



WE WILL REMEMBER 2018

HOMELESS DEATH REVIEW | DENVER, CO

For the first time in decades, life expectancy in the United States has decreased: from 78.8 in 2014 to 78.6 years in 2016.¹ Data shows that drug overdose deaths are a major contributor to this decrease in life expectancy and is now considered the leading cause of death for Americans under 50 years old.² “In the U.S., the source of reduced life expectancy was concentrated at younger ages, particularly deaths among those in their 20s and 30s, and largely driven by increases in drug overdose deaths related to the nation’s ongoing opioid epidemic.”³ The same study from *The BMJ* also indicated that a younger mortality rate was often the result of alcoholism and suicide, or “deaths of despair”. With the life expectancy of unhoused Americans typically 30 years lower than their housed neighbors,⁴ it is especially concerning that this nationwide shift will bring the life expectancy for those experiencing homelessness even lower.

According to available data, at least **233 people experiencing homelessness passed away** in metropolitan Denver, Colorado, in 2018. We will remember them, along with the estimated 1,348 people who have died since 2008, as well as countless others in years prior, and those whose deaths have gone unreported. These lives ended on the streets, under bridges, in cars, hospital beds, emergency rooms, and shelters, and sometimes in nursing homes or transitional housing.

WE WILL REMEMBER 2018: HOMELESS DEATH REVIEW details the demographic profiles of people experiencing homelessness from the Denver Medical Examiner's report who passed away and the key contributors to their death. This helps our community better understand the challenges facing people experiencing homelessness, honor those we have lost, and work to prevent untimely deaths among our unhoused neighbors in the future.

Each year, the Colorado Coalition for the Homeless (CCH) conducts an unofficial count of deaths through a coordinated process involving the Denver Medical Examiner’s Office (110 people who passed away) and the Metro Denver Homeless Initiative (MDHI) which is comprised of thirteen local organizations dedicated to serving those in our community experiencing homelessness (an additional 123 people). The period covered by the Denver Medical Examiner’s Office is between November 1, 2017 and October 31, 2018. Of



those included in the Examiner’s report, 19 were still pending a full medical report and while demographic data is included, the cause of death was unavailable at the time of this report. Names were collected for the unofficial total from MDHI partners from January 1, 2018 through December 13, 2018, and therefore no demographic or medical information other than names was available for these individuals.

Homelessness in Colorado

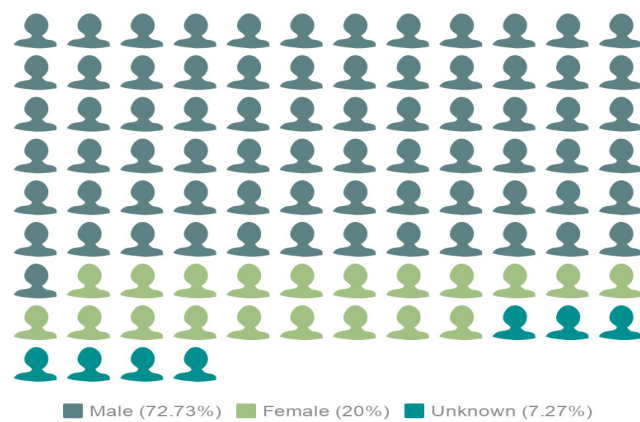
The 2018 MDHI Point-In-Time Survey counted 5,317 men, women, and children experiencing homelessness in the seven-county Metro Denver Area, an increase of 201 people from 2017. Among those who participated in the Point-In-Time Survey, 3,555 identified as men, 1,691 as women, 18 as transgender, and 15 as gender non-conforming.⁵ (Point-in-Time data can be limiting

because it is collected in a single 24-hour period in January each calendar year and only includes people experiencing homelessness as defined by the Department of Housing and Urban Development. It is the only count done nationally for comparison and analysis.)

Demographic Information

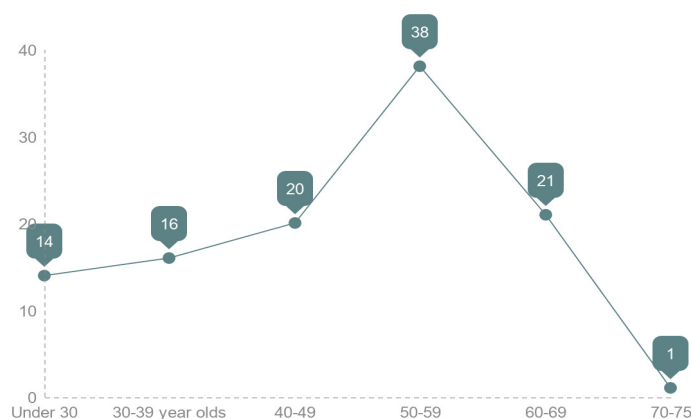
The World Health Organization found the average life expectancy among all Coloradans to be 78.1 years in 2016. By comparison, the Centers for Disease Control and Prevention estimate that life expectancy for Americans experiencing homelessness is 30 years lower than Americans with housing (2018).⁶

Gender



Of the 110 homeless deaths confirmed by the Denver Medical Examiner in 2018, 73% of those individuals were men (80) and 20% were women (22).

Age



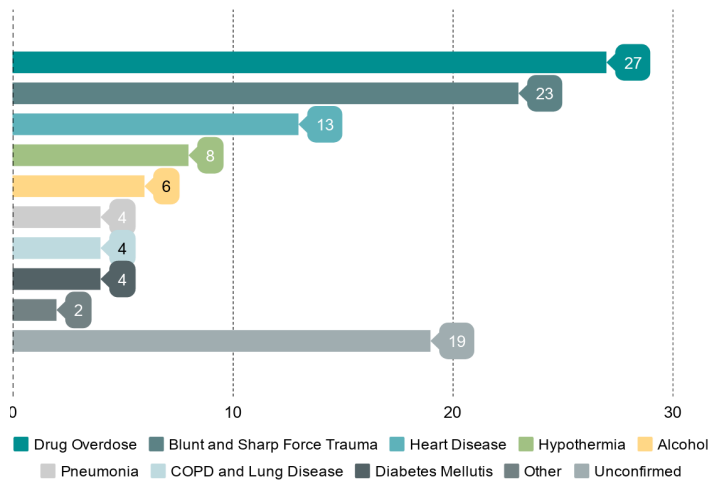
People 50-59 years old accounted for over one-third of all deaths among people experiencing homelessness in 2018. The youngest person who died was 18 years, while the oldest individual was 73 years. The average age at time of death in this group was 48 years, down two years from 2017, and a 30.1-year differential from the housed population.

This data indicates that men continue to comprise the majority of people experiencing homelessness, accounting for 60.5% nationally,⁷ even though women are estimated to make up the majority population in the United States by 51%.⁸

Overdose and Violence on the Rise

In 2016, drug overdose became the leading cause of death for [all] Americans under the age of 50, increasing 19% since 2015.⁹ In just one year, 27 people in Denver died from drug overdoses, eight more than the previous year. These overdose deaths were caused by opioids and other substances including methamphetamine, cocaine, and benzodiazepines, among others. These deaths could have been accidental due to a lethal combination of drugs [often laced with other unknown substances such as fentanyl] and/or alcohol, or purposefully by suicide.

Top Causes of Death



The Medical Examiner's office was able to confirm the primary cause of death for 91 of the 110 individuals who died while experiencing homelessness in 2018.

Among the 91 confirmed causes of death, drug overdose was the primary cause. Roughly 82% of those who died from a substance-related condition succumbed to overdose or another acute condition such as infection. Opioids were either a primary or contributing factor in many of these deaths. Blunt and sharp force trauma accounted for the second largest share of deaths reported by the Denver Medical Examiner, claiming the lives of 23 people.

While the leading cause of death is the same for both housed and unhoused Americans, the challenges people experiencing homelessness encounter are often exacerbated by homelessness. Stigma and shame combined with poor health, little to no access

to affordable recovery options, decreased access to supportive family and friends, and unsanitary living conditions complicate a person's ability to recover.

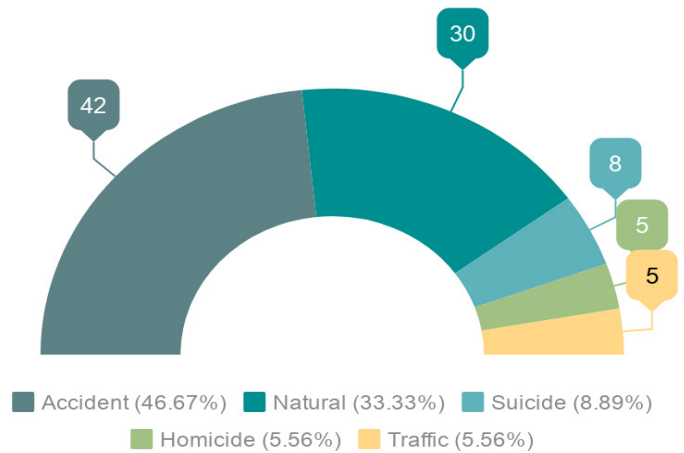
In addition, there is a significant lack of treatment options for people who are ready to begin recovery. The Department of Health Care Policy and Financing reports that there are 18 detox facilities licensed by the Office of Behavioral Health in Colorado, with 409 total available beds.¹⁰ Several recent studies have revealed that upwards of 80% of people in need of treatment are unable to access services – with many put on waiting lists for weeks or even months before there is capacity to care for them.¹¹

Making the lack of services worse, treatment centers are closing due to funding shortages. The largest drug and alcohol treatment center in the Denver metropolitan area, Arapahoe House, closed in January 2018,¹² with 90% of its 5,000 patients having no to low-income which left a gaping hole in treatment options. In this environment, it is not surprising to see an increase in overdose deaths, especially in the homeless population.



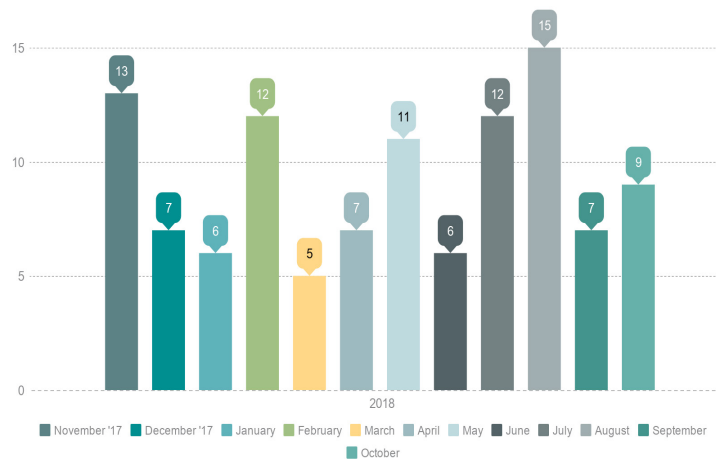
The second most reported cause of death in 2018 was from blunt and sharp force trauma which can include gunshot wounds, suicide, or blunt force to the head or torso. This is cause for concern as the number of crimes reported against people experiencing homelessness has increased 42% (1,008 incidents in 2017) since 2014.¹³ There are more unsheltered people experiencing homelessness according to the 2017 Point-in-Time report, up from 797 in 2016 to 894, increasing vulnerability to violent crimes.

Manner of Death



The Medical Examiner's office was able to determine the manner of death for 90 out of the 110 individuals who died while experiencing homelessness in 2018. Nearly half of those deaths occurred accidentally, most frequently due to a substance overdose.

Months of Death



The most deaths occurred in the months of August and November for the second year in a row, accounting for 15 and 13 deaths, respectively. Meanwhile, the fewest deaths per month occurred in March.

Cause of death varied between months, though **eight people experiencing homelessness** died as the result of hypothermia between November and March.

How to Help

Colorado's Medicaid expansion, improved access to Naloxone (i.e. Narcan, the life-saving prescription that reverses the effects of opioid overdose), Needle Exchange programs, and Medication-Assisted Treatment programs (which use buprenorphine, i.e. Suboxone, to help a person withdraw from drugs safely) help save lives from

drug overdose. But much more is still needed in the fight against drug overdose in our communities. Peer Support Services which uses specialists who previously experienced homelessness to build trust need to expand dramatically. We need to build more access to a wide variety of recovery services such as sober living houses and residential treatment for all people, especially those who have no to low-income.

We must continue to advocate for federal, state, and local funding for permanent supportive housing and Housing First low-barrier options for people to recover from substance use with clean, safe housing. Simultaneously, we need to provide more emergency services and shelter options to prevent people from becoming vulnerable to crime and violence from the onset. City and state government should invest in a

spectrum of housing resources to help the population experiencing homelessness, stop criminalizing activities of survival that force unsheltered people experiencing homelessness into remote and unsafe areas, and stabilize funding for our Community Health Centers like Stout Street Health Center which provide vital mental health and substance use healthcare to at-risk populations.



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⁷ US Department of Housing and Urban Development. *Annual Homeless Assessment Report to Congress: Part 1*. December 2017. <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-1.pdf>

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