











HEALTH AND AFFORDABLE HOUSING Fact Sheet

The Public Health Implications of Housing Instability, Eviction, and Homelessness

Summary

Housing instability is a public health crisis that causes and exacerbates health problems, erodes communities, and drives health inequities. Families grappling with housing uncertainty experience physical and mental health challenges from elevated rates of childhood and chronic disease and mortality to stress, depression, anxiety, and suicide. Those who lack stable housing are more likely to experience homelessness, unemployment, substance use, food insecurity, and violence. The ripple effects of housing instability extend far beyond individual households, making it difficult for residents to invest in their homes, relationships, and neighborhoods, thereby disrupting the fabric of entire communities. Nationwide, Black and Hispanic renters in general, and women in particular, are disproportionately threatened with eviction and disproportionately evicted from their homes.

This fact sheet discusses housing as a community health and health equity issue and illustrates why legal and policy innovations are needed to address the issue of housing instability. It is the first in a series of fact sheets exploring state-and local-level legal and policy approaches to reduce tenant displacement and eviction and provide supports to prevent housing instability and homelessness.² These policy interventions are also presented in a Law & Policy Pathways graphic document and were presented by the authors on a Network webinar in March 2021, entitled Housing Matters: Legal and Policy Approaches to Preventing Housing Instability.³

Housing Instability Has Long-Lasting Impacts on Individuals, Families, and Communities

Stable housing is the foundation of a healthy life. Organizations such as the World Health Organization, the Centers for Disease Control and Prevention, and the Kaiser Family Foundation have recognized that housing is a "social determinant of health"—one of several key "conditions in the places where people live, learn, work, and play that affect a wide range of health and quality-of-life risks and outcomes." While access to quality healthcare is undeniably important, research shows that other circumstances may be responsible for as much as 80% of overall health outcomes, including quality of life and mortality.

Housing instability and displacement have damaging health consequences that can last lifetimes, or even generations. Families grappling with housing instability are more likely to report poor health, high blood pressure, depression, anxiety, psychological distress,⁶ and childhood disease and mortality.⁷ Adults who have been evicted report higher levels of

economic hardship and are more likely to lose their jobs. Those who are rendered homeless often experience food insecurity, trauma, and substance abuse disorder.⁸ Children who endure early-age transience often struggle to build friendships, fall behind in school, and are more likely than peers with stable housing to develop behavioral problems.⁹

Eviction Further Entrenches Poverty and Inequity

Tenants who are evicted carry the judgment with them like a criminal history: eviction cases remain on a tenant's public record for seven years and are visible to landlords, rental agencies, and credit agencies during their screening processes. This burden can push a resident out of their neighborhood and cripple their ability to get back on their feet—they will be ineligible for many forms of loans, unable to secure public housing benefits, and screened out of most applications for quality housing. This can create "a spiral of financial instability," as families desperate for housing are compelled to live in substandard conditions, exposing them to additional economic hardships and health hazards. The end result is that families who are evicted often experience significantly higher rates of material hardship and depression for years afterward.

Nationally, Black and Hispanic renters in general, and women in particular, are disproportionately threatened with eviction and evicted from their homes. As an example, in Baltimore, eviction rates among families headed by Black men are 51% higher than their white counterparts, and the total number of Black tenants evicted is 195% higher than the number of white residents evicted. A survey conducted in October 2023 found that 19.5% of Black renters and 14.5% of Hispanic or Latino renters were behind on rent, compared to around 7% of White renters, and an average of 11.5% of all renters. Across all racial and ethnic groups, women are evicted about 16% more than men. He disparity between men and women is highest for Black renters (36.3% more Black women than Black men), and smallest for White renters (7.7% more White women than White men). Women with children are at even higher risk of eviction – between 2007 and 2016, the eviction filing rate for Black women with children was 28%, compared to 16% for those without children.

Public Health Impacts of Homelessness

Housing displacement often leads to homelessness, a public health crisis that perpetuates a cycle of harmful consequences and disenfranchisement. Medical conditions may contribute to a person being displaced from their housing and experiencing homelessness. Conversely, homelessness may exacerbate chronic health conditions and lead to the development of new health problems.¹⁹ Homelessness makes treatment and medication more difficult to receive, often cooccurs with lack of access to consistent or healthy food sources, exposes people to weather extremes and communicable diseases, and creates additional physical strain on the body.²⁰ People experiencing homelessness suffer higher rates of diabetes, high blood pressure, heart attack, Hepatitis C, HIV, depression, substance use disorders, and intimate partner violence, all of which are difficult to manage and treat without safe and stable housing.²¹ People who are homeless also have higher mortality rates than the general population.²² Even minor health problems like cuts and colds become dangerous when someone is homeless.²³

Due to both the nature of the disease and its economic impact, the COVID-19 pandemic amplified the overlap of homelessness and public health. People experiencing homelessness are at an increased risk of contracting COVID-19 due to their reliance on shelters and the difficulty of social distancing. This was especially problematic during the height of the pandemic; according to one study from 2020, people who were homeless with COVID-19 were at least twice as likely to be hospitalized, to require treatment in the ICU, and to die.²⁴ The impact of COVID-19 on the economy also placed a wider range of individuals at risk of homelessness. Unemployment is one of the most common causes of homelessness.²⁵ In the midst of COVID-19, 32% of Black and 41% of Hispanic adults lost jobs due to the pandemic, with women suffering the largest decrease in employment.²⁶ These numbers show that Black and Hispanic community members will continue to be exposed to greater levels of housing instability and its resulting health risks. The pandemic only highlighted that homelessness is a matter of life and death.

Health cannot happen without stable housing.²⁷ For as damaging as the health impacts are when someone is homeless or facing eviction, the opposite is also true: stable housing promotes positive health outcomes. We cannot achieve positive health outcomes for our community until all members are able to meet their basic needs of safety and shelter.

This document was developed by Brian Choi, J.D. '24, with support from Michael Heffron, J.D. '24, and Alex Sadzewicz, J.D., 24, as student attorneys in the Public Health Law Clinic at the University of Maryland Carey School of Law, and was reviewed by Kathleen Hoke, J.D., Director, Network for Public Health Law – Eastern Region and Professor at the University of Maryland Carey School of Law. The Network promotes public health and health equity through non-partisan educational resources and technical assistance. These materials provided are provided solely for educational purposes and do not constitute legal advice. The Network's provision of these materials does not create an attorney-client relationship with you or any other person and is subject to the Network's Disclaimer.

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