New data on coronavirus and homelessness

The National Alliance to End Homelessness and the National Low Income Housing Coalition call on Congress to include in its upcoming coronavirus supplemental spending bill $15.5 billion specifically targeted to people who are currently homeless. This funding is recommended go through HUD Emergency Solutions Grants (ESG) but could be provided in combination with resources available at FEMA, U.S. Department of Health and Human Services, state governments, and others. These amounts are in addition to other requests that would support efforts to prevent people from becoming homeless.

Of the total $15.5 billion, $4 billion is needed for rapid rehousing for those people experiencing homelessness who are at a particularly high risk of severe illness or death from Coronavirus.

The remaining $11.5 billion is needed to help shelters prevent the rapid spread of the coronavirus among the homeless population, according to a new, data-driven analysis by Dr. Dennis Culhane, Daniel Treglia, and Ken Steif at the University of Pennsylvania; Randall Kuhn at the University of California Los Angeles; and Thomas Byrne at Boston University.

The study assesses the cost of reconfiguring the homeless shelter system to prevent the spread of the virus. Using data on the current and projected homeless populations, and based on actual costs, the team estimates the cost of creating social distancing in shelter and creating observational, respite, and quarantine spaces for all who need them, in compliance with CDC recommendations.

Homeless individuals infected with Coronavirus would be twice as likely to be hospitalized, two to four times as likely to require critical care, and two to three times as likely to die from the illness as the general population. People who are homeless – both those in shelter and those living outdoors – are highly susceptible to the virus because of their poor health, and their inability to engage in preventive measures such as social distancing, handwashing, or a healthy diet. Further, the homeless shelter system can currently shelter only 70 percent of those experiencing homelessness, and even those beds are not configured to maintain social distancing, quarantine those experiencing symptoms, or separate people who are especially vulnerable due to age, respiratory or other illnesses, or weakened immune systems. In order to prevent spread of the virus within the homeless population and among the general public, these gaps must be filled. Lives will be saved as a result.

The scope of what is needed requires federal support. The homeless system, already inadequate to help all people experiencing homelessness, does receive some federal support. But it also relies upon a high percentage of funding from state and local governments; philanthropic, corporate and especially individual giving; and on volunteers. None of these will be available at the scale needed to address the need this analysis identifies. Only federal resources can fill the gap.

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1This cost information was taken from the authors’ paper, “Estimated Emergency and Observational/Quarantine Bed Need for the US Homeless Population Related to COVID-19 Exposure by County; Projected Hospitalizations, Intensive Care Units and Mortality.” This paper, which will include mortality projections as well as cost information, will be available on the NAEH and NLIHC websites shortly.