVK/> (Last visited October 29, 2017).

<sup>60</sup> *Florida's Aging Population*, Palm Beach Post, <http://www.mypalmbeachpost.com/interactive/aging-population/> (Last visited October 29, 2017).

<sup>61</sup> Erika Pesantes, *14<sup>th</sup> person from Hollywood nursing home dies, police say*, Sun Sentinel, <http://www.sun-sentinel.com/news/hollywood-nursing-home-hurricane-deaths/fl-reg-13-nursing-home-death-20171009-story.html> (Last visited October 29, 2017).

<sup>62</sup> Travis Andrews, *Officials shutter Fla. nursing home where 10 have died since Irma, citing 'egregious' misrepresentations*, Washington Post, <https://www.washingtonpost.com/news/morning-mix/wp/2017/09/21/officials-shutter-fla-nursing-home-where-8-died-after-irma-citing-egregious-misrepresentations/> (Last visited October 29, 2017).

<sup>63</sup> Ellen Gabler, *At Florida nursing home, many calls for help, but none that made a difference*, The New York Times, <https://www.nytimes.com/2017/09/23/us/nursing-home-deaths.html> (Last visited October 29, 2017).

safety standards for the elderly, Florida's Governor has made generators a mandatory requirement for all nursing homes.<sup>64</sup> However, this is a purely reactionary measure, which does nothing to address the weak regulatory scheme which allows these violations to occur; requiring stricter and more frequent inspections which occur year-round and immediately after disasters would do more to ensure that these tragedies are avoided.

### **Human Rights Implications**

Under Article 25(1) of the Universal Declaration of Human Rights, “[e]veryone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services . . .”<sup>65</sup> Article 12 of the International Covenant on Economic, Social and Cultural Rights recognizes “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.”<sup>66</sup> It further lists various steps to achieve this, including “The creation of conditions which would assure to all medical service and medical attention in the event of sickness.”<sup>67</sup> Additionally, the constitution of the World Health Organization, the first to state health as a right, asserts that the “enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being.”<sup>68</sup> It also places the responsibility on governments to make this right attainable by stating that “Governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures.”<sup>69</sup> Florida is in violation of this human right to health by not expanding Medicaid and permitting there to be a coverage gap of individuals who are not able to receive affordable insurance so that they may be able to see a doctor and they may buy the medication they need. Being unable to access medication is barring these individuals from being able to access an entitlement that is given to them through their right of an attainable standard of care.<sup>70</sup> Additionally, another key aspect to the right to health is that it must be physically accessible to vulnerable population.<sup>71</sup> Inadequate transportation options prevent vulnerable populations from attaining health care that is physically accessible to them.

### **Transportation Recommendations**

1. We ask that the Special Rapporteur encourage the Miami-Dade Board of County Commissioners to allocate more funding to allow the Department of Transportation and

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<sup>64</sup> Sheri Fink, *Nursing Home Deaths Prompt New Rules by Florida Governor*, The New York Times, <https://www.nytimes.com/2017/09/16/us/nursing-homes-florida-scott.html> (Last visited October 29, 2017).

<sup>65</sup> *Universal Declaration of Human Rights*, Office of the United Nations High Commissioner for Human Rights (October 26, 2017 10:03 PM), [http://www.ohchr.org/EN/UDHR/Documents/UDHR\\_Translations/eng.pdf](http://www.ohchr.org/EN/UDHR/Documents/UDHR_Translations/eng.pdf).

<sup>66</sup> *International Covenant on Economic, Social and Cultural Rights*, United Nations Human Rights Office of the High Commissioner (October 26, 2017 10:12 PM), <http://www.ohchr.org/EN/ProfessionalInterest/Pages/CESCR.aspx>.

<sup>67</sup> *Id.*

<sup>68</sup> *Constitution of the World Health Organization*, The World Health Organization (October 26, 2017 10:23 PM), <http://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1>.

<sup>69</sup> *Id.*

<sup>70</sup> *The Right to Health*, Office of the United Nations High Commissioner for Human Rights (October 26, 2017 10:25 PM), <http://www.ohchr.org/Documents/Publications/Factsheet31.pdf>.

<sup>71</sup> *Id.* at 4.

Public Works to increase funding for the expansion and improvement of existing public transportation programs.

2. We ask that the Special Rapporteur encourage the Miami-Dade County Department of Transportation and Public Works to introduce long-term transit plans which emphasize equitable access to affordable transportation options and better align with identified transportation deserts and areas of need.
3. We ask that the Special Rapporteur encourage the Miami-Dade County Department of Transportation and Public Works and the Florida Department of Transportation to add transit corridors for MetroRail and TriRail lines in order to better facilitate evacuation during natural disasters.

### **Healthcare Recommendations**

1. We ask that the Special Rapporteur encourage the Florida Legislature to expand Medicaid in Florida to all low-income individuals with incomes at or below 138% of the federal poverty rate.
2. We ask that the Special Rapporteur encourage the United States Congress extend the Children's Insurance program (CHIP), so that children under this coverage do not fall into the uninsured population.
3. We ask that the Special Rapporteur encourage the government to require frequent inspections of nursing homes and mandatory inspections following disasters.
4. We ask that the Special Rapporteur encourage DCF to no longer require that DSNAP applicants make an appearance at distribution centers; if this cannot be done then the DCF should establish some means of transporting DSNAP applicants both to and from distribution centers, and to conduct home visits to those who are unable to travel.
5. We ask that the Special Rapporteur encourage the DCF to operate additional DSNAP distribution centers for longer periods of time following any future disasters.