



Mortality and Homelessness

The collection and use of homeless mortality data gives the public health community a better understanding of the “who, what, where, why, and how” people are dying while unhoused. It also identifies high-need areas and demographic disparities, informs funding and policy priorities, and allows public health authorities to respond more quickly with evidence-based interventions. Finally, identifying the number of people who die while homeless in the United States is a human rights imperative and calls attention to the critical need for permanent housing.

Unfortunately, there is no national-level reporting of homeless deaths, but more local jurisdictions have been collecting this data by partnering with medical examiners, coroners, and vital statistics offices to conduct homeless mortality reviews. Some jurisdictions have even mandated homelessness reporting in state-level electronic death reporting systems. **This fact sheet offers current high-level mortality estimates, action steps for using this data, links to local/state mortality reports, and additional resources on homeless mortality.**



VIDEO

[Why We Need Housing Status on Death Certificates](#)

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HOMELESS MORTALITY

Currently, there is no standard for collecting homeless mortality data, nor is there a mechanism to report housing status to the federal government. Further, few research studies have explored homeless mortality data from multiple jurisdictions, most do not allow comparisons with unhoused groups, and nearly all focus on a specific jurisdiction, health system, or cause of death (e.g., COVID-19).

While other national studies are linked at the end of this issue brief as additional resources, [one large-scale, publicly available study](#) used national databases over a 20-year period and found the following regarding risk of death, demographics, and causes of death:

RISK OF DEATH



Unhoused people are 3.5-4.2 times more likely to die than housed people.



Unhoused people die 20 years earlier than housed people.



Sheltered and unsheltered people have similar mortality risks.



Unhoused people have 60% greater mortality risk than other poor, but housed, people.

DEMOGRAPHICS

- **Race:** White homeless individuals (and those of “other” races) are 4.7 times more likely to die than their White housed counterparts, while Black homeless individuals are 2.3 times as likely to die as their Black housed counterparts. This finding is consistent across many studies and reflects the lower prevalence of behavioral health conditions among Black homeless individuals and the elevated mortality risk of Black housed individuals compared to those who are white.
- **Ethnicity:** Hispanic people experiencing homelessness have a lower risk for mortality than their non-Hispanic unhoused counterparts. However, when compared to their housed counterparts, Hispanic and non-Hispanic unhoused people still have higher risk for mortality (3.5 and 3.8 times, respectively).
- **Gender:** Homeless women are 4 times more likely to die than their housed counterparts, and homeless men are 3.3 times as likely to die as housed males (large-scale findings for non-binary people are not available)
- **Disability:** PEH who are determined disabled (e.g., receive disability benefits such as [SSI](#) or [SSDI](#)) are 1.6 times more likely to die prematurely than PEH not deemed disabled.

CAUSES OF DEATH

Those under age 45

Drug toxicity (e.g., overdose) appears to be the leading cause of death, and traumatic injuries (including traffic accidents and homicides) are the second leading cause of death.

Those age 45-64

Heart disease and cancer are the leading causes of death, followed by drug overdose and traumatic injuries.

Mortality risks

High rates of victimization and assault, difficulties in accessing medical care, and alcohol/drug and mental health conditions among people experiencing homelessness are the common vulnerabilities that elevate mortality risk.

ACTION STEPS FOR USING MORTALITY DATA

The findings above may differ by jurisdiction or with different methods for collecting data, but all reports on mortality find that the experience of homelessness significantly raises one's risk of death. Use this data to prevent further deaths by engaging policy makers, first responders, public health officials, and others in evidence-based interventions such as:

Partner with your [local public health agency](#) and your [local medical examiner or coroner's office](#) to assess and build capacity for determining homeless mortality.

Conduct a homeless mortality review in your local jurisdiction — see our [Homeless Mortality Data Toolkit](#) to learn more! Champion local policies that could [establish homeless mortality review committees](#), that require [homeless fields on death reports](#), or that [mandate annual homeless mortality reviews](#).

Add a “homelessness” flag or housing status indicator to death certificates or in death reporting systems.

Engage local media [to share stories](#) about decedents' lives and memories, and to share how currently living people experiencing homelessness are affected seeing those around them die.

ACTION STEPS FOR USING MORTALITY DATA CONTINUED

Advocate for greater housing and health resources, and more targeted interventions.

Participate in your local [Homeless Persons' Memorial Day event](#) to honor those who died while unhoused and recommit to housing justice.

Support harm reduction, overdose prevention, safe use kits, etc.

Conduct more research on precipitating events of homeless mortality and the influence of co-morbidities. Ensure that research includes an equity lens, assessing how and why there are disparities by race and ethnicity.

LOCAL AND STATE MORTALITY REPORTS

Below are links to recent, publicly available death reports. Many are specific to unhoused people, while others are community-wide reports that include a section on homelessness:

ARIZONA

[Maricopa County](#) (Phoenix)
[Pima County](#) (Tucson)

CALIFORNIA

[Los Angeles County](#)
[Orange County](#)
[Alameda County/Oakland](#)
[Sacramento County](#)
[Santa Barbara County](#)

COLORADO

[Denver](#)
[El Paso County](#)

TEXAS

[Travis County](#) (Austin)
[Harris County](#) (Houston)

OTHER LOCAL REPORTS

[New York City](#), NY
[Multnomah County](#), OR (Portland)
[Seattle-King County](#), WA
[Philadelphia County](#), PA
[District of Columbia](#)
[Fulton County](#) (Atlanta)

STATEWIDE REPORTS

[State of Minnesota](#)
[State of Illinois](#)
[State of Utah](#)
[State of North Carolina](#)

OTHER RECENT PUBLICATIONS

- [Why We Need Housing Status on Death Certificates](#) (NHCHC, 2024)
- [Mortal Systemic Exclusion Yielded Steep Mortality-Rate Increases in People Experiencing Homelessness, 2011-2020](#) (Fowle & Routhier, 2024)
- [The Impact of Homelessness on Mortality of Individuals Living in the United States: A Systematic Review of the Literature](#) (Funk et al., 2022)
- [Deaths of Profound Despair: A Retrospective Cohort Study of Mortality among People Experiencing Homelessness](#) (Chang et al., 2023)
- ["Racial mortality inversion": Black-white disparities in mortality among people experiencing homelessness in the United States](#) (Fowle et al., 2024)

[For more information about homeless mortality, visit nhchc.org.](#)



The National Health Care for the Homeless Council is the premier national organization working at the nexus of homelessness and health care. Grounded in human rights and social justice, the NHCHC mission is to build an equitable, high-quality health care system through training, research, and advocacy in the movement to end homelessness. Visit nhchc.org to learn more.