



## Overview

Homelessness affects a person’s health and puts them at risk for mental illness. When people are forced to live without a stable home, they are exposed to many risk factors for poor health and well-being, including harsh living conditions, violence and unsafe conditions, drug and alcohol use, reduced access to health care services, and physical and behavioral health issues. This paper looks at the current state of homelessness in Colorado and the ties between homelessness and a person’s health, and identifies promising strategies that Colorado communities are using or may use to end homelessness, improve the health of their communities, and promote the health of all our residents.

## Homelessness in Colorado

In Colorado, over 10,000 individuals were homeless in 2016 and Colorado had the third largest percent growth in homelessness nationally between 2015 and 2016.<sup>1</sup> The City of Denver has one of the largest populations of families and families with children who are experiencing homelessness in the U.S.

## Homelessness and Health

Homeless individuals are at high risk for illness and have higher death rates than the general population.<sup>2</sup> Studies show that homeless individuals also report difficulty accessing health care and receive low rates of outpatient health care.<sup>3</sup>

### How Homelessness Impacts Health



**The homeless are exposed to risk factors that cause poor health; these factors may happen after becoming homeless or are made worse by being homeless.** These risk factors may be a combination of structural factors, such as the lack of affordable or low-cost housing, and individual risk factors, such as mental health and substance use disorders, and may result in both causing and continuing homelessness.<sup>4</sup>



**Limited access to health care services.** Common health issues, like chronic diseases such as diabetes and high blood pressure, that can be prevented or managed with the right medications, healthy daily habits (like exercise), and healthy food, are worsened as a result of homelessness and the instability that comes from homelessness.



**Homelessness ages an individual.** Homelessness rushes the aging process, resulting in higher rates of chronic diseases (e.g. diabetes, heart disease) and medical ailments normally found in people around 20 years older than the homeless person. These include mental and physical decline.



**Common health conditions of being homeless are risk factors for violent criminal activity.** Homelessness and imprisonment for both violent and non-violent crimes may increase the risk of having multiple health issues. The health conditions of homeless individuals, including mental health issues and substance use disorders, are also risk factors for violent criminal activity that can result in incarceration.<sup>5</sup>



**Homelessness is a risk factor for children’s long-term health and well-being.** Homelessness has a significant impact on children’s health, and in turn, their education. Children who are homeless have two times the rate of emotional and behavioral issues than non-homeless children—including anxiety, depression, and social withdrawal.<sup>6</sup>

<sup>1</sup> The number of homeless individuals is measured by point-in-time counts, which are unduplicated one-night estimates of both sheltered and unsheltered homeless populations. The one-night counts are conducted by Continuums of Care nationwide and occur during the last week in January of each year.

<sup>2</sup> D.S. Morrison, "Homelessness as an independent risk factor for mortality: results from a retrospective cohort study", *International Journal of Epidemiology*, 38 (2009): 877-883.

<sup>3</sup> MB Bushnell et al., "Factors Associated with the health care utilization of homeless person", *JAMA*, 285 (2001): 200-206.

<sup>4</sup> S. Fazel, J.R. Geddes, and M. Kushel, "The health of homeless people in high-income countries: descriptive epidemiology, health consequences, and clinical and policy recommendations", *Lancet* 384 (2014): 1529-1540

<sup>5</sup> SN Fischer and P ShROUT, "Homelessness, Mental Illness, and Criminal Activity: Examining Patterns Over Time", *American Journal of Community Psychology*, 42 (2008): 251-265.

<sup>6</sup> EL Bassuk and SM Friendman, "Facts on Trauma and Homeless Children", *The National Child Traumatic Stress Network*, 2005



## Strategies to Reduce Homelessness

There are several ways we can reduce homelessness and the associated negative health outcomes of being homeless:

<p><b>Health and Health Care Strategies:</b></p> <p>To improve the health outcomes of homeless individuals, particularly with substance use disorders, chronic disease, and mental health, healthcare services must be delivered in a stable living environment. One strategy is to offer temporary housing to homeless persons when they are recovering from an illness or a hospital stay.</p>	<p><b>Workforce Strategies:</b></p> <p>Being out of work negatively affects health and well-being. Giving homeless individuals the opportunity for long-term employment can improve health and well-being.<sup>7</sup> Stable housing is important to sustaining employment.</p>	<p><b>Supportive Housing:</b></p> <p>Supportive housing strategies provide housing and service supports that help people to stay in stable housing and live healthier lives. Supportive housing provides a critical platform for the delivery of community-based social, mental health, substance abuse, and medical care services that lead to improved health and stability.</p>
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**TABLE 1: SUCCESSFUL PROGRAMS SERVING THOSE WHO EXPERIENCE HOMELESSNESS IN COLORADO**

STRATEGY	PROGRAM	DESCRIPTION
<b>Health &amp; Healthcare</b>	Stout Street Health Center	<i>Integrated behavioral and physical healthcare center that also provides supportive housing for individuals who are homeless receiving services. Served more than 13,000 people in 2015.</i>
<b>Workforce Development</b>	Denver Day Works Pilot Program	<i>Connects individuals who are homeless with work opportunities and supportive services. 109 people given work opportunities and 49 found permanent employment to date.</i>
<b>Housing</b>	Homeward Pikes Peak	<i>Provides health care and housing services to individuals experiencing chronic homelessness who struggle with addiction. Saves taxpayers \$2 million per year by reducing ED visits, emergency calls, detox stays, and psychiatric hospitalizations.</i>

<sup>7</sup> G Waddell and AK Burton, "Is work good for your health and well-being?" Department for Work and Pensions, 2006