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

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. Housing instability makes it difficult for residents to invest in their homes, relationships, and neighborhoods; and where health-supportive connections have already been made, eviction can disrupt 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 problem 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. 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.

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.”¹ 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.²
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, and childhood disease and mortality. 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. 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. The impacts of housing instability extend beyond individual households to whole communities, too, making it difficult for residents to invest in their homes, social relationships, and neighborhoods. Eviction can disrupt the fabric of entire communities.

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 black mark 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. The pandemic has only heightened these disparities: an estimated one in six renters nationally (17%) is currently behind on rent, but these rates are substantially higher for Black renters (31%) and multiracial renters (25%). As these communities face higher rates of COVID-19 infection, they also face the burdens of housing insecurity—and as eviction moratoriums begin to expire around the country, these communities will yet again bear a disproportionate brunt of the impacts.

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. Homelessness makes treatment and medication more difficult to receive, often co-occurs 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. 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. People who are homeless also have higher mortality rates than the general population. Even minor health problems like cuts and colds become dangerous when someone is homeless. Due to both the nature of the disease and its economic impact, the pandemic has amplified this 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. According to one study, 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.
The impact of COVID-19 on the economy has also placed a wider range of individuals at risk of homelessness. Unemployment is one of the most common causes of homelessness. 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. These numbers show that Black and Hispanic community members will continue to be exposed to greater levels of housing instability and health risks as a result of the pandemic. Now more than ever, homelessness is a matter of life and death.

“Health cannot happen without housing.” 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.

SUPPORTERS

The Network for Public Health Law is a national initiative of the Robert Wood Johnson Foundation. This document was developed by Delaney Anderson, Kyle Keraga, and Mollie Soloway, 2021 J.D. Candidates at the University of Maryland Francis King Carey School of Law, under the supervision of Kerri McGowan Lowrey, JD, MPH, Deputy Director and Director for Grants & Research, and Kathleen Hoke, JD, Director, Network for Public Health Law—Eastern Region. The Network for Public Health Law provides information and technical assistance on issues related to public health. The legal information and assistance provided in this document does not constitute legal advice or legal representation. For legal advice, please consult specific legal counsel.

This fact sheet was finalized and published in April 2021.

---

4. Megan Sandel et al., Unstable Housing and Caregiver and Child Health in Renter Families, 141 PEDIATRICS 1 (Feb. 2018); Paul Braveman et al., Housing and Health, Robert Wood Johnson Foundation (2011), [https://www.nwif.org/content/dam/farm/reports/issue_briefs/2011/nwif70451](https://www.nwif.org/content/dam/farm/reports/issue_briefs/2011/nwif70451).
7. Mathew Desmond & Rachel Tolbert Kimbro, Eviction’s Fallout: Housing, Hardship, and Health, 94 SOCIAL FORCES 295, 299-300 (Feb. 24, 2015) (explaining that workers who experience an eviction may be 11 to 15% more likely to lose their jobs).
10 Desmond & Kimbro, supra note 7 at 296.
17 Nat’l Alliance to End Homelessness, supra note 13.