Issues in Applied Public Health Unique to People Experiencing Homelessness

PROPOSAL FOR A NEW CSTE WORKING GROUP

CSTE Health Disparities Subcommittee Call

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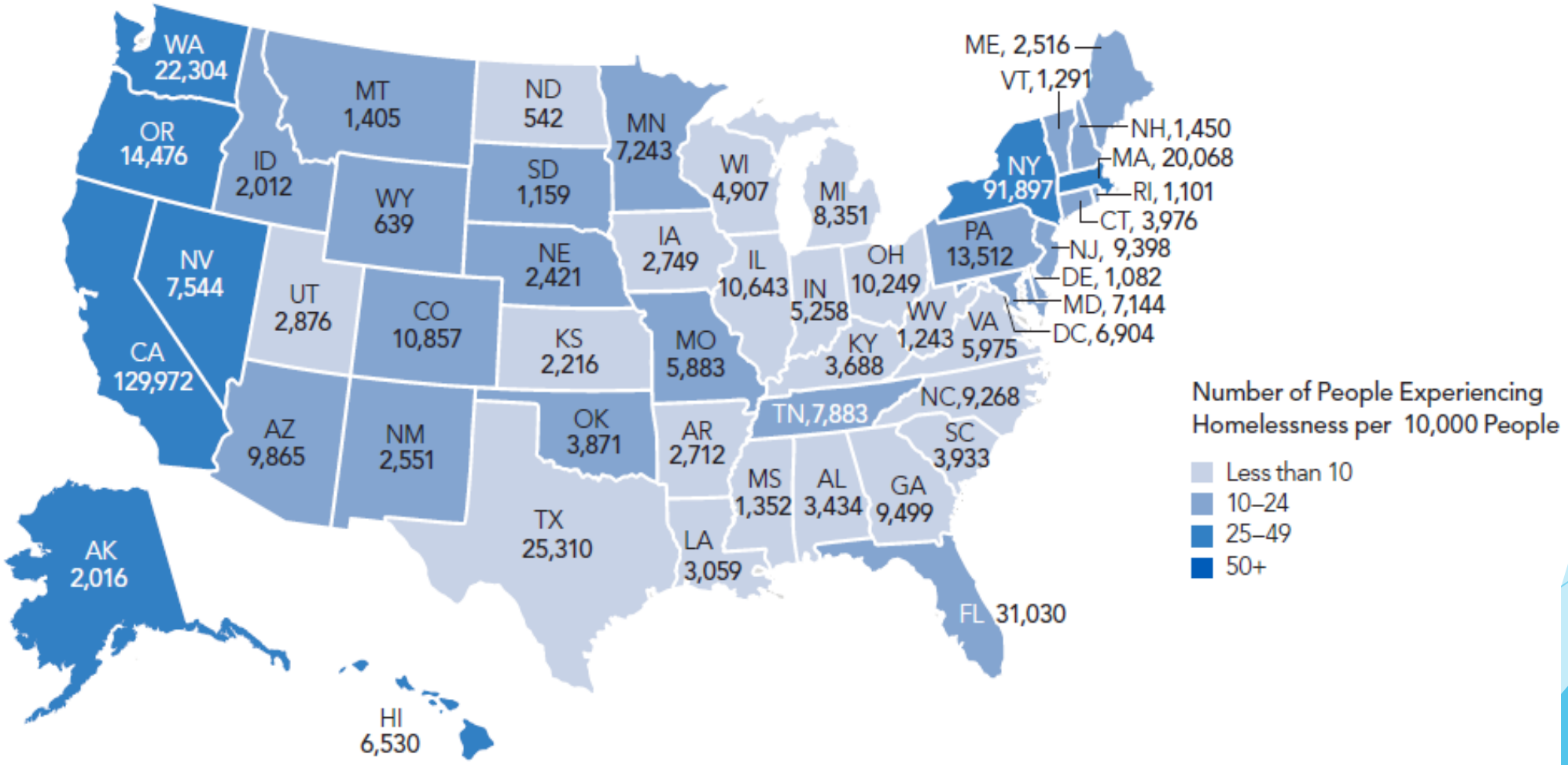
Point in Time Estimates

- 553,000 people experiencing homeless on any given night in the US in 2018
  - 65% in sheltered locations (emergency shelters and transitional housing)
  - 35% in unsheltered locations (street, abandoned buildings, under bridges, etc.)
- 0.3% overall modest increase in homelessness between 2017 and 2018
  - Not equally distributed among states
  - Highest proportion of homeless in large urban areas
- 3% increase in the number of unsheltered individuals from 2017 to 2018
- 36,000 unaccompanied youth (under the age of 25 experiencing homelessness on their own) experienced homelessness on a given single night in 2018

2018 Estimates of Homeless People by State



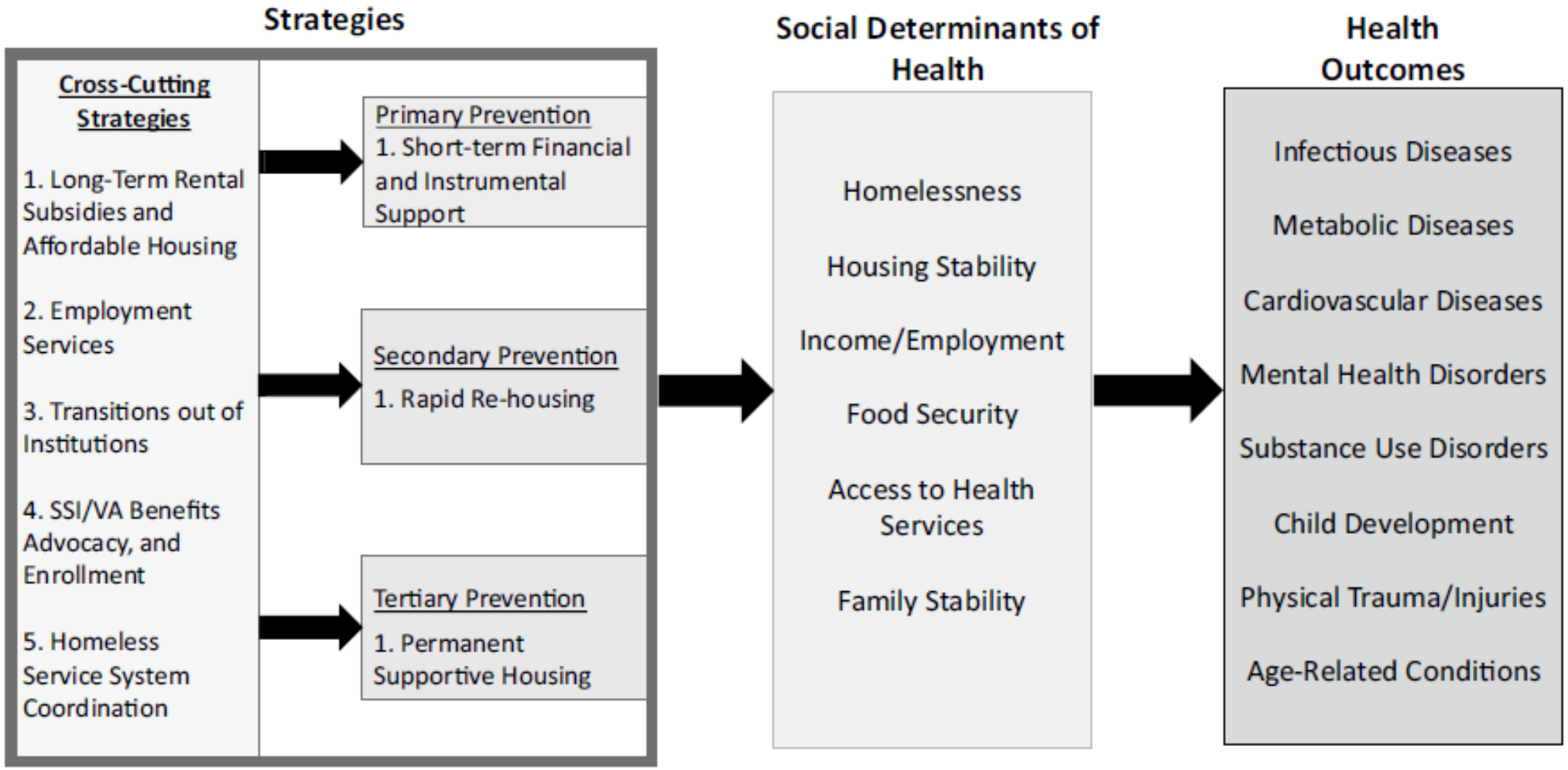
Challenges Unique to PEH Population

- Community outbreaks among PEH
  - Can occur primarily among PEH due to unique risk factors
  - Often exacerbated by sub-optimal living conditions and comorbidities
    - Increase severity (worse clinical outcomes)
    - Prolong outbreak (sustained transmission)
  - Some recent examples
    - HIV cluster in Seattle
    - Hepatitis A outbreak in San Diego County (spread to counties in CA and AZ)
    - Shigella in Oregon and LA County
    - Invasive group A *Streptococcus* in Anchorage & New Mexico
    - Drug overdose cluster in Seattle

Challenges Unique to PEH Population (cont.)

- Varying definitions of homelessness
- No or Poor denominator
- Co-morbidities are common
  - how much more common is not well described
- Delivery of care & outreach can be difficult
- Growing PEH population size
  - Particularly in cities with limited housing supply and a growing gap between wages and housing costs
- *Public health* programs typically work in disease-specific silos, without any one program explicitly dedicated to issues specific to the PEH population
  - exception: Healthcare for the Homeless – but tend to be focused on service provision

Population Health Framework for Homelessness Prevention



CDC Homeless Public Health Working Group

What

CDC staff (agency-wide) working group focused on homelessness

Objectives

1. To advance public health science
2. To promote professional development
3. To facilitate communication and collaboration

When

Entering approvals process at CDC

Potential Objectives of PEH Workgroup

- **To document existing best practices**
  - Organizational structures
  - Guidelines for outbreak response
  - Definitions
- **To develop surveillance capacity**
  - Alternative approaches to estimating population size
    - Secondary data sources?
    - Capture-Recapture?
  - Strengthen quality of point in time counts
  - Guidelines on defining housing status
    - Harmonize definitions
    - Standardized questions
- **To share best practices**

Questions and/or Comments?