

CRITERIA FOR PARTICIPATION

Chronic medically ill homeless adults that were hospitalized at one of the three partner hospitals were eligible to receive services from the Chicago Housing for Health Partnership when the following criteria were met:

1. Homeless – no source of stable housing for the last one month
2. Had at least one chronic medical condition that normally increase the morbidity and mortality among homeless individuals or in the general population:
 - HIV/AIDS infection
 - renal disease
 - liver disease
 - history of arrhythmia
 - congestive heart failure
 - cancer
 - coronary artery disease
 - severe asthma
 - chronic obstructive pulmonary disease (emphysema)
 - cerebrovascular disease (stroke)
 - seizure disorders
 - diabetes
 - sickle cell anemia

The objectives of the Partnership related to the health, well-being, and housing status of the chronically ill homeless, as well as to the associated costs of services.

OUTCOMES

Benefits to the Chronically ILL Homeless:

- Housing stability for at least one year
- Increased quality of life indicators
- Increased social stability and social support

Benefits to Health Care and Service Providers:

- Decreased use of inpatient medical services
- Decreased use of emergency room care
- Decreased use of nursing homes
- Decreased medical care costs

Benefits to Everyone:

- Increased adherence to medical recovery plans
- Increased adherence to service/treatment plans



“Rates of both chronic and acute health problems are extremely high among the homeless population. With the exception of obesity, strokes and cancer, homeless people are far more likely to suffer from every category of chronic health problem. Conditions that require regular, uninterrupted treatment, such as tuberculosis, HIV/AIDS, diabetes, hypertension, addictive disorders, and mental disorders, are extremely difficult to treat or control among those without adequate housing.

Many homeless people have multiple health problems. For example, frostbite, leg ulcers and upper respiratory infections are frequent, often the direct result of homelessness. Homeless people are also at greater risk of trauma resulting from muggings, beatings and rape. Homelessness precludes good nutrition, good personal hygiene, and basic first aid, adding to the complex health needs of homeless people.

Housing is the first form of treatment for homeless people with medical problems, preventing many illnesses and making it possible for those who remain ill to recover.....”

The National Coalition for the Homeless -, June 1999