NPM 8: HOUSING INSTABILITY

GOAL
To reduce the percent of pregnant women and children experiencing housing instability.

SIGNIFICANCE
Safe and secure housing is a fundamental social determinant health. Housing instability can include a variety of challenges, such as difficulty making housing payments, overcrowding, moving frequently, eviction, and homelessness.[1] In pregnancy, housing instability is associated with inadequate prenatal care and adverse birth outcomes, including low birthweight and preterm birth.[2] Housing instability, particularly in early childhood, is linked to poor health and development.[1,3] Homelessness is the most extreme form of housing instability. The highest risk period for sheltered homelessness is the first year of life and families with children comprise a third of all sheltered homeless people.[4] Housing instability disproportionately burdens those with lower income and Black and Hispanic populations.[1,2,3,4]

DEFINITION
Numerators:
- Number of women who reported being evicted, homeless, or lacking a regular place to sleep in the 12 months prior to delivering an infant.
- Number of children, ages 0 through 11, whose parents reported being behind on a housing payment in the past year, that the child had lived in three or more places in the past year, or that they had ever been homeless.

Denominators:
- Number of women with a recent live birth.
- Number of children ages 0 through 11.

HEALTHY PEOPLE 2030 OBJECTIVE
Related to Social Determinants of Health (SDOH) Objective 4: Reduce the proportion of families that spend more than 30 percent of income on housing (Baseline: 34.6 percent in 2017, Target: 25.5 percent).

STATUS
The Maternity Vulnerability Index (MVI)[5] serves as a tool to understand where birthing people in each state may be more likely to have poor outcomes, including preterm birth and maternal death, due to clinical risk factors and other social, contextual, and environmental factors. The index ranges from 0 (least vulnerable) to 100 (most vulnerable). One of the MVI themes –

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[1] Healthy People 2030. Housing instability.
[2] DiTosto JD, Holder K, Soyemi E, Beestrum M, Yee LM. Housing instability and adverse perinatal outcomes: a systematic review. Am J Obstet Gynecol MFM. 2021;3(6):100477. doi:10.1016/j.ajogmf.2021.100477.
[3] Bess KD, Miller AL, Mehdipanah R. The effects of housing insecurity on children's health: a scoping review [published online ahead of print, 2022 Feb 4]. Health Promot Int. 2022;daac006. doi:10.1093/heapro/daac006
[4] U.S. Department of Housing and Urban Development. The 2017 Annual Homeless Assessment Report (AHAR) to Congress, Part 2: Estimates of Homelessness in the United States.
[5] The US Maternal Vulnerability Index (MVI).

Physical Environment – measures environmental factors that influence maternal health outcomes including crime rates, housing, pollution, and access to transportation.

As given in Table 1, Delaware's overall MVI (62) classifies it as having a high maternal vulnerability index, which contrasts with its neighboring states of Maryland (48; Moderate), New Jersey (38; Low), and Pennsylvania (58; Moderate). Delaware's physical environment theme score (68; High) is also high and similar to that of its neighboring states.

Table 1. Physical Environment Domain and MVI for Delaware, Delaware Counties, and Neighboring States (Surgo Health, Maternal Vulnerability Index, 2023).

	Delaware	Kent County	New Castle County	Sussex County	Maryland	New Jersey	Pennsylvania
Physical Environment	68 High	76 High	65 High	57 Moderate	74 High	68 High	64 High
Overall MVI	62 High	69 High	46 Moderate	55 Moderate	48 Moderate	38 Low	58 Moderate

In addition, note that Housing & Shelter was the most reported request by 2-1-1. Between January 1, 2022 and December 31, 2023, there were **33,810 Housing & Shelter requests** to 2-1-1, which corresponds to **32.5 percent of all 2-1-1 requests.**

The estimated percentage of women who stated that they were homeless in the 12 months before their baby was born was highest among Black non-Hispanic women as compared to the other race/ethnicities examined (Figure 1). In addition, in Delaware, the percentage of Black non-Hispanic children residing in supportive neighborhoods was lower than the corresponding percentages of White non-Hispanic and Hispanic children (Figure 3).

Figure 1. Percentage of Women Who Stated They Were Homeless in the 12 Months Before Their Baby Was Born, by Selected Race/Ethnicities, PRAMS 2021.
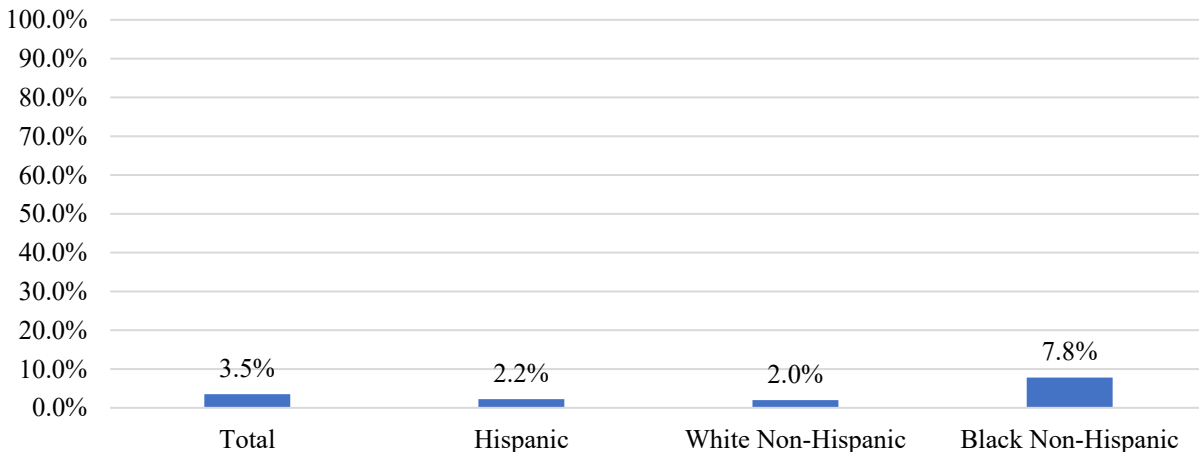
Figure 2. Percentage of Women Who Stated They Were Homeless in the 12 Months Before Their Baby Was Born, by Age of Mother, PRAMS 2021.
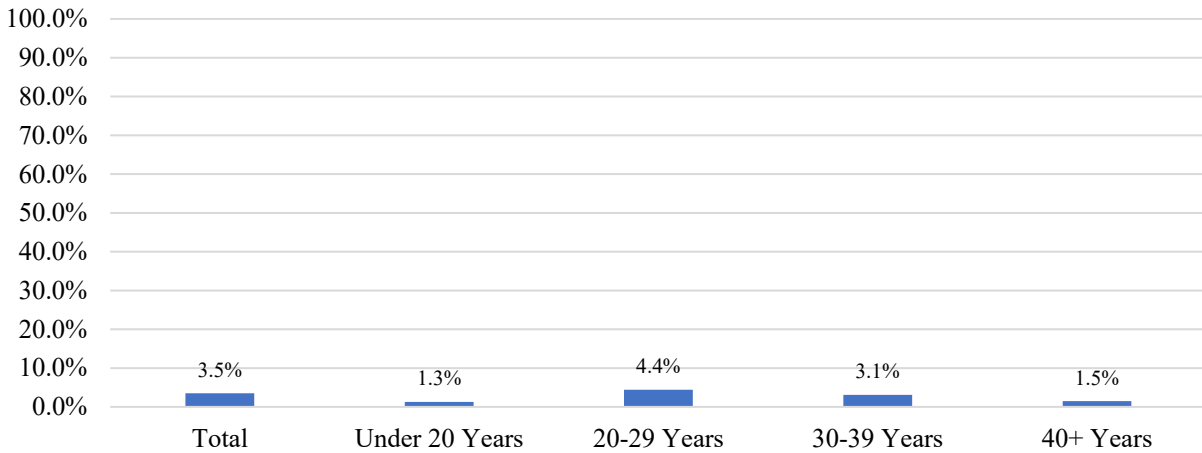

Figure 3. Percentage of Children Residing in Supportive Neighborhoods, by Selected Race/Ethnicities, NSCH 2021-2022.
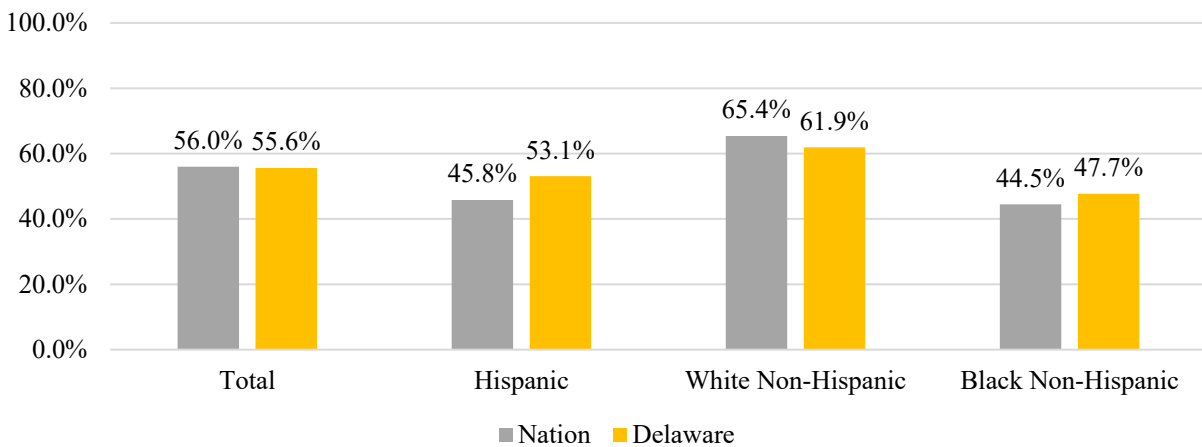

Figure 4. Percentage of Children Residing in Supportive Neighborhoods, by Health Care Coverage, NSCH 2021-2022.