



COVID-19 & the HCH Community: Comprehensive Testing & Services For People Experiencing Homelessness

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The collective understanding of the COVID-19 pandemic is changing rapidly. Recent research suggests that using only symptom screening to isolate people who are potentially infected could overlook large numbers of asymptomatic COVID-19-infected individuals.

This issue brief calls on public health authorities and emergency response systems in every community to conduct more comprehensive testing among people experiencing homelessness, and ensure appropriate follow-up accommodations and support services.

Vulnerable Populations, High-Risk Settings

People experiencing homelessness are at disproportionate risk of contracting COVID-19 and becoming seriously ill because of [numerous factors](#):

- Poor health
- Congregate settings
- Advanced age & other vulnerabilities
- Limited ability to follow public health guidance
- Stigma & discrimination

New Findings, New Approaches

A recent [CDC report](#) found high proportions of positive test results upon universal testing in some shelters, illustrating the need for broader testing to prevent the spread of COVID-19 in these settings:

"Given the high proportion of positive tests in the shelters with identified clusters and evidence for presymptomatic and asymptomatic transmission of SARS-CoV-2*, testing of all residents and staff members regardless of symptoms at shelters where clusters have been detected should be considered. If testing is easily accessible, regular testing in shelters before identifying clusters should also be considered. Testing all persons can facilitate isolation of those who are infected to minimize ongoing transmission in these settings."

When testing followed identification of a cluster, public health teams found high proportions of residents and staff members also had positive test results: Seattle: **17% clients/17% staff**, Boston: **36% clients/30% staff**, and San Francisco: **66% clients/ 16% staff**.

Tellingly, when testing was conducted in other Seattle shelters where only one previous case had been identified in each shelter, there was a low prevalence of infection (**5% clients/ 1% staff**). Similarly, when shelters in Atlanta conducted testing where no cases had been reported, a low prevalence of infection was also identified (**4% clients/2% staff**).

Recently, news media reported on other cities, such as [Salt Lake City, Utah](#); [Baltimore, MD](#); and [Los Angeles, CA](#), that conducted testing in homeless shelters and found high rates of positive, asymptomatic cases.

* SARS-CoV-2 is the virus strain that causes the illness more commonly known as COVID-19.

These findings illustrate the need to conduct comprehensive testing in high-risk homeless populations BEFORE positive clusters emerge so that proactive containment measures can be implemented.

Call for Comprehensive Testing & Services

Local public health authorities and emergency response systems should take the following actions, in coordination with homeless services providers and other community partners:

- **Prioritize testing in homeless populations** on par with nursing homes and other vulnerable populations living in congregate settings.
- **Conduct comprehensive testing** in all congregate homeless settings without first requiring the presence of positive COVID-19 clusters.
- **Expand both congregate and non-congregate programs** to accommodate individuals who are homeless and need isolation/quarantine, and those who are frail/elderly who need a protective setting.
- **Arrange appropriate staffing at all programs** to ensure individuals receive needed medical and behavioral health services, case management and other supports, as well as adequate food, entertainment, and other necessities.
- **Expedite permanent housing placements** and other solutions to homelessness that go further than shorter-term emergency shelter or other temporary accommodations. Use this opportunity to improve stability and avoid returning individuals to homelessness whenever possible.

Resources

- Mosites E, Parker EM, Clarke KE, et al. [Assessment of SARS-CoV-2 Infection Prevalence in Homeless Shelters — Four U.S. Cities, March 27–April 15, 2020](#). MMWR Morb Mortal Wkly Rep. ePub: 22 April 2020.
- Baggett T, Keyes H, Sporn, N, et al. [Prevalence of SARS-CoV-2 Infection in Residents of a Large Homeless Shelter in Boston](#). JAMA, published online April 27, 2020.
- National Health Care for the Homeless Council (March 2020). [COVID-19 & the HCH Community: Needed Policy Responses for a High-Risk Group](#).
- National Health Care for the Homeless Council (April 2020). [COVID-19 & the HCH Community: Needed Actions from Public Health and Emergency Response Systems](#).
- National Health Care for the Homeless Council: [COVID-19 Technical Assistance Resources](#).