

For 35 years, the Colorado Coalition for the Homeless (the Coalition or CCH) and the Denver community have come together on the longest night of the year to remember the lives of those who passed away while they were experiencing homelessness. It is important to honor individuals and report on their deaths in the greatest detail possible because this may be the only acknowledgement some receive. This report also serves to highlight troubling trends—and some promising ones—impacting unhoused community members. According to data collected by the Metro Denver Homeless Initiative (MDHI) and other direct service partners, at least 294 individuals passed away in the Denver Metro area in the yearlong period from November 1, 2023, through October 31, 2024, (referred to as “2024 data” for the purpose of this report).

This report primarily draws on documentation from the Denver Medical Examiner’s Office (OME) regarding individuals experiencing homelessness who passed away during the timeframe outlined above. OME is unable to provide CCH with complete demographic data on these individuals, which makes it difficult to fully understand the impact and nature of these deaths. According to available data, the OME recorded 225 deaths among people experiencing homelessness in 2024. Although this number remains tragically high, it does reflect a decrease from the 239 deaths reported in 2023, marking a break in the trend of steadily rising annual deaths since 2019.

This report serves as a companion to the We Will Remember: Homeless Persons’ Memorial Vigil which takes place at the Denver City and County Building yearly on December 21st, the longest night of the year. Neither this analysis nor the Homeless Persons’ Memorial Vigil are able to account for or adequately honor all our neighbors who died while experiencing homelessness this year. To better understand the impact of housing status on deaths among people experiencing homelessness, CCH has, where relevant in this report, compared this population to individuals who were formerly homeless but are now housed in CCH properties.



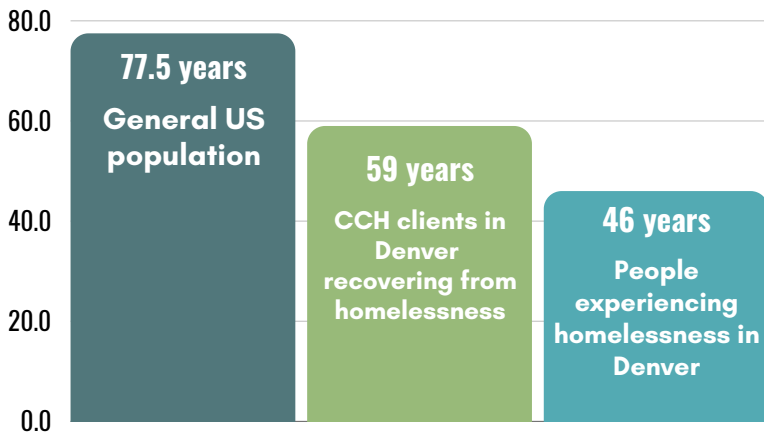
*Colorado Coalition for the Homeless hosts the We Will Remember: Homeless Persons’ Memorial Vigil on the longest night each year to honor and remember those who have died while experiencing homelessness. This year marks the 35th year of this service honoring those lives lost. It is an opportunity to come together to mourn and to work to prevent the heartbreaking loss of our loved ones, colleagues, friends, and neighbors. To view the program listing the known names of those who passed in 2024, visit [coloradocoalition.org/vigil](https://coloradocoalition.org/vigil).*

## DEATHS OVER TIME

One of the most striking findings continues to be a dramatically reduced life expectancy among people experiencing homelessness as compared to the housed population. In 2024, the average age of death for someone experiencing homelessness in Denver was 46. This is the same as 2023, but still notably lower than 2022’s average age of 50.5. These figures are particularly striking when considering that the average US life expectancy is 77.5. For individuals recovering from homelessness and living in CCH housing, the average age at death in 2024 was 59—thirteen years higher than that of unhoused individuals. Year after year, data shows the protective factor that housing can have on an individual’s potential life span.



**FIGURE 1. COMPARISON OF HOUSED VS. UNHOUSED VS. GENERAL POPULATION**



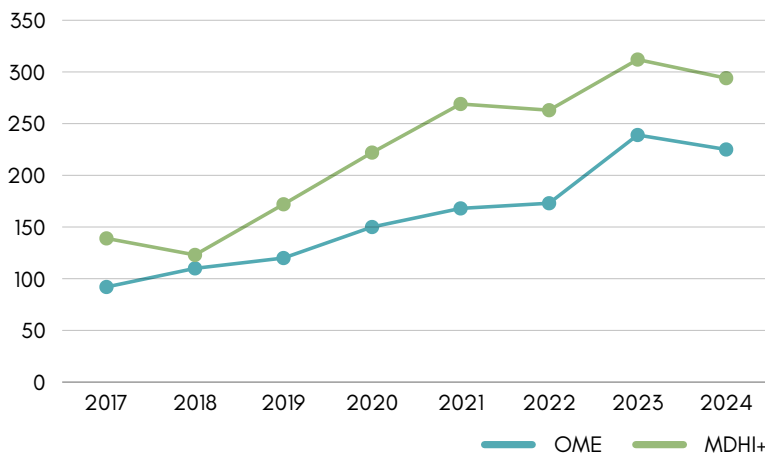
Perhaps the most significant trend change from 2023 to 2024 is a slight plateau in overdose deaths. While 2023 saw an 18% increase in overdose-related deaths among people experiencing homelessness in Denver, 2024 experienced a slight decrease of approximately 0.6%. Although overdose deaths remain tragically high, this shift offers a meaningful step toward reversing the upward trend and saving lives in the future.

Additionally, there has been a modest reduction in the homicide death rate among people who are unhoused in Denver, down from 5.4% in 2023 to 4.4% in 2024.

While overdose and homicide deaths saw a slight decrease, deaths by suicide have more than doubled, rising to 4.89% of deaths among people experiencing homelessness in 2024, compared to 2.09% in 2023. Death rates due to accidents and suicide both increased from 2023 to 2024 and will need to be closely monitored to see if those trends continue moving forward.

Analysis found no statistically significant differences in cause or manner of death by sex, race, or ethnicity.

**FIGURE 2. DEATHS BY YEAR**



**CAUSE AND MANNER OF DEATH**

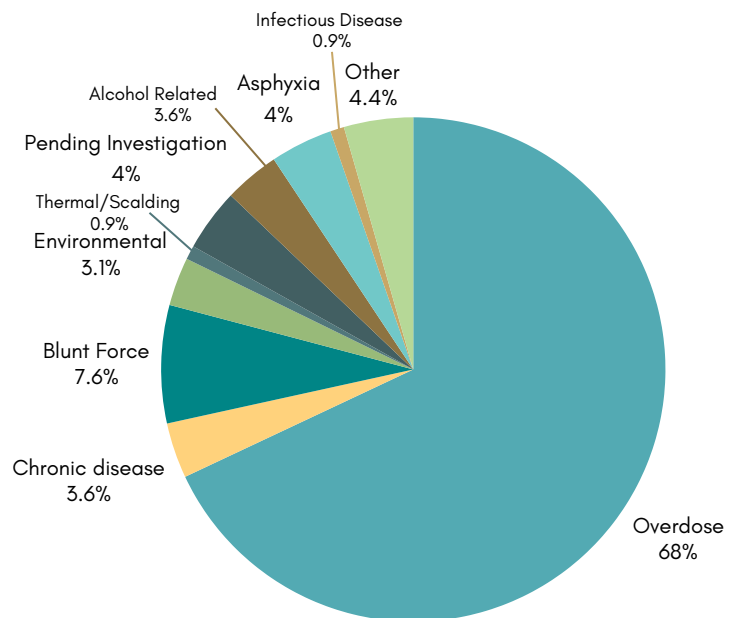
When OME investigates a death, it makes two decisions about the circumstances: cause, which refers to the biological factors that led to a person’s death and are characterized as primary and contributing causes; and manner, or the way in which a person died, which is characterized as natural, accident, homicide, suicide, or undetermined (if the investigator lacks sufficient evidence to select a manner).

In 2024, among the 225 deaths among people experiencing homelessness in Denver, OME was able to determine the cause of death for 216 people. Overdose, as in years past, remains the leading cause of death among people experiencing homeless at 68%.

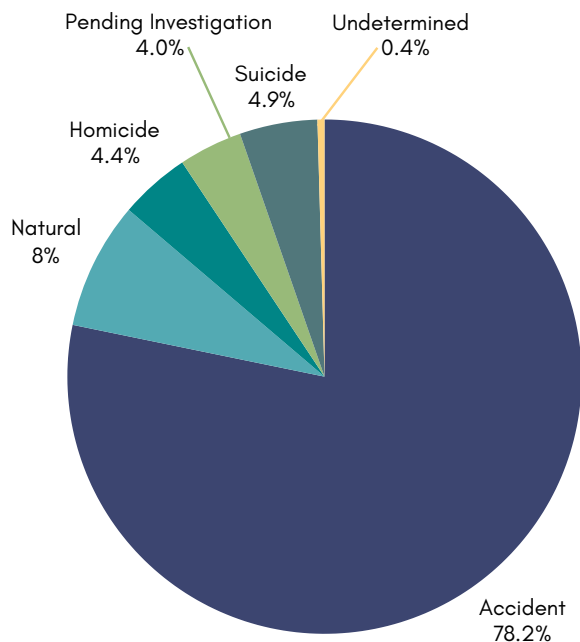
Death rates due to overdose among people who are experiencing homelessness remain significantly higher than those who are housed. 17.2% of deaths among CCH’s housed clients were attributed to overdose—50.8% lower than those who are unhoused. Overdose deaths among CCH’s housed clients also declined from 28.6% in 2023 to 17.2% in 2024.

Particularly concerning in 2024 is the increase in deaths by suicide among those who are unhoused. The rate of deaths attributed to suicide among unhoused people in Denver rose from just over 2% in 2023 to nearly 5% in 2024. Conversely, deaths by suicide among CCH’s housed clients fell from 4.76% in 2023 to 3% in 2024. Many of the common risk factors of suicide are also associated with homelessness, such as mental illness, anxiety, family conflict, isolation and loneliness, domestic violence or sexual abuse, alcohol or drug use, and adverse childhood experiences.<sup>1</sup>

**FIGURE 3. CAUSE OF DEATH**



## FIGURE 4. MANNER OF DEATH



## SUBSTANCE USE DISORDERS AND DEATH

This year, 153 of the 225 deaths among unhoused individuals were attributed to overdose. Although the rate of overdose deaths slightly decreased year over year from 68.6% in 2023 to 68% in 2024, it remains the most common cause of death. 2024 was notably the first time that the rate didn't increase year over year since 2017. The last four years saw increases of 18%, 4.5%, 6.1%, and 8.7%, respectively.

The slowing of overdose deaths among people experiencing homelessness follows a nationwide 10.6% reduction in drug-related deaths.<sup>2</sup> Over the last two decades, overdose deaths have steadily increased from around 20,000 in 2000 to a peak of 108,000 in 2022.<sup>3</sup> In 2023 and 2024, the number of overdose deaths decreased nationwide with a decrease of 17% between July 2023 and July 2024.<sup>4</sup> While this trend is promising, there will still be nearly 100,000 overdose deaths in the US this year. These losses are catastrophic, unacceptable, and largely preventable. Colorado's data lags slightly behind the national trend, but the Coalition and its partners are hopeful that national decreases are an indication that Colorado will see more significant declines in the future. In a recent [statement](#), the White House Drug Policy Director suggested that this encouraging trend is due to harm reduction strategies including reducing barriers to treatment and improving access to life-saving opioid overdose reversal medications like naloxone. Colorado has made robust investments in these areas (discussed below) and expects to see positive impacts reflected in the overdose data in the coming years.

This year, approximately 115 of the 153 overdoses were associated with the use of fentanyl. This represents 75% of overdose deaths and 51% of all deaths. Due to its potency, prevalence, and use with other dangerous substances, fentanyl use has a high likelihood of overdose and is responsible for approximately 90% of opioid-related overdose deaths nationwide.<sup>5</sup> Notably, Colorado's drug supply continues to be unsafe, unpredictable, and volatile, leading to the emergence of unregulated and deadly substances like xylazine, nitazenes, para-fluorofentanyl, and others.<sup>6,7,8</sup>

People experiencing homelessness face heightened overdose risk due to several factors, including lack of access to healthcare and substance use disorder treatment, persistent and untreated health conditions, isolation, and using in public spaces or alone where they are less likely to receive assistance in the event of an overdose. All of these risk factors are minimized when someone is housed. Specifically, the Housing First approach accompanied by healthcare and other wraparound services has proven time and time again to be a best practice for meaningfully addressing substance use disorders for people experiencing homelessness.<sup>9</sup> Furthermore, we must embrace evidence-based practices to reduce harm, expand access to treatment, and support people who use drugs. Harm reduction strategies such as naloxone distribution, needle exchange programs, and test strips are proven tools which save lives that we should continue to embrace. At the Coalition, we provide medication assisted treatment (MAT) alongside counseling and other supports to treat opioid use disorder, while also helping clients access housing and other healthcare services. The Fort Lyon Residential Supportive Community additionally offers long-term solutions to substance use disorders at a dedicated facility outside of Metro Denver. Other solutions, such as overdose prevention centers, are not currently permitted in Colorado but have been proven to reduce public drug use, lower demand for healthcare and emergency response services, and save lives. Tackling the overdose crisis will require both a commitment to building upon established solutions and a willingness to embrace other promising practices to save lives.



## PROVEN SOLUTIONS

The Coalition continues to invest in proven strategies to address homelessness and reduce deaths among unhoused individuals.

### SUPPORTIVE HOUSING WITH WRAPAROUND SERVICES

One of the most meaningful strategies for addressing housing instability is supportive housing. Supportive housing combines housing cost assistance with voluntary support services to address the needs of people experiencing chronic homelessness such as onsite case management, counseling, substance use treatment, psychiatric care, and medical care. The model pairing Housing First with supportive services has proven to be cost effective for taxpayers and nearly 80% of residents remain housed after three years when services are in place.<sup>10</sup> This model also improves health outcomes for residents who see reduced ER visits and increased interaction with primary care clinicians.

While permanent supportive housing with wraparound services has been the cornerstone of CCH's housing for decades, the organization and key partners added 215 units to the housing stock in Denver in 2024. Renewal Village, a nine-story facility in the Globeville neighborhood, was converted from a hotel and convention center to a supportive housing residence. Conversion projects such as Renewal Village offer the benefit of creating new permanent housing units more quickly and at a lower cost as compared to traditional development and build projects. Research shows that providing housing with wraparound supportive services offsets approximately half of the taxpayer cost of public service utilization like jails, emergency departments, ambulances, detox centers, and more.<sup>11</sup>



## CITY OF DENVER PRACTICES/OUTREACH

The City of Denver has significantly expanded efforts to resolve homelessness through the House1000 initiative which brought 1,000 people experiencing homelessness off the streets and connected them to temporary and long-term housing options with wraparound services. The second phase of this initiative, All In Mile High, has a goal of moving 2,000 people experiencing unsheltered homelessness indoors by December 31, 2024.<sup>12</sup> In addition, Denver has updated its protocols for cold weather shelter in instances of severe weather. The previous policy opened cold weather shelters only when temperatures dipped below 20 degrees and only overnight. This year, emergency shelters will remain open throughout the day and night when temperatures drop below 25 degrees.<sup>13</sup> Given the danger and heightened mortality risk that severe cold weather poses for people experiencing homelessness, these initiatives are a strong step in the right direction to preventing deaths by bringing people indoors and have undoubtedly saved lives.



Another key component of Denver's homelessness resolution efforts are street outreach services provided by the Denver Street Outreach Collaborative (DSOC), of which the Coalition is a member. DSOC and Strategic Outreach to Large Encampment (SOLE) teams connect with people surviving literal homelessness in large and small encampments, in vehicles and RVs, in alleyways, and under bridges. The teams provide emotional and material support to the most vulnerable and disconnected individuals who present with complex needs around healthcare, substance treatment, and housing. CCH's Outreach teams also operate in partnership with the Outreach programs at Urban Peak and the Saint Francis Center, as well as Street Medicine through the Coalition's Federally Qualified Healthcare staff.

## EXPANDED INTEGRATED HEALTHCARE

In addition to the healthcare mentioned above through street outreach, the Coalition provides medical, dental, pharmacy, optometry services, and more in the Denver Metro area at our flagship Stout Street Health Center, and satellite locations. In 2024, over 17,000 individuals received healthcare through CCH.

The 48th Avenue Health Center, co-located at the Denver Rescue Mission's 48th Avenue Shelter, served over 1,000 individuals in 2024. By providing healthcare onsite at a shelter, individuals can receive services in an accessible location, improve their health, and have more time to allocate to resolving their homelessness.



In addition, the John Parvensky Stout Street Recuperative Care Center, now two years into full operation, continues to have a profound impact on individuals experiencing homelessness. The Recuperative Care Center provides a recovery space for people who are well enough to be released from the hospital but still need some time to heal or stabilize a medical issue. For people who are released from the hospital to a shelter or to their tents on the street, it can be very hard to stay healthy after hospitalization. This one-of-a-kind model in Colorado serves over 500 individuals a year and is supported through partnerships with Denver Metro Area hospital systems and other partners.

## 2024 POLICY INITIATIVES

Upstream policy solutions are essential to the work of preventing and resolving homelessness. During the 2024 legislative session, the Coalition saw significant wins related to housing and substance use disorders – two issues that intersect with homelessness in significant ways.

The Coalition's top housing priority was HB24-1322 which

directs the Colorado Department of Health Care Policy & Financing (HCPF) to conduct a feasibility study and pursue an 1115 waiver so that Medicaid can fund housing and nutrition services in a budget-neutral manner. Services include temporary housing, rent and utility assistance, housing navigation services and housing transition cost supports, tenancy services, including eviction prevention, medically tailored meals, pantry stocking, and nutrition prescriptions. This bill builds on a joint venture between HCPF and the Department of Local Affairs (DOLA) launched in 2021 to expand supportive housing called the Statewide Supportive Housing Expansion (SWSHE) Pilot Project (highlighted in the 2023 Homeless Death Review).

CCH also worked on several bills related to land use – with the goal of increasing Colorado's affordable housing stock—and many others related to renters' protections to help people access quality, safe, sanitary housing and prevent eviction and displacement.

This year, the Coalition also engaged deeply on substance use policy as a member of the newly formed Right Response Colorado (RRC) coalition. RRC works at the intersection of unmet health needs and the criminal legal system, advocating for evidence-based strategies rather than punitive responses. CCH supported the four successful bills recommended by the Opioid and Other Substance Use Disorders Study Committee to tackle the following: preventing substance use disorders through screening, planning, guidance, and data collection; improving treatment for substance use disorders including removing the prescribing cap for buprenorphine and other similar medications under all Colorado insurance plans, including Medicaid; supporting implementation of proven harm reduction measures; and promoting recovery by making it easier to operate recovery residences, sober living facilities, and sober homes. Unfortunately, the effort to authorize the operation of overdose prevention centers was once again blocked.

## ZERO SUICIDE INITIATIVE

CCH continues to partner on a national initiative, led by the Substance Abuse and Mental Health Services Administration (SAMHSA), called Zero Suicide. All behavioral health staff at CCH are required to take the training which helps clinicians more effectively assess and treat clients at risk of suicide. As a result, suicides among CCH's housed clients are down from nearly 5% in 2023 to 3% in 2024. Unfortunately, as noted above, this trend is counter to the broader Denver trend in increased suicides among people experiencing homelessness. This encourages CCH and partners to redouble efforts to ensure people have resources in times of crisis.

## FUTURE POLICIES

Looking forward, CCH intends to pursue legislation formalizing a statewide body dedicated to addressing homelessness. Under this model, state departments, local governments, nonprofits, and the four Continuum of Care (CoCs) organizations would be able to better align homelessness prevention and resolution efforts.

The Coalition will also continue to advocate for harm reduction strategies, including preventing people who use drugs from entering the criminal-legal system, strengthening treatment options, increasing availability of life-saving tools like naloxone, and improving access to syringe service programs (SSPs). CCH has taken a formal stance in support of a Denver City Council proposal to amend an outdated ordinance which limits the number of SSPs to three and imposes a 1,000-foot restriction on their proximity to schools and daycare centers. The proposed change will eliminate these arbitrary restrictions and ensure SSPs are able to reach the people who need them most.

The vulnerability of Colorado's safety net has also become a central issue for CCH. Colorado's Medicaid program disenrolled more than 500,000 members following the pandemic, making it one of the worst states in the country for disenrollment. This is driving increases in the number of uninsured Coloradans seeking health services. The healthcare system and the people it serves are further jeopardized by Colorado's billion-dollar budget deficit entering the 2025 legislative session. The Coalition, and nearly 50 other healthcare provider and advocacy groups are committed to protecting Medicaid and other programs and funding sources that support the safety net, including Federally Qualified Health Centers.

## MOVING FORWARD

This report highlights the ongoing and complex challenges facing individuals experiencing homelessness in Denver, where far too many of our unhoused neighbors passed away from preventable causes in 2024. Although there are some encouraging signs, such as a slight leveling of overdose deaths and a modest decrease in homicides, the alarming rise in suicides and the stark disparity in life expectancy between housed and unhoused individuals underscore the urgency of continued action and the need for lasting solutions to homelessness. Moving forward, it is critical to build on proven methods to address homelessness and its associated risks by advocating for improvements to affordable housing, healthcare, homeless services, and economic justice for all. The Coalition will continue its advocacy at the local, state, and federal levels and work closely with partners to ensure that everyone, regardless of their housing status, has access to the support and services they need to live longer, healthier lives.



## CITATIONS

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