



RESEARCH BRIEF

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Disparities in the Rates of Positive Screens for Housing Instability and Use of VHA Homeless Programs Among Veterans, by Sex and Race



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What do we know?

In the United States, homelessness disproportionately impacts people who identify as black/African American, Native American, and Hispanic; this is also the case among military Veterans.¹ While female Veterans appear to be underrepresented within the homeless population,² studies conducted within the Veterans Health Administration (VHA) have found that female Veterans more frequently self-report housing instability compared with their male counterparts.³ Research is needed to explore whether race and sex disparities exist in not only the rates of Veterans' experience of housing instability but also their uptake of services intended to mitigate housing instability.⁴

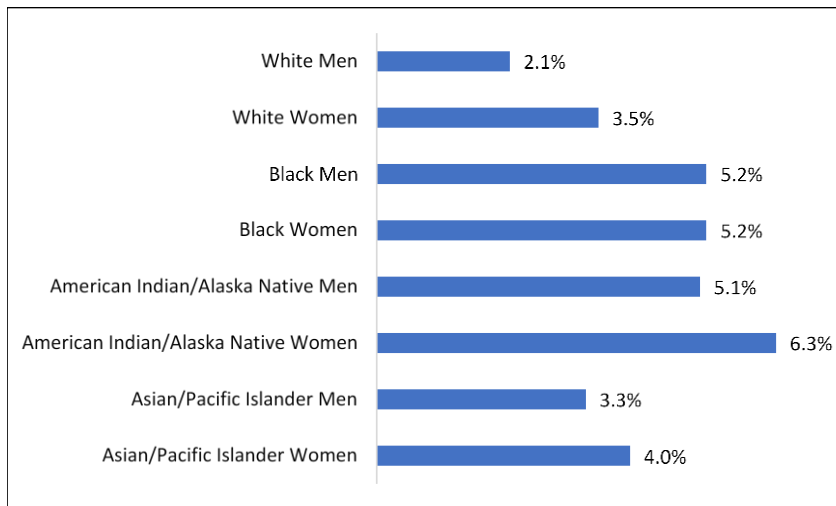
New information provided by the study

More than 5.3 million Veterans responded to VHA's universal screen for housing instability between October 2012 and September 2016.⁵ The vast majority (75.5%) of respondents were white men, followed by black men (15.2%), white women (4.6%), black women (2.2%), and a combination of American Indian/Alaskan Native, Asian, and Hawaiian/Pacific Islander men and women (2.5%).

Figure 1 displays, by sex and race categories, the proportion of Veterans in each of the 8 race/sex categories who screened positive for housing instability. American Indian/Alaska Native women had the highest rates of positive screens (6.3%) followed by black men and women (both 5.2%); white men had the lowest rate at 2.1%. When controlling for demographic and clinical characteristics, white women and Asian/Pacific Islander women had decreased odds of housing instability relative to white men; black men, American Indian/Alaska Native men and women, and Asian/Pacific Islander men had increased odds.⁶

Figure 2 displays, by sex and race categories, the proportion of Veterans in each of the 8 race/sex categories who screened positive for housing instability and then accessed a VHA Homeless Program within 6 months. VHA Homeless Programs included Health Care for Homeless Veterans, Contracted Emergency Residential Services, Domiciliary Care for Homeless Veterans, Compensated Work Therapy/

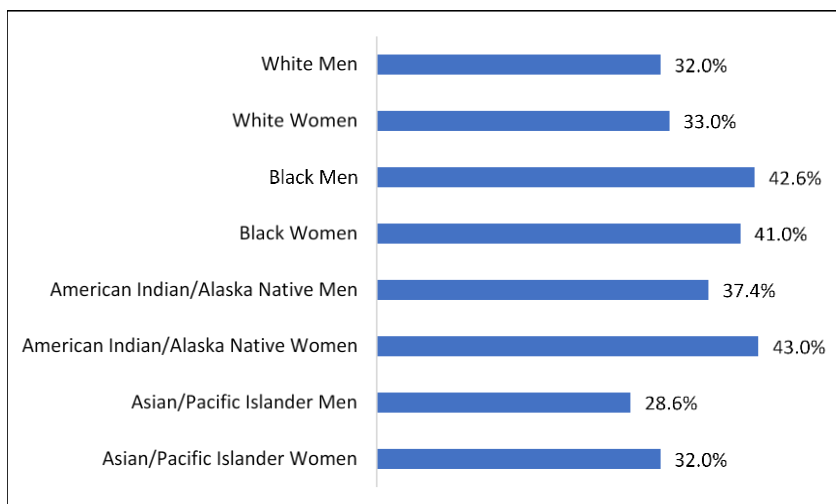
Figure 1: Rates of Positive Screens for Housing Instability among Veterans Accessing Outpatient Care



Transitional Residence, Grant and Per Diem, Low Demand Safe Haven, Supportive Services for Veteran Families, and HUD-VA Supportive Housing. American Indian/Alaska Native women had the highest rates of VHA Homeless Program use (43.0%) followed by black men (42.6%); Asian/Pacific Islander men had the lowest rate at 28.6%, followed by white men and Asian/Pacific Islander women (both 32.0%). When controlling for demographic and clinical characteristics, black men and women and American Indian/Alaska Native men and women had increased odds of accessing a VHA Homeless Program relative to white men; white women had decreased odds.⁷

This study, which can be read in its entirety elsewhere,⁸ indicates that although a disproportionate number of Veterans who are racial or ethnic minorities self-report housing instability, there do not appear to be racial- or ethnicity-based disparities in access to services intended to prevent and end homelessness among Veterans.

Figure 2: Rates of VHA Program Use Within 6 Months Following a Positive Screen for Housing Instability



References

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- ⁷ Montgomery, A. E., Szymkowiak, D., & Tsai, J. (In press). Housing instability and homeless program use among Veterans: The intersection of race, sex, and homelessness. *Housing Policy Debate*. doi:10.1080/10511482.2020.1712613.
- ⁸ Montgomery, A. E., Szymkowiak, D., & Tsai, J. (In press). Housing instability and homeless program use among Veterans: The intersection of race, sex, and homelessness. *Housing Policy Debate*. doi:10.1080/10511482.2020.1712613.