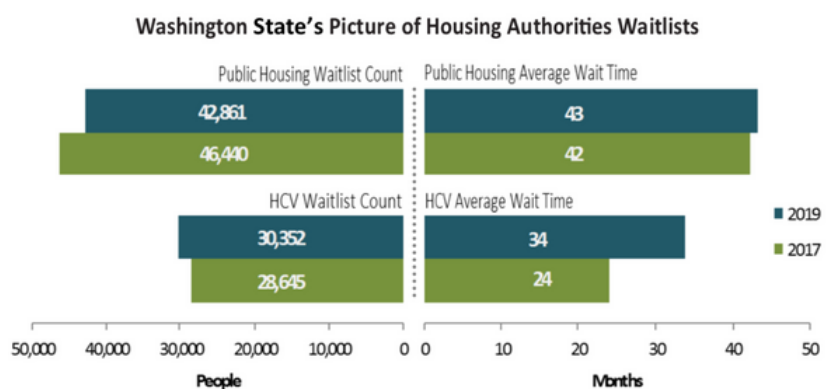


# HOUSING INSECURITY & CANCER

Only 26% of Washington families in need of Public Housing are served. Families **wait on average 3.5 years** to be accepted into Public Housing. A lack of housing resources means many Washington Housing Authorities hold lotteries for their Housing Choice Voucher (HCV) programs. Even with a voucher, families on the list **wait on average 2.8 years** to receive a Voucher.



Homelessness is a national problem that is worsening. Some challenges the homeless face—lack of shelter, food, health care, support, and opportunities—are well known. Cancer, a often unrecognized problem among the homeless, is a leading cause of their deaths.

For people who first became homeless after age 50, the median age of death was 64.6 years old and were about 60% more likely to die than those who had become homeless earlier in life.

Leading causes of death were:



Those who remained homeless were about 80% more likely to die than those who were able to return to housing.

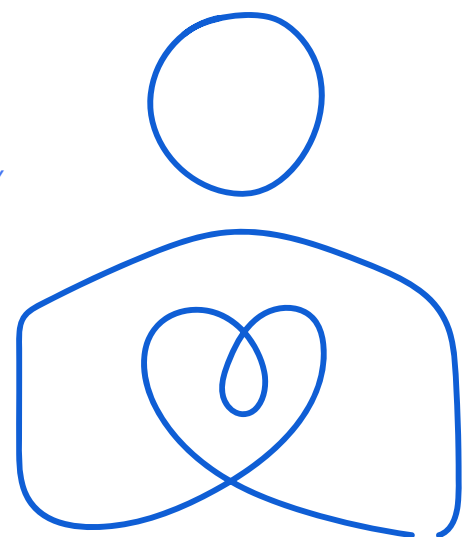
## NAVIGATING HOMELESSNESS

An Oncology Social Worker is usually among the first team members to get a call when homelessness is revealed or discovered for a person living with cancer. Often the consult can be to address the problem; however, homelessness is complex and cannot usually be fixed in a short window of time, such as by the start of treatment. Each situation is unique, given that homelessness doesn't look the same, nor do the contributing factors and barriers compare from person to person.

As a healthcare community, we must anticipate treating patients who are homeless. Realizing that there may not be an ideal solution and that we may not be able to fix the problem are important considerations.

The Oncology Social Workers at NWMS may assess patients by asking some of the following questions:

- How has the patient survived? How are basic needs being met? *Survival takes strength and resiliency, which deserves acknowledgement.*
- What resources does the patient already utilize? Who are their supports? *These could be from the community, familial, friends, church, etc.*
- What is important to the patient? What are they most concerned about at this time, now that there is a new diagnosis, or recurrence, of cancer?
- Are there no options for a place to live or have options been ruled out for various reasons? *Some individuals may intermittently have shelter, others may decline housing due to past experiences or room for their pet.*
- Where do we truly need to start to address the problem? *For example, access to food or transportation may be a bigger priority.*



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2-1-1 is a free confidential community service and your one-stop connection to the local services you need, from utility assistance, food, housing, health, child care, after-school programs, elder care, crisis intervention and much more.