

RACISM, HOMELESSNESS, AND COVID-19

NATIONAL LAW CENTER
ON HOMELESSNESS & POVERTY

Historical and present **discriminatory policies** around housing, land use, property rights, criminal justice, and health care have made homeownership and wealth accumulation inaccessible for many people of color. As a result of these often deliberately-racist economic and housing policies, communities of color have always **disproportionately experienced homelessness and housing insecurity**.^{1, 2, 3, 4, 5}

Homelessness places people at greater risk to viruses due to preexisting health conditions, inadequate access to nutritious food, hygiene, sanitation, and health care, as well as stigma and discrimination—people experiencing homelessness have more difficulty accessing necessary resources than people who are housed, often due to local regulations and laws that limit housing and services.^{6, 7} Communities of color also face **health inequities** that put them at a greater risk, as we have already begun to see.

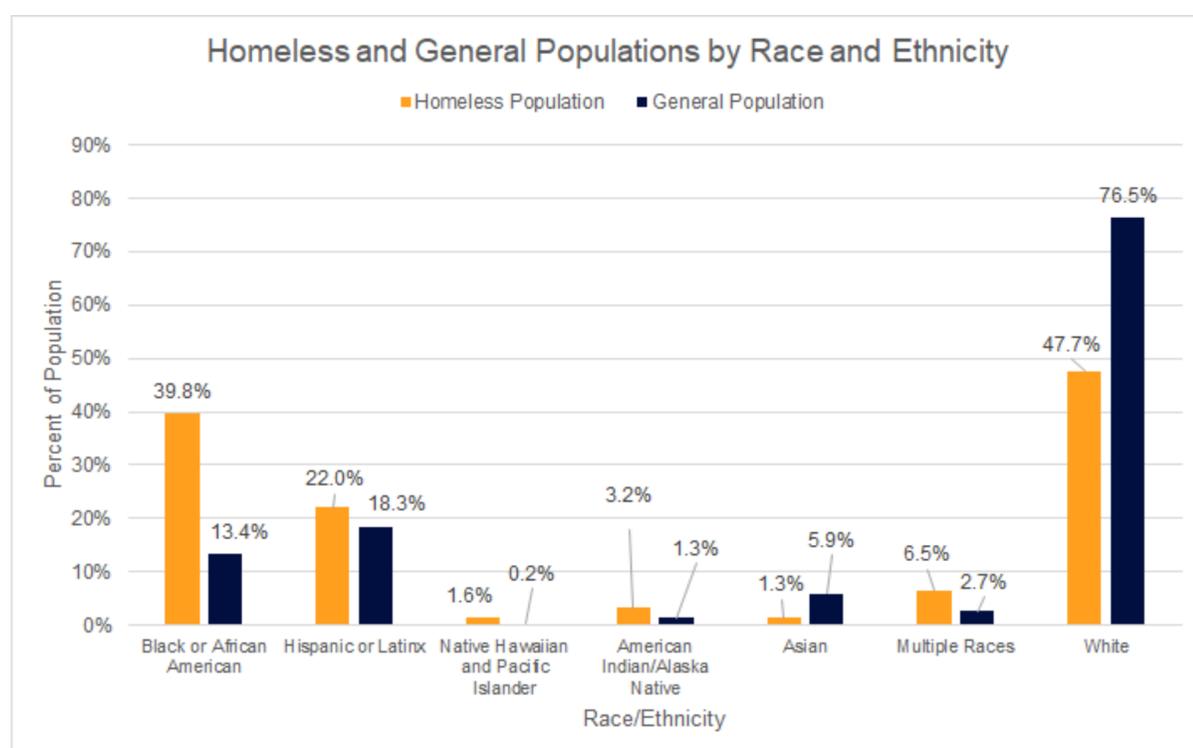
The inequities that people of color and people experiencing homelessness face will only be heightened by the COVID-19 crisis. It is crucial to recognize the existing inequities in order to understand how we can best **protect the health and wellbeing** of these communities and **support equitable and just responses** to the crisis.

Homelessness

The disparate impact on people experiencing homelessness has already been shown in cities throughout the country, as **explosions of COVID-19 infections** have been documented in congregate shelters in San Francisco, Boston, Los Angeles, and Dallas.^{8, 9, 10, 11, 12}

People of color experience homelessness at disproportionate rates.

- Black, Latinx, Native American, and Native Hawaiian and Pacific Islander communities experience homelessness at **disproportionate rates** compared to White and Asian communities.
- Black, Latinx, Native American, and Native Hawaiian and Pacific Islander compose a much larger percentage of the homeless population than they do the general population.^{13, 14}



Sources: <https://files.hudexchange.info/resources/documents/2019-AHAR-Part-1.pdf>
<https://www.census.gov/quickfacts/fact/table/US/IPE120218>

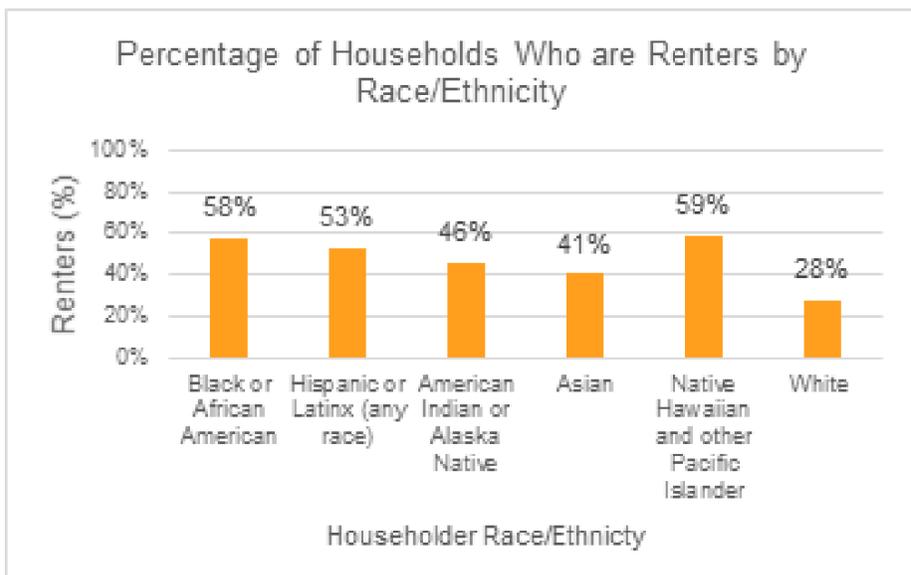
The COVID-19 pandemic will be especially detrimental for people experiencing homelessness, as one study estimates that up to **10 percent** of this community will be hospitalized due to COVID-19 – nearly **56,800 people**. Homeless individuals infected by COVID-19 will be **twice as likely** to be hospitalized, **two to four times as likely** to require critical care, and **two to three times more likely** to die than the general population.¹⁵

Housing and Economic Insecurity

Along with higher rates of homelessness, communities of color experience housing and economic insecurity at higher rates due to historic and present racist policies.

During this crisis, **lost wages** and **wealth inequality** make it more difficult for households to pay necessary rent and bills. The higher rental and cost-burden rates among communities of color, as well as loss in wages caused by the crisis and existing wealth and income inequality, create a disproportionate economic impact on communities of color during the COVID-19 crisis.

People of color rent at higher rates than white people, putting them at greater risk for eviction:



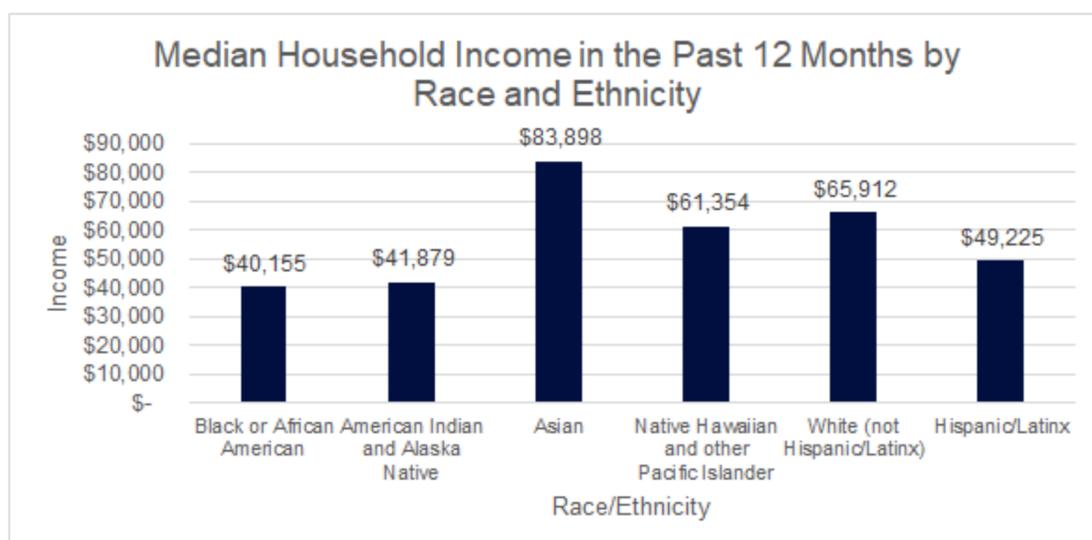
Source: American Community Survey data, 2014-2018.

Housing Cost Burden

Households of color also experience higher rates of **cost burden** (spending over 30 percent of income on housing) compared to white households, with **54.9 percent** of Black renters, **53.5 percent** of Hispanic or Latinx renters, and **45.7 percent** of Asian and other minority renters cost burdened in 2017, compared to **42.6 percent** of white renters.¹⁶ From 2014-2018, **50 percent** of American Indian and Alaska Native renter households spent over 30 percent of their income on rent.¹⁷

Wages and Job Insecurity

- Black, Asian, and Latinx workers are overrepresented in low-paying jobs and industries most impacted by the COVID-19 crisis, such as the hotel and restaurant industries.¹⁸
- Black and Latinx workers have less access than white workers to paid sick leave and family leave.¹⁹ This forces workers to choose between going to work when they are feeling sick and risking exposure while they are at work, or staying home and losing their income.

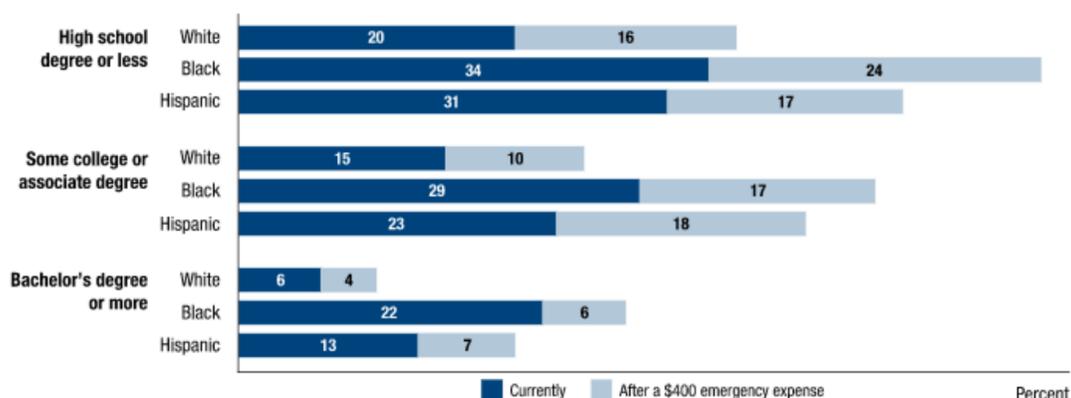


Source: American Community Survey Data, 2014-2018

Racial Wealth Gap

- The typical white household has about **10 times** more wealth than the typical Black family, and **seven times** that of the typical Latinx family.²⁰
- While data on median Native American household net worth is scarce, Native Americans experienced poverty at almost double the rates of the national average in 2016, at **26.6 percent**. Some Asian ethnic groups also experience poverty at disproportionate rates, such as Burmese (**29.3 percent**), Bangladeshi (**22.6 percent**), and Hmong (**21.7 percent**) households. The poverty rate among the general population was **14.0 percent** in 2016.²¹
- Households of color experience greater difficulty paying their bills when confronted with an emergency expense of \$400.²²

Figure 12. Not able to fully pay current month's bills (by education and race/ethnicity)



Source: <https://www.federalreserve.gov/publications/2019-economic-well-being-of-us-households-in-2018-dealing-with-unexpected-expenses.htm>

Health Inequities

Even before the COVID-19 crisis began, communities of color throughout the United States have faced **inequitable access to health care** and **increased risk of health issues**. The current crisis highlights and exacerbates these inequities.

Health Status

- Communities of color, particularly Black, Latinx, and Native American communities, disproportionately experience many of the preexisting conditions that are especially dangerous with coronavirus, such as hypertension, asthma, heart disease, and diabetes.^{23, 24, 25}
- These health disparities are linked to environmental, economic, and political injustices that have led to food insecurity, exposure to harmful pollutants, poor housing conditions, and other inequitable living situations that harm health.^{26, 27}

Work Risks

- Many people of color and immigrants are working on the front lines in essential industries, including healthcare, grocery stores, food delivery, and agriculture.^{28, 29}
- Only **16 percent** of Latinx workers and **20 percent** of Black workers have the ability to work from home, compared to **30 percent** of white workers.³⁰

Access to Health Insurance and Quality Health Care

- Fear, distrust, and discrimination can also discourage some communities of color from seeking out medical assistance. Immigrant families, particularly those who are undocumented or mixed-status, may choose not to go to the hospital for fear of immigration enforcement.³¹ Historical and present oppression in the health care industry has led to distrust among African American communities.³²
- In 2015, **28 percent** of American Indians and Alaska Natives were uninsured and in 2017, **13.8 percent** of Black adults and **25.1 percent** of Latinx adults were uninsured, compared to **8.5 percent** of white adults.^{33, 34}

Geographical Differences

- Rural areas face reduced health care access due to a shortage of hospitals, as **120 rural hospitals** have closed in the past decade.³⁵
- A lack of data and cases in rural communities, including white, Latinx, Native American, and Black communities, could be due to increased isolation inhibiting the spread of the virus, but could also point toward lower access to health care and testing.³⁶

These existing health inequities are further exacerbated by the COVID-19 crisis, as many people of color are forced to choose between wages and protecting their health, and have reduced access to health care should they become sick. Higher rates of pre-existing conditions make individuals more vulnerable to catching the disease or experiencing a more extreme case of it.

COVID-19 Impact

Data in some cities and states already reveal the disparate impact of COVID-19 on communities of color:

- The Navajo Nation has an infection and death per-capita rate **10 times higher** than that of neighboring Arizona.³⁷
- In Chicago, Black residents make up **60 percent** of the deaths due to COVID-19, while making up only **29 percent** of the general population.^{38, 39}
- In New York City, the COVID-19 mortality rates of Latinx and Black populations are about **twice** those of white and Asian populations.⁴⁰

COVID-19 Response Recommendations

Advocates, activists, and policymakers are fighting for drastic actions and policies that address the racial and economic injustices associated with the COVID-19 crisis. Some of these demands include:

- Actions that support people experiencing homelessness, who are disproportionately Black and people of color:
 - House people experiencing homelessness in hotels, motels and/or RVs for the duration of the crisis, and plan now for permanent housing after the crisis ends.
 - Place moratoria on sweeping encampments, seizing tents, and enforcing laws prohibiting resting and sheltering oneself in public space.
 - Place moratoria on vehicle ticketing, towing and impoundment.
 - Immediately and safely decrease the number of people incarcerated for laws criminalizing homelessness and other non-violent offenses.
 - Schools and universities must take students experiencing homelessness into account as they close down, including ensuring students have the necessary tools to complete schoolwork remotely.
 - Ensure that any emergency cash relief measures designed to assist people with the economic impact of the Coronavirus crisis are also made available to and reach people experiencing homelessness.
- Require public collection of data on COVID-19 cases and deaths by race and ethnicity on federal, state, and local levels.⁴¹ Some states and cities are still not publishing racial and ethnic data on COVID-19 cases and deaths.⁴²
- Ensure adequate access to testing among communities of color.⁴³
- Implement rent relief: Eviction and rent moratoriums help with keeping families in their homes during the crisis, but do not necessarily ensure families' housing security once the crisis is over.^{44, 45}
- Paid sick leave and paid family medical leave.^{46, 47, 48}
- Provide hazard pay for essential workers.⁴⁹
- Reduce jail and prison populations and ensure that those who are released can access non-congregate living situations.^{50, 51}

Resources

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