

Drivers of Homelessness and Prevalence of Health Conditions in the Homeless Population in Asheville, North Carolina

Selected Findings

Purpose

Asheville, North Carolina (NC) experienced an increase in homelessness in 2020, resulting in an emergence of tent cities. Many of the factors that contribute to homelessness were significantly impacted by the COVID-19 pandemic, such as poverty, absence of low-cost housing, lack of employment opportunities and income support for low skilled workers, and high prevalence of existing chronic physical and mental health conditions, including substance use disorders.

Homeless individuals often have chronic conditions, history of substance use, and reduced access to care. This research aimed to understand the drivers of homelessness in Asheville and the prevalence of physical and mental health conditions within the homeless population.

Methods

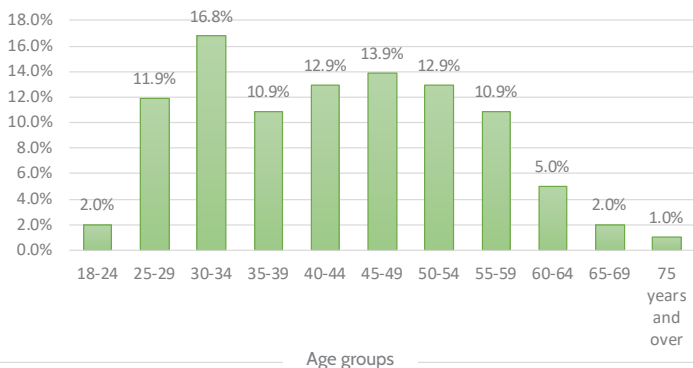
Mountain Area Health Education Center (MAHEC) conducted this observational study between June 17 and July 28, 2021.

We interviewed 101 homeless individuals, representing 19% of the homeless population in Asheville (N=527 in 2021¹), using a 67-question instrument via convenience sampling at two emergency shelters (N=46), a day shelter (N=38), and a resource site (N=17).

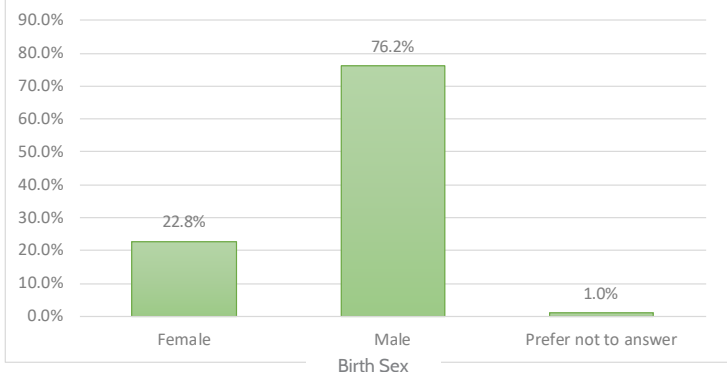
Self-reported data was captured electronically via REDCap and analyzed using descriptive statistics.

Demographics

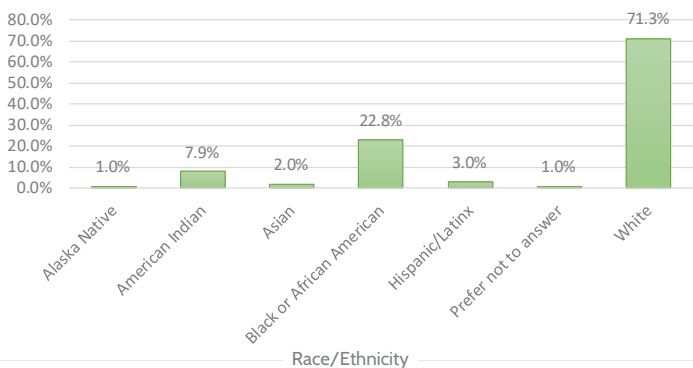
Age of Participants
(N=101)



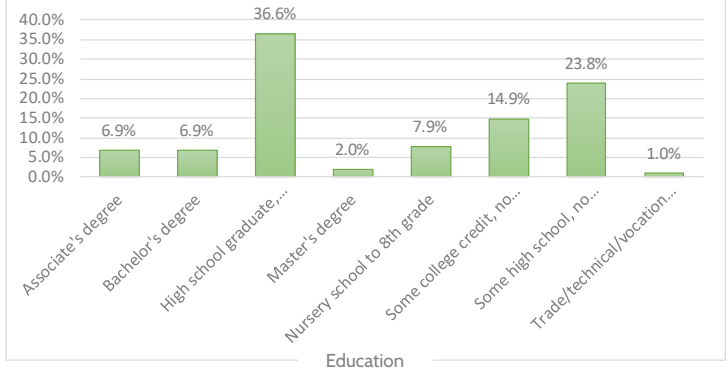
Birth Sex of Participants
(N=101)



Race/Ethnicity of Participants
(N=101)



Education Level of Participants
(N=101)



¹<https://www.ashevilenc.gov/wp-content/uploads/2021/05/Asheville-Buncombe-Point-in-Time-2021-Totals.pdf>

Insurance status

None/ Uninsured	58%
Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or disabilities	36%

Time homeless

Longer than six months 76%

Reasons for losing permanent housing:

Other	35%
A breakup with your spouse or partner	21%
You could not afford rent or house payments	20%
You lost your job or had your hours cut	20%



Disability

Not Impaired	55%
Learning disability	25%
Physical disability	24%

Substances used

Cannabis (Marijuana)	48%
Methamphetamine	40%
Alcohol	33%
None of the above	21%

Physical health concerns

Dental concerns, including abscesses or tooth pain	41%
Severe chronic pain (including back pain)	31%
High Blood Pressure	29%

Mental health concerns

Post-Traumatic Stress Disorder (PTSD)	51%
Anxiety Disorder or Panic Disorder	48%
Major Depression or Clinical Depression	46%

Conclusions

Understanding the population composition, barriers, and prevalence of health issues among homeless individuals will support care providers, researchers, and community leaders in better serving this complex population. This research contributed to such understanding of the homeless population in Asheville, NC.

See the full report at www.mahec.net/media/brochures/Homeless_AVL.pdf