Improving the count of persons experiencing homelessness and describing their morbidity health outcomes using syndromic surveillance in New Mexico

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CATEGORY: **Syndromic Surveillance**

New Mexico Department of Health (NMHealth) had received requests for data on health outcomes among persons experiencing homelessness but struggled to produce reliable or useful information for the community. Using syndromic surveillance, they were able to identify individuals with evidence of homelessness and describe their morbidity.

The "What"

New Mexico Department of Health (NMHealth) had received requests for data on health outcomes among persons experiencing homelessness but struggled to produce reliable or useful information for the community. The present reality is that most health surveillance systems either do not include good measures of housing status or sometimes exclude unhoused people from the data collection process. In a prior analysis, NMHealth observed that a query of the patient address field in their state's syndromic

data for a word like "homeless" would produce a substantial count of unhoused individuals. Recognizing the need for better sources of data on unhoused populations, they tried to take this strategy as far as possible to see different ways of flagging evidence of homelessness and telling stories about individuals experiencing homelessness in New Mexico. Ultimately, the project relied on linkage software to aggregate visits at the individual unhoused-person level. The project also used the diagnosis of homelessness, not as a primary measure to estimate homelessness, but as a tool to examine how hospitals were describing unhoused people in patient records to enhance their query strategies.

Using **syndromic surveillance data**, NMHealth found **two-to-four times** as many unique individuals with evidence of homelessness as compared to the **official annual count** for the state.

The "So What"

After careful review of patient records, including patient addresses, this study (https://www.nmhealth.org/data/view/report/2971/) found two-to-four times as many unique individuals with evidence of homelessness than were counted in the official annual count of homelessness in New Mexico.

This approach allowed for analysis of morbidity among persons experiencing homelessness and showed that regular analysis of health outcomes among unhoused people could inform better prevention across a range of preventable illnesses and injuries. The report demonstrated the impact of homelessness across generations by identifying significant counts of persons experiencing homelessness who had visits indicating pregnancy, were under age 5, or were senior citizens age 65+. This information mattered to the community and was covered by most major news outlets, which were eager to report on accurate, fact-based information on homelessness. This report added context to support existing claims of local homelessness advocates who had been identifying issues with undercounting of homelessness for years.

The "Now What"

The NMHealth team is working on a follow-up study to look at mortality outcomes among the persons experiencing homelessness found in this initial study in hopes of better understanding what fraction of preventable deaths are associated with these unhoused patients and which patient factors are most closely associated with risk of future death. They are also advocating for the continued and expanded use of the diagnosis code for homelessness, as the use of the code has proven valuable in exploring a variety of questions related to unhoused patients. The team has been meeting regularly with community and governmental partners about the importance of supporting routine public health surveillance of health and homelessness.

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