

CRIMINALIZATION OF HOMELESSNESS HARMS INDIVIDUAL AND PUBLIC HEALTH



In Partnership With



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UNSHELTERED HOMELESSNESS CONTRIBUTES TO WORSE HEALTH OUTCOMES AND CRIMINALIZATION ONLY EXACERBATES THIS

Research shows numerous poor health impacts of unsheltered homelessness and its criminalization.

- **Unsheltered homelessness is tied to poor health and higher risk of death.** People experiencing unsheltered homelessness have higher rates of chronic illness and co-occurring chronic conditions than their sheltered³¹ and housed²⁸ counterparts. While some people enter homelessness with mental health conditions and/or substance use disorders, for many, these conditions develop while homeless^{18,19} as the dangers and isolation of living outside contribute to worsened mental health.¹ These health and safety problems culminate in increased rates of premature death. Researchers found the mortality rate for adults experiencing unsheltered homelessness in Boston is nearly three times higher than homeless adults in shelters, and 10 times higher than the general adult population.³⁰
- **Criminalization worsens sleep deprivation and substance use.** People experiencing homelessness sleep less and experience increased fatigue and

In summer 2024, the Supreme Court's ruling in [City of Grants Pass v. Johnson](#) emboldened communities across the country to [consider or enact new measures](#) making sleeping in public spaces a legally punishable offense, effectively criminalizing homelessness. However, criminalization only exacerbates the crisis, failing to address the root causes of homelessness and punishing individuals for circumstances beyond their control. This approach is not only harmful and counterproductive, but also deepens existing racial inequities, given the disproportionate impact of homelessness on Black people and other communities of color.

Leading up to the case, 57 social scientists who have published peer-reviewed research on homelessness came together to submit an [amicus curiae brief](#) against criminalization. This brief is part of a series that summarizes the large body of evidence they compiled. See the [introductory brief](#) for context and key terms.

unintentional sleep during the daytime.^{14,27} Safety concerns and other environmental factors contribute to poor sleep, and city policies like encampment evictions and camping bans only exacerbate these conditions.^{24,26,29} Laws that criminalize sitting, laying down, or camping can also push people to engage in coping behaviors to avoid punishment. People experiencing homelessness may increase use of methamphetamines to stay alert and avoid loss of property or arrest.²¹

- **Involuntary displacement may be especially detrimental for people who inject drugs.** Not only can criminalization lead to increased drug use, but it may also disproportionately harm people who inject drugs. Forced relocation can disrupt access to health services, medication, and equipment that saves lives, such as access to naloxone and safe injection equipment. Researchers project that these cumulative health effects can cause up to 24.4% more deaths among people experiencing homelessness who inject drugs over a 10-year period.³
- **Involuntary displacement disrupts support networks critical for health and wellbeing.** Involuntary displacement disrupts support systems (including fellow encampment residents, family members, acquaintances, or service providers in the area), and thereby perpetuates isolation and disconnects people experiencing homelessness from important resources.^{34,37} This isolation and disconnection can lead to adverse health outcomes, including higher rates of overdose.⁷

INVOLUNTARY SEIZURE OF PROPERTY RESULTS IN RISKS TO HEALTH AND WELLBEING

People experiencing homelessness often face involuntary property seizures, magnifying the everyday hardships of those who are already in vulnerable circumstances.

- **Authorities confiscate life-sustaining and medically necessary items.** When authorities enforce laws criminalizing homelessness, they can confiscate or destroy people's possessions, including items that are key to their survival and medical care. For example, people have reported losing expensive daily medicine needed to treat HIV and Hepatitis C; mobility devices like walkers, canes, crutches, wheelchairs; and basic items to survive outdoors like food, clothes, and bedding.^{6,17,21,25}
- **Confiscating cherished personal belongings inflicts psychological harm.** Research shows property seizures rob people of the "bare minimum of material and psychological comfort"¹³ resulting in feelings of fear, isolation, anxiety, abandonment, and hopelessness.^{8,29} During enforcement, people experiencing homelessness have lost priceless family mementos, including letters and last remaining photographs, ashes of deceased relatives, and medals of military accomplishment.⁶
- **Even the threat of property seizures can harm health.** Homeless individuals are forced to stay with their belongings to avoid thefts or property seizures. Researchers and medical providers have found people refuse hospitalization in

the face of gruesome infections and debilitating pain out of fear of losing their belongings at the hands of city workers.^{16,25}

FEAR OF PUNISHMENT PUSHES PEOPLE AWAY FROM CRUCIAL RESOURCES AND SUPPORT SYSTEMS

Criminalization forces people experiencing homelessness to move to areas that are less likely to draw the attention of authorities, like under freeways, along train tracks, in industrial lots, in waterways, and in abandoned properties.

- **These environments are more hazardous.** They may be safer from enforcement but also carry higher risks of vehicle-pedestrian collisions; are more exposed to the elements including the heat, rain, and cold; are more vulnerable to pollution and contaminants like asbestos, arsenic, and carbon particles; are more isolated from public health and homeless services; and lack safe electricity and clean water.^{6,11,15} People experiencing unsheltered homelessness also face increased danger during natural disasters.¹⁵
- **Fear of enforcement can impact access to medical and social services.** Oftentimes, services like health, housing, legal, and employment are concentrated in the same areas where trespassing ordinances effectively ban unhoused individuals.⁴ A San Francisco study found people with mental illness are more policed in the areas of the city where treatment services are located.³³ A Dallas study similarly found that more 311 calls are made in service-dense areas, making law enforcement encounters more likely for someone coming to the area to seek services.²² People often miss appointments and services due to the threats and resultant fear of involuntary displacement.^{13,20,32}

CRIMINALIZATION ENDANGERS PUBLIC HEALTH

The criminalization of homelessness not only harms the health of people experiencing homelessness, but it also endangers public health by facilitating the spread of illnesses and reduces resources and services available to the wider community.

- **Enforcement of laws that criminalize homelessness can increase the spread of infectious diseases.** People experiencing homelessness are more vulnerable to infection due to their poor health and living situations. Being forced to move regularly can increase the spread of infectious diseases to new contacts and disrupt access to water, toilets, tents, sanitary supplies, and other mechanisms to maintain hygiene. Sweeps often break ties to health outreach including primary or specialized care, which plays a key role in distributing information like how to manage diseases and care for wounds.^{2,12,35,38} Research shows that people who have been displaced experience higher rates of infectious diseases,²³ which can spread to the wider community as well.^{5,25}

- **Criminalizing homelessness fails to improve public health.** Some jurisdictions claim encampments pose “a public health threat” to justify displacing them.³⁶ Despite homeless residents’ requests for basic support like waste disposal and clean water, sanitation responses more commonly involve encampment displacement than services or housing.^{9,36} Without long-term housing solutions, research shows encampments reemerge.¹⁰
- **Criminalizing homelessness burdens the medical system.** Further, people who are unsheltered are forced to rely on emergency departments and inpatient services at higher rates, in part to manage chronic conditions and to replace medical items (like prescriptions) lost during involuntary displacement.²⁵ Replacing these items is costly, involves the work of various medical personnel and administrators, and takes time. These visits add to the other burdens on overcrowded and under-resourced emergency departments, limiting their ability to meet the needs of both people experiencing homelessness and everyone else.

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