

Maternal Health & Housing Fact Sheet

Pregnancy & Homelessness

- Pregnancy can increase an individual's risk of becoming homeless¹
- Pregnant persons face significantly greater health risks while unstably housed¹
- Among women ages 18-25 who experience homelessness, 44% are pregnant or parents (impacting 1.1 million children annually)²
- Persons living in shelters during or shortly after pregnancy had higher rates of substance use disorders, anxiety, depressive disorders, and injuries³
- Persons experiencing homelessness during pregnancy had higher odds of giving birth preterm and to an infant with low birthweight⁴
- Experiencing homelessness 12 months before or during pregnancy was associated with the greatest increase in Adverse Childhood Experiences (ACEs) scores among children by age 3⁵



Challenges to Receiving Prenatal Care While Experiencing Housing Insecurity

- Fragmentation of health services and low accessibility/long waitlists⁶
- Inadequate care that does not recognize complex and diverse needs⁷
- Attitude and treatment from healthcare providers (stigma)⁶
- Difficulty navigating and maintaining insurance/Medicaid⁷
- Feelings of shame, embarrassment, isolation, and poor mental health⁶
- Transportation, geographical location⁶
- Competing lifestyle demands⁶
- Fear and distrust of Child Protection Services⁶



The Influence of Housing Discrimination on Maternal Health

- Individuals giving birth in communities impacted by historically racist housing policies and practices are more likely to:
 - Be experiencing epigenetic risk factors due to historical trauma⁸
 - Be exposed to stress related to housing instability and cost⁸
 - Be living in housing with greater indoor environmental risks and hazards (i.e., lead or pests)⁸
- Infants of parents in communities impacted by historically racist housing policies and practices are more likely to be born preterm⁸



Women's Housing During and Beyond COVID-19

- Gender disparities continue to be exacerbated during the pandemic; at least 2.5 million U.S. women have dropped out of the labor force since the start of the pandemic (leaving or losing jobs at four times the rate of men)⁹
 - This results in challenges for women with children, contributing to the wage gap and increasing precarious housing situations
- Without stable housing, women with children may be forced to move into unsafe housing, live with an abuser, stay in a shelter, or live in their car⁹
 - These stressful situations can increase their risk of COVID-19 infections, leading to lifelong poorer health and well-being⁹

Maternal Health & Housing Policy Suggestions

What Can You Do to Improve Housing for Pregnant/Postpartum People?

- Advocate for shelter-based interventions providing prenatal care³
- Advocate for expansion of programs which provide units conducive for families (i.e., not studios or individual-sized units)
- Advocate for policies that support fair and just housing, such as eliminating racist restrictive covenants in housing and property deeds¹⁰
 - More funding for federal housing programs (National Housing Trust Fund)
- Increase access to consistent preventive care⁶
- Reconfigure services to be delivered in a way that recognizes and meets homeless people's complex and diverse needs⁶
 - Decrease fragmentation of health services
 - Staff training on working with homeless populations
- Continue supporting or building upon legislation passed during COVID-19 pandemic (i.e., emergency rental assistance, sealing eviction records, and foreclosure moratorium)¹¹
- Ensure community safety and economic stability, through:
 - Institutional policies promoting and enforcing screening in health care systems¹²
 - Substance use disorders, mental health, safe housing, intimate partner violence
 - Social policies to support the education and employment of women & provide adequate day care for working parents
 - Funding to provide victim assistance & housing to support pregnant/postpartum people needing to leave violent intimate partners¹²
 - Paid Family Leave



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