



Homelessness is Expensive

Access to affordable housing saves money & lives



Over 70,000 Ohioans experience homelessness in one year, a number that has increased by 20% over the past five years. Nearly one-third of homeless Ohioans are children, including 2,943 babies under age 1.ⁱ

Homelessness can inflict devastating consequences on the individual, but homelessness directly affects all of us because it drains publicly funded services. A growing body of research is starting to reveal the true cost of homelessness.

Healthcare:

- Housing chronically homeless patients reduced hospital emergency room visits by up to 78%ⁱⁱ
- Providing supportive housing for homeless people with mental illness reduced their hospital visits by 90%ⁱⁱⁱ and reduced costs on mental health services by 57%^{iv}
- Supportive housing for people with addiction issues reduced hospital detox visits as much as 82%^v
- Homelessness increases the likelihood of infant mortality, low birth weight, premature birth and the need for additional hospital services^{vi}

Child Welfare:

- The risk of foster care placement among children from homeless families is 34 times higher than children who are housed^{vii}
- Youth who experience homelessness have higher rates of mental health disorders, physical abuse, sexual molestation, and sexual assault^{viii}

Criminal Justice:

- Housing homeless people reduced the number of arrests by up to 78%^{ix} and cuts overall incarceration costs by up to 95%^x
- Supportive housing reduces overnight jail stays by up to 86%^{xi} and decreases prison days by as much as 73%^{xii}

i Ohio Housing Finance Agency (2018). *Revisiting the Silent Crisis, December 2018 Update* (December 2018). Available at: <https://ohiohome.org/news/documents/HMIS-2017-Update.pdf>.

ii Thomas PhD, M., et al., *Moore Place Permanent Supportive Housing Evaluation Study Year 1 Report*. (2014), University of North Carolina at Charlotte Department of Social Work. Available at: <http://www.urbanministrycenter.org/wp-content/uploads/2014/06/moore-place-executive-summary-eval-study.pdf>.

iii The Heartland Alliance Mid-America Institute on Poverty, *Supportive Housing in Illinois: A Wise Investment* (2019), Available at: https://shnny.org/uploads/Supportive_Housing_in_Illinois.pdf.

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- ^{iv} M. Modello. et al., *Cost of Rural Homelessness, Rural Permanent Supportive Housing Cost Analysis*. (May 2009) State of Maine. Available at: https://www.mainehousing.org/docs/default-source/housing-reports/cost-of-rural-homelessness-5-2009.pdf?sfvrsn=af65d015_7.
- ^v Perlman PsyD, J. and Parvensky, J. (2006). *Denver Housing First Collaborative Cost Benefit Analysis and Program Outcomes Report*. [online] Colorado Coalition for the Homeless. Available at: https://shnny.org/uploads/Supportive_Housing_in_Denver.pdf.
- ^{vi} R. Richards et al., (2011). Health Behaviors and Infant Health Outcomes in Homeless Pregnant Women in The United States. *Pediatrics*, no. 128:3.
- ^{vii} National Association of Social Workers, *Children, Youth, & Families Practice Update: From Poverty to Child Welfare Involvement: The Critical Role of Housing in Family Stability*, (2009) Available at: <http://www.partnering-for-change.org/wp-content/uploads/2014/11/FROM-POVERTY-TO-CHILD-WELFARE-INVOLVEMENT-THE-CRITICAL-ROLE-OF-HOUSING-IN-FAMILY-STABILITY.pdf>.
- ^{viii} U.S. Department of Health and Human Services, Office of the Assistant Secretary of Planning and Evaluation, *Serious Mental Illness and Prolonged Youth Homelessness*, (2017).
- ^{ix} Thomas, *Moore Place PSH*.
- ^x Heartland, *A Wise Investment*.
- ^{xi} Ibid.
- ^{xii} Culhane, D., Metraux, S. and Hadley, T. (2002). Public service reductions associated with placement of homeless persons with severe mental illness in supportive housing. *Housing Policy Debate*, 13(1), pp.107-163. Available at: https://shnny.org/uploads/The_Culhane_Report.pdf.