

The Population

Population Primarily Affected

Individuals that are primarily affected by homelessness are those with a history of mental illness, severe emotional trauma, substance abuse, and military service. In the setting of families, unemployment and socioeconomic status play a larger role in the development of homelessness compared to mental health and substance abuse issues.

High Risk Groups

The groups that are at the highest risk of becoming homeless include the unemployed, low-income working class, and those that lack a support network. This population is at high risk because health issues, missing work, or an interruption in their primary source of income could render them homeless. The largest risk factor for becoming homeless is the *lack of a social support network*.

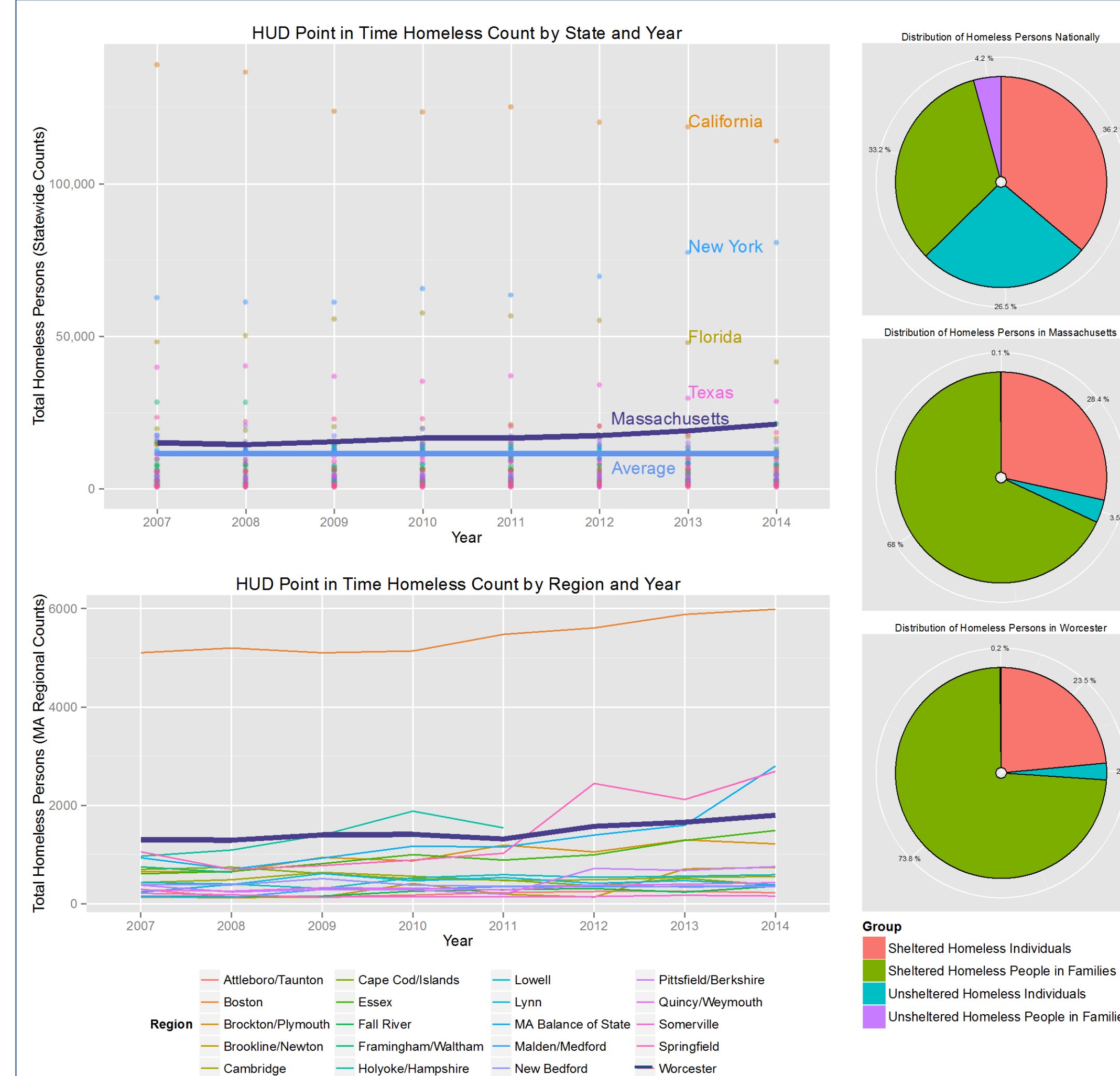
Attributable Morbidity and Mortality

The average life expectancy for a chronically homeless individual is 48 years old. Chronic health issues typically occur at an earlier age.

Socioeconomic Factors

Demographics for homelessness depend on location. HUD does not collect reliable demographic data relating race and ethnicity to homelessness.

Worcester and National Homeless Statistics



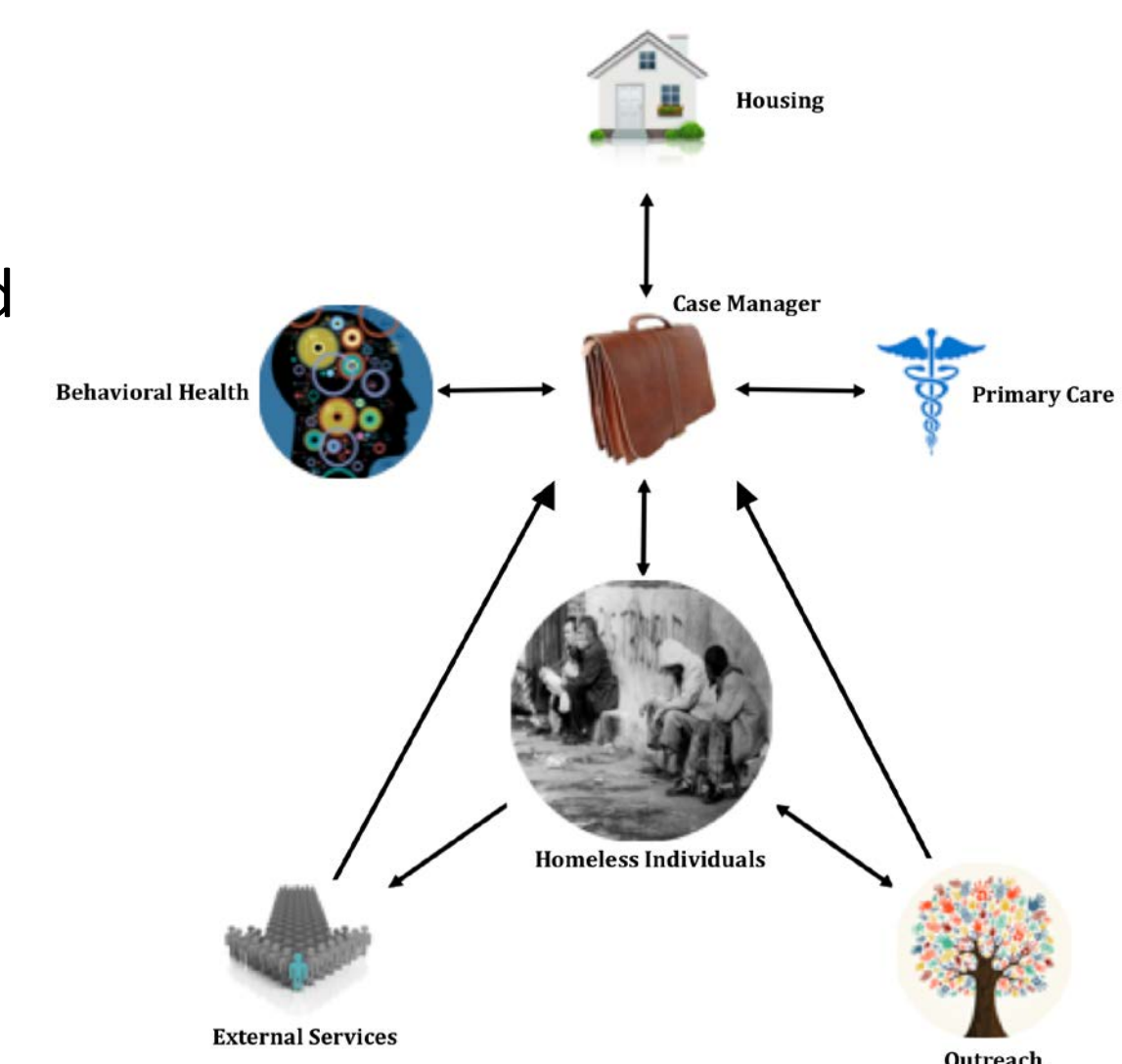
Interprofessional Network

Weekly Team Meetings

Tuesday: discuss clients, integrate care plans, arrange transfer or discharge plans, and decide upon care directions

Thursday: care providers meet, address client specific issues, often include client

Friday: full administrative staff meetings focus is on personnel and resource utilization



Lessons Learned

- Homelessness is less about the absence of housing and more about the absence of a social network
- Families have to lose everything to get what they need most
- It is easier to fall down than it is to get back up
- Homelessness is a cycle: without a home you cannot have a job and without a job, you cannot have a home
- **Poverty is the root of homelessness**

Project Description

Goals

1. House every homeless family and child
2. Rapid rehousing (e.g. Housing 1st) for families and individuals
3. Minimize use of emergency shelters
4. Increase self sufficiency through education, job training, and health support services
5. Address mental health and chronic medical needs
6. Increase competency in providers
7. Integration of care across agencies and providers
8. Address homelessness at its root (i.e. poverty)

Resources

Worcester is incredibly resource rich; area agencies include:

- Community Healthlink, Homeless Outreach & Advocacy Project
- Family Health Center of Worcester

- 25 Queen Street Shelter
- South Middlesex Opportunity Council (SMOC)
- The Greater Worcester Housing Connection (GWHC)
- Worcester Area Mission Society (WAMS)
- Worcester Housing Authority (WHA)
- Oasis House, Safe Haven, Hector Reyes House, St. John's Church, the Mustard Seed

Challenges

- Maladaptive social networks
- Addiction as a disease
- Low wages, unpredictable employment, unemployment, and underemployment
- Access to daycare
- Criminalization of homelessness

References

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