

Homelessness can take many forms, with people living on the streets, in encampments or shelters, in transitional housing programs, or doubled up with family and friends. While the federal government reports 1.5 million people a year experience homelessness, other estimates find up to twice this number of people are actually without housing in any given year. The connection between housing and homelessness is generally intuitive, but the strong link between health and homelessness is often overlooked. This fact sheet outlines how health and homelessness are intertwined—and why housing is health care.

**People who are homeless have higher rates of illness and die on average 12 years sooner than the general U.S. population.**

## Poor health is a major cause of homelessness

An injury or illness can start out as a health condition, but quickly lead to an employment problem due to missing too much time from work; exhausting sick leave; and/or not being able to maintain a regular schedule or perform work functions. This is especially true for physically demanding jobs such as construction, manufacturing, and other labor-intensive industries. The loss of employment due to poor health then becomes a vicious cycle: without funds to pay for health care (treatment, medications, surgery, etc.), one cannot heal to work again, and if one remains ill, it is difficult to regain employment. Without income from work, an injury or illness quickly becomes a housing problem. In these situations, any available savings are quickly exhausted, and relying on friends and family for assistance to help maintain rent/mortgage payments, food, medical care, and other basic needs can be short-lived. Once these personal safety nets are exhausted, there are usually very few options available to help with health care or housing. Ultimately, poor health can lead to unemployment, poverty, and homelessness.

**Simply being without a home is a dangerous health condition.**

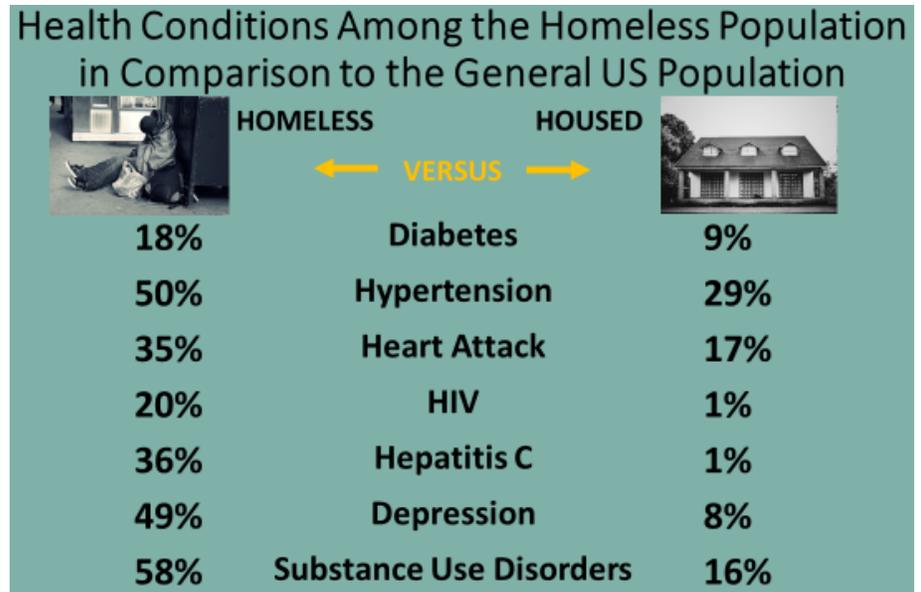
## Homelessness creates new health problems and exacerbates existing ones

Living on the street or in crowded homeless shelters is extremely stressful and made worse by being exposed to communicable disease (e.g. TB, respiratory illnesses, flu, hepatitis, etc.), violence, malnutrition, and harmful weather exposure. Chronic health conditions such as high blood pressure, diabetes, and asthma become worse because there is no safe place to store medications properly. Maintaining a healthy diet is difficult in soup kitchens and shelters as the meals are usually high in salt, sugars, and starch (making for cheap, filling meals but lacking nutritional content). Behavioral health issues such as depression, alcoholism, or other substance use disorders can develop and/or are made worse in such difficult situations, especially if there is no solution in sight. Injuries that result from violence or accidents do not heal properly because bathing, keeping bandages clean, and getting proper rest and recuperation isn't possible on the street or in shelters. Minor issues such as cuts or common colds easily develop into -

larger problems such as infections or pneumonia. Numerous health conditions among people who are homeless are frequently a complex mix of serious physical, mental health, substance use, and social problems. Poor health, high stress, unhealthy and dangerous environments, and an inability to control food intake often result in frequent visits to emergency rooms and hospitalizations.

## Recovery and healing are more difficult without housing

Stable housing not only provides privacy and safety, it is also a place to rest and recuperate from surgery, illness, and other ailments without worry about where to sleep and find a meal, or how to balance these needs with obtaining health care and social services. The best, most coordinated medical services are not very effective if the patient's health is continually compromised by street and shelter conditions. Even inpatient hospitalization or residential drug treatment and mental health care do not have lasting impacts if a client has to return to the streets or shelters upon discharge.



Source: Health Center Patient Survey (HCPS) 2009

**While health care providers do all they can to mitigate the effects of the streets, no amount of health care can substitute for stable housing.**

## The Solution: Housing is Health Care

Housing and health care work best together and are essential to preventing and ending homelessness. Health care services are more effective when a patient is stably housed, and in turn, maintaining housing is more likely if proper health care services are delivered. While there are many factors that influence health, stable housing is a key "social determinant of health" that directly impacts health outcomes. While some need only short-term assistance to regain health and reconnect to employment and housing on their own, others may be so seriously ill and/or disabled they will need longer-term support services in order to maintain housing. Either way, housing is necessary to realize a healthier society. Communities that invest in affordable housing incur lower public costs, achieve better health outcomes, and work to prevent and end homelessness.

### Learn more:

- National Health Care for the Homeless Council. [Social Determinants of Health: Predictors of Health among People without Homes.](#)
- Choucair, B. and Watts, B. [Rx For Health: A Place To Call Home.](#) *Health Affairs Blog*, August 2018.

**VISIT OUR WEBSITE AT [WWW.NHCHC.ORG](http://WWW.NHCHC.ORG)**