

Health Needs of People who are Unhoused

May 2024

The 2024 State Health Assessment is an overview of what we know about the health and well-being of people in Vermont. This data brief reflects findings about the health needs and experiences of people who are unhoused. It includes information from publicly available data and focus groups and interviews with community partners and individuals with lived expertise.

Key Findings

- Vermont has the 2nd highest rate of unhoused residents per capita in the U.S. and has seen steady growth in the unhoused population over the last 4 years.
- Vermont **sheltered more than 95**% of its unhoused residents in 2022, one of only three states to do so.

"...realize that we wouldn't have all the substance abuse issues. We wouldn't have all the crimes, we wouldn't have all this homelessness...if we had a better mental health system."

- Climate change further exacerbates the risks of living without adequate shelter.
- **People of color and Indigenous People** experience homelessness at a greater rate than any other populations in Vermont.
- Poverty and lack of affordable housing are cited as two key drivers in unstable housing.
- There was a 36% increase in homelessness for families with children from 2022-2023.
- Complicated, hard-to-find information about services makes getting aid difficult.
- Frequent hardships for children who are unhoused include:
 - Limited access to healthy foods and healthcare.
 - Social isolation and chronic anxiety.
 - Higher exposure to substance use.
 - o Disrupted education.
 - Increased risk of homelessness as adults.

"What shelter providers do and what shelter staff do is incredible and underappreciated most of the time."

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- Healthcare access and cost exacerbate health problems for the unhoused.
- Drivers of poor health for unhoused Vermonters:
 - Emotional and physical stress
 - o Inability to store medications
 - o Exposure to increasingly extreme weather conditions
 - Difficulty accessing adequate, healthy foods

"I don't want the drugs. I can get better drugs on the street myself. What I want is to know what's wrong with me and fix that situation. And I shouldn't be made to feel like I'm less than because I happen to have a drug problem."

- Low incomes and limited housing options are **major drivers** of homelessness and increase a person's risk of developing serious health conditions.
- Mental health issues and substance use disorders are more common among both the unhoused and those with incomes less than \$25,000/year.

Health conditions: Low-income adults	with a disability	with arthritis	with asthma	ever diagnosed with cancer	with cardiovascular disease
All US	29%	25%	10%	7%	8%
All VT	25%	29%	12%	7%	8%
<25k income in VT	56%	40%	18%	12%	17%

"It's hard when you see the same people come in and out...It's got to be taxing...to see the same fifty people come in and out with the same problems...Probably there's something going on that's causing them to have those problems over and over again. So rather than looking down your nose at them...maybe you should try to figure out how to help them not have that same problem over and over again..."



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References:

- <u>County Health Rankings</u>, University of Wisconsin Population Health Institute. Resources include:
 - VT Department of Health Population Health Surveys and Data
 - VT Agency of Education Data and Reporting
 - VT Cancer Registry
 - VT Crime Information Center
 - VT Department of Health Environmental Public Health Data Tracking
 - VT State Highway Safety Office
 - VT Vaccination coverage
- <u>CARES database</u>, University of Missouri. Data compilation is from many sources, including but not limited to:
 - US Census Bureau
 - American Community Survey (ACS)
 - Centers for Disease Control and Prevention (CDC)
 - United States Department of Agriculture (USDA)
 - Department of Transportation
 - Federal Bureau of Investigation
- Behavioral Risk Factor Surveillance System (BRFSS 2021)
- 2022 Vermont Point in Time Report of People Experiencing Homelessness
- Youth Risk Behavior Survey