

Vulnerability Index: Prioritizing the Street Homeless Population by Mortality Risk

The Vulnerability Index is a tool for identifying and prioritizing the street homeless population for housing according to the fragility of their health. It is a practical application of research into the causes of death of homeless individuals living on the street conducted by Boston's Healthcare for the Homeless organization, led by Dr. Jim O'Connell. The Boston research identified the specific health conditions that cause homeless individuals to be most at risk for dying on the street. For individuals who have been homeless for at least six months, one or more of the following markers place them at heightened risk of mortality:

- 1) more than three hospitalizations or emergency room visits in a year
- 2) more than three emergency room visits in the previous three months
- 3) aged 60 or older
- 4) cirrhosis of the liver
- 5) end-stage renal disease
- 6) history of frostbite, immersion foot, or hypothermia
- 7) HIV+/AIDS
- 8) tri-morbidity: co-occurring psychiatric, substance abuse, and chronic medical condition

In Boston, 40% of those with these conditions died prematurely, underscoring the need for housing and appropriate support for this group.

The Vulnerability Index is administered in a form of a survey, which captures a homeless individual's health and social status. It identifies the most vulnerable through a ranking system which take into account risk factors and the duration of homelessness. This ranking allows those with the most severe health risks to be identified and prioritized for housing and other support.

Dr. Jim O'Connell said it best:

"The painfully obvious lesson for me has been the futility of solving this complex social problem solely with new approaches to medical or mental health care...I dream of writing a prescription for an apartment, a studio, an SRO, or any safe housing program, good for one month, with 12 refills."

From the early successes of its *Street to Home* program, Common Ground has consistently observed that putting names and faces – and now medical conditions – to formerly anonymous street homeless individuals inspires action. The commitment of housing resources and the expedited housing placement of the medically-fragile, have been the direct, concrete results of the use of the Vulnerability Index. The Vulnerability Index has been used in New York City, Los Angeles County's infamous Skid Row, Santa Monica, and New Orleans as a powerful force for change.

This simple and replicable tool, rooted in solid scientific research, helps mobilize communities to act decisively, organize around individuals' housing needs, and solve a seemingly intractable problem.

How to Use the Vulnerability Index in Your Community

Common Ground uses these techniques to strip away the anonymity of street homelessness and reframe homelessness as a public health issue:

1. Assemble community stakeholders (service providers, housing providers, police, business improvement districts, political leadership) to educate on the use of the Vulnerability Index, gain support for the concept, and identify an area of focus
2. Conduct a count of those sleeping outside between the hours of midnight and 6:00 am. The purpose of the count is to create a baseline understanding of the numbers of homeless individuals in an area, and to determine the number of surveys that the project should expect to complete. The average response rate is 83% of those counted.
3. Train volunteers on how to administer the survey (attached) and how to take a good digital photograph.
4. Administer the survey between 3:00 am and 6:00 am for at least three consecutive mornings.
5. Enter the data into a spreadsheet or database.
6. Analyze the surveys to calculate risk factors and establish housing priority list
7. Brief community on the findings.
8. Develop and implement a housing action plan based on results.