

Deaths among people who were homeless at time of death in Ireland, 2021

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Table of Contents

List of Tables	v
Introduction	vi
Background	vi
NDRDI Data Sources	vii
Defining homelessness	viii
Inclusion criteria	viii
Summary	1
Summary 2021	1
Summary 2019 to 2021	3
National Overview for 2021	4
Number of deaths in 2021	4
Type of accommodation	5
Demographics	6
Substance use	7
Co-morbidities	8
Treatment services	10
Characteristics of deaths	12
Deaths among people with no recorded history of substance use	19
Deaths among People who were Homeless at the Time of Death, 2019 to 2021	20
Number of deaths among people who were homeless in 2019 to 2021	20
Characteristics of deaths	23
Acknowledgements	25
Notes	26
Appendices	27
Appendix A	27
Appendix B	28
Appendix C	29

List of Tables

Table 1 Total deaths among people who were homeless by category of homelessness and type of death, 2021	5
Table 2 Demographics and characteristics of the deceased by sex, 2021	11
Table 3 PASS region of deaths among people who were homeless at the time of death, 2021	12
Table 4 Demographics and characteristics of poisoning deaths by sex, 2021	15
Table 5 Characteristics of opioid poisoning deaths by sex, 2021	16
Table 6 Demographics and characteristics of non-poisoning deaths, 2021	18
Table 7 Demographics and characteristics of deaths among people who were homeless at the time of death, 2019 to 2021	22
Table 8 Drugs implicated in poisoning deaths among people who were homeless at the time of death, 2019 to 2021	24
Table 9 Demographics and characteristics of deaths among people who were homeless (housed) in 2021 (NDRDI)	28
Table 10 Deaths among people who were homeless by HSE health regions of incident, 2019 to 2021	29

Introduction

- In this bulletin, data on deaths among people who were homeless and who died in 2021 are presented, along with a summary of deaths that occurred from 2019 to 2021¹. The data were collected using the **National Drug-Related Deaths Index (NDRDI)** methodology.
- The NDRDI is managed by the National Health Information Systems (NHIS) Unit in the **Health Research Board (HRB)** and is funded by the Departments of Health and Justice.

Background

- The NDRDI was established in 2005 in response to the National Drugs Strategy 2001-2008²; specifically, Action 67 – ‘to develop an accurate mechanism for recording the number of drug-related deaths in Ireland’. The NDRDI enables Ireland to meet its mandatory reporting requirements to the European Union and United Nations, as well as being used widely to provide evidence for national policy and planning.
- Using the NDRDI methodology, data on **all deaths in people who were homeless at the time of death** are collected, even if they do not meet the standard NDRDI inclusion criteria. This is to better understand and prevent premature deaths among people who are homeless.
- As the data come from closed coronial files, annual data are routinely updated when new information becomes available. Therefore, data in this report supersede all data previously published.

NDRDI Data Sources

- Data on deaths in people known to be homeless are extracted from closed coronial files³ nationwide by NDRDI medical researchers.
- The NDRDI validates these data with the Dublin Region Homeless Executive through its Pathway Accommodation and Support System (PASS).
- Statistics collected by the Central Statistics Office (CSO) are used in calculating mortality rates.

NDRDI data collection for deaths among people who were homeless

Deaths are broadly categorised in two ways:

- deaths due to **poisoning** by drugs and/or alcohol. A poisoning death is a death directly due to the toxic effects of one or more substances on the body, as indicated by a coroner on the coroner's certificate.
- **non-poisoning** deaths, which are deaths due to all other causes, either medical or traumatic, irrespective of whether drugs or alcohol were or were not directly implicated in the death.

Defining homelessness

The deceased were considered as **homeless** if they were living in any of the following circumstances at the time of death:

1. Homeless – without accommodation, e.g., people sleeping rough
2. Homeless – temporary or crisis accommodation, e.g., hostels
3. Homeless – severely substandard or highly insecure accommodation
4. Homeless – unknown (no further details were available)

These criteria reflect international classifications ^{4,5}, which are adapted to reflect the types of accommodation available to people who are homeless in Ireland (Appendix A).

Inclusion criteria

- All people categorised as homeless at time of death in 2019 to 2021, and whose deaths were reported to the coroner, are included in the figures presented in this bulletin.

Summary 2021

Number of deaths and type of accommodation

- There were **128 deaths** among people known to be **homeless at the time of death** in 2021. This equates to eleven deaths per month in 2021.
- Of the 128 deaths, 83 (64.8%) were among people who were homeless and in **temporary or crisis accommodation**, and 30 (23.4%) were among people who were **sleeping rough**.

Demographics

- Most (80.5%) deaths occurred among **males**.
- The median age of those who died was **43 years** (44 years for males and 37 years for females).
- Most (63.3%) of the deceased lived in **Dublin (city and county)**.

Substance use

- Most of the deceased (85.9%) had a **history of substance use**. Of those with a history of substance use, 53.6% were known to have **alcohol dependence**.
- **Heroin** (62.8%) was the most common drug used by those with a **history of drug use**, followed by **cocaine** (55.1%), and **benzodiazepines** (29.5%).
- Of the 51 people who used drugs only (excluding alcohol), the majority (82.4%) had a recorded history of **polydrug use**.
- One in five (21.1%) of the deceased had **ever injected** drugs, with 37.0% of these injecting at the time of death.

Co-morbidities

- A history of **Hepatitis C diagnosis** was recorded for 15.6% of the deceased.
- A diagnosis of **epilepsy** was recorded for 7.8% of the deceased.
- **Mental health issues** were known to have been present for 33.6% of those who died.
- Forty-eight of the deceased (37.5%) were known to **have ever accessed substance use treatment**.
- One in four (31, 24.2%) of the deceased were receiving **opioid agonist treatment (OAT)** in the form of methadone substitution at the time of death.

Place of death

- Most deaths (60.9%) occurred in Health Service Executive (HSE) **health regions** Dublin and North East and Dublin and Midlands.
- The county of incident was **Dublin (city or county)** for 58.6% of deaths.
- Specific **accommodation for people who are homeless** was the most common location of the deaths (43.8%), with a further 30.5% occurring in a **public place or derelict building**.

Poisoning deaths

- There were **61 poisoning deaths**: 48 (78.7%) were among males and 13 (21.3%) were among females. The median age of those who died by poisoning was 41 years.
- The most common drug groups implicated in poisoning deaths were **opioids** (82.0%), **benzodiazepines** (68.9%), **alcohol** (37.7%), and **cocaine** (36.1%).
- **Methadone** was the most common drug implicated in poisoning deaths (52.5%); it was implicated in a higher proportion of poisoning deaths among females (84.6%) than among males (43.8%).
- **Polysubstance poisoning** accounted for most poisoning deaths among males (85.4%) and all poisoning deaths among females (100.0%).

Non-poisoning deaths

- There were **67 non-poisoning deaths**; 55 (82.1%) were among males, 12 (17.9%) were among females. The median age those who died was 48 years.
- **Medical causes** of death (mostly cardiovascular conditions) were recorded for 70.1% of non-poisoning deaths.
- **Traumatic causes** of death were recorded for 29.9% of non-poisoning deaths. Hanging (10.4%) was the most common cause of traumatic death.

Deaths among people with no recorded history of substance use

- There were 18 (14.1%) deaths among people who were homeless and who had **no recorded history of drug or alcohol use**. The median age of this group was 56.5 years.
- Most of these deaths were non-poisoning deaths, with 2 in 3 (12, 70.6%) being due to medical causes, mostly cardiovascular conditions.

Summary 2019 to 2021

- For the years 2019 to 2021, **347 deaths** among people who were homeless were recorded. Over the period, the number of deaths increased by 36.2% (Table 7); this increase was highest between 2019 and 2020 (33.0%). These figures occur in the context of the COVID-19 pandemic and related public health measures which began in March 2020. Interpretation of the annual figures and changes between years must be considered in this context.
- The number of people residing in **temporary or crisis accommodation** at the time of death increased from 46 (48.9%) in 2019 to 83 (64.8%) in 2021.
- **Males** were in the majority across all three years. Deaths among **females** peaked in 2020, mainly due to poisoning deaths.
- The **median age** of death increased from 39.5 years in 2019 to 43 years in 2021.
- Over the period most of the deceased were homeless in **Dublin (city and county)**. The number increased from 54 (57.4%) in 2019 to 81 (63.3%) in 2021.
- Most of the deceased (89.3%) had **a history of substance use**.
- The proportion of people with **no recorded history of substance use** increased from 8.5% in 2019 to 14.1% 2021.
- Over the three years, the majority of deaths were **poisonings**. However, in 2021 non-poisonings deaths outnumbered poisoning deaths.
- The most common poisoning **drug group** in each year was **opioids**, followed by **benzodiazepines**.
- **Methadone** was the most common drug implicated each year.
- The proportion of poisonings that had **polysubstances** implicated increased continuously over the period from 75.5% in 2019 to 88.5% in 2021.

National overview for 2021

Number of deaths in 2021

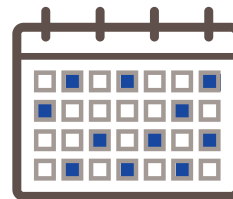
A total of 22,970 deaths were reported to the coroners in 2021 ⁶.

- Among these, **128 deaths** were in people known to be **homeless at the time of death**. Over half (52.3%) of these deaths were non-poisoning deaths (Table 1).
 - This equates to eleven deaths per month in this population in 2021.
-

Number of deaths

128
deaths

among people who
were **homeless** in 2021



11 deaths
per month

Deaths not meeting the homeless inclusion criteria

- An additional **27 deaths** occurred in 2021 in people who were **homeless but had been housed** (excluding Housing First⁷). As these deaths are **not classified as homeless**, they are not included in the figures reported in this bulletin, but are summarised in Appendix B.

Type of accommodation

- Of the 128 deaths in 2021, 83 (64.8%) were among people who were homeless and in **temporary or crisis accommodation** (Table 1). Of these, 38 (45.8%) were poisoning deaths.
- There were 30 deaths among people who were known to be **sleeping rough** at the time of death. Almost all of these deaths were among males. Over half of the deaths among those who were sleeping rough were poisoning deaths.

Table 1 Total deaths among people who were homeless by category of homelessness and type of death, 2021

	Sleeping rough	Temporary or crisis accommodation	Other categories of homelessness ^a	Total
Deaths, No. (%)	30 (23.4)	83 (64.9)	15 (11.7)	128 (100.0)
Poisoning deaths, No. (%)	16 (12.5)	38 (29.7)	7 (5.5)	61 (47.7)
Non-poisoning deaths, No. (%)	14 (10.9)	45 (35.2)	8 (6.2)	67 (52.3)

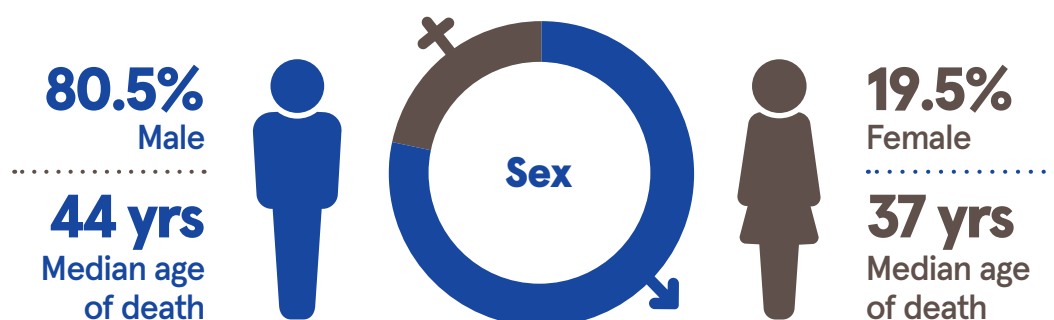
*Percentages may not add up to 100 due to rounding

^a Also includes substandard or insecure accommodation, and unknown types of homelessness

Demographics

- **Males** (103, 80.5%) accounted for the majority of deaths among people who were homeless and who died in 2021 (Table 2). **Females** (25, 19.5%) accounted for 1 in 5 deaths.
- The **median age** of death among people who were homeless was **43 years** (44 years for males and 37 years for females).
- Among males, half (50.5%) of deaths were aged **under 45 years**, while among females, 2 in 3 (64.0%) deaths were in this age group.
- In 2021, 93.0% of deaths among those who were homeless at the time of death occurred in the **under 60 years** age category. This differs from the general population, where 12.6% of deaths occur in this age cohort ⁸, illustrating the risk of premature mortality in those who are experiencing homelessness.

Breakdown by sex



- The majority (70.3%) of the deceased were **single**, with a further 12.5% **separated or divorced** at the time of death. Overall, 81.6% of males and 88.0% of females were single, separated, or divorced.
- Thirteen people (10.2%) were known to have a **history of imprisonment**.
- Where recorded, 27 of the deceased were **born outside of Ireland**, mainly in Eastern European countries.

Substance use

- The majority of people who were homeless at the time of death (110, 85.9%) had a **lifetime history of substance use** (where there was evidence recorded in the coronial file that the individual had a history of drug use, problem alcohol use, or alcohol dependence) (Table 2).
- Of the 110 people with a lifetime history of substance use, 53.6% (59) were known to have **alcohol dependence**.
- The most common drug (excluding alcohol) used by the 78 people with a **lifetime history of drug use** was **heroin** (62.8%), followed by **cocaine** (55.1%), and **benzodiazepines** (29.5%).
- For **males** with a history of drug use (excluding alcohol only), 61.7% used **heroin** and 53.3% used **cocaine**, while **benzodiazepines** and **methadone** were each used by 23.3%.
- For **females** with a history of drug use (excluding alcohol only), **heroin** (66.7%) was also the most common drug, followed by **cocaine** (61.1%), and **benzodiazepines** (50.0%). A history of **methadone** use was recorded for 27.8% of females.
- Of the 51 (39.8%) people who used **drugs only** (excluding alcohol), the majority (82.4%) had a recorded history of **polydrug use**.

Substance use



Injecting

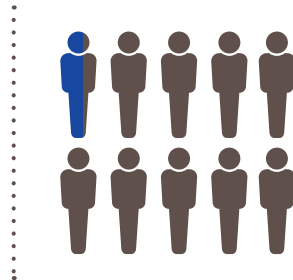
- More than 1 in 5 (21.1%) people who were homeless and died in 2021 had a known **history of injecting** drugs.
- Among **males**, 17 (16.5%) had a **lifetime history of injecting drug use**, while 8 (7.8%) **injecting at the time of death**.
- Ten (40.0%) females had a **lifetime history of injecting drug use**, with a small number injecting at the time of death.

Co-morbidities

Blood borne viruses

- Of those who were homeless at the time of death in 2021, 21 (16.4%) had a history of a **blood borne virus**, mostly hepatitis C (15.6%) (Table 2).
 - A diagnosis of **Hepatitis C** (includes treated and cleared) was present for a higher proportion of females (32.0%) than males (11.7%).
 - A small number of those who died also had a diagnosis of **HIV**, the majority of whom were females.
 - A high proportion of those who died had a diagnosis of **epilepsy** (7.8%), relative to the general population (0.9%) ⁹.
 - Half of those with a diagnosis of epilepsy were known to also have **alcohol dependence**.
-

Epilepsy prevalence

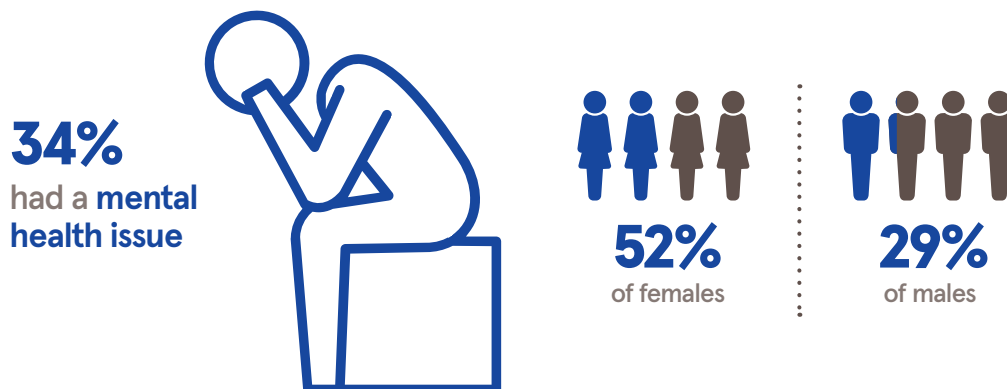


Epilepsy present in
8% of deaths

Mental health

- Of the deceased, 1 in 3 (43, 33.6%) had a known history of **mental health issues** (52.0% of females and 29.1% of males) (Table 2).
- A medical professional was the **source of diagnosis** for the majority (83.7%) of those with a history of mental health issues. Depositions from other parties as part of the coronial file, was the source of information on mental health issues for the remainder.
- Of those with a history of mental health issues, 79.1% were known to be **in contact with medical services**, including substance use treatment services.
- All females with a recorded history of mental health issues were known to be in contact with medical services, compared to 70.0% of males.
- The most common drug groups present on post-mortem toxicology (but not necessarily implicated in their death) in this group were **benzodiazepines**, **opioids**, and **antidepressants**.
- **Methadone** was present on toxicology in 61.5% of females and 40.0% of males in this group.

Mental health

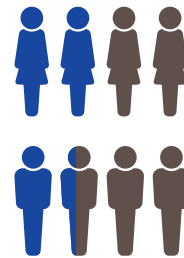


Treatment services

- Forty-eight (37.5%) people were known to have accessed **treatment for substance use**. A higher proportion of females (52.0%) than males (34.0%) had accessed treatment (Table 2).
- More than 1 in 4 (28.1%) of the deceased were receiving substance use treatment at the time of death (44.0% of females and 24.3% of males). The main treatment was **opioid agonist treatment** (OAT), mostly methadone substitution.

Substance use treatment

38%
in receipt
of substance
use treatment



52%
of females

34%
of males

Table 2 Demographics and characteristics of the deceased by sex, 2021

	Male	Female	Total*
Deaths, No. (%)	103 (80.5)	25 (19.5)	128 (100.0)
Demographics, No. (%)			
Age, median (range ^a)	44 (26.2 – 60.0)	37 (24.8 – 76.8)	43 (26.5 – 60.6)
Age, years			
15–44	52 (50.5)	16 (64.0)	68 (53.1)
45–64	49 (47.6)	7 (28.0)	56 (43.8)
Born outside Republic of Ireland ^b	~	~	27 (21.1)
Single	73 (70.9)	17 (68.0)	90 (70.3)
Not in employment ^c	60 (58.3)	13 (52.0)	73 (57.1)
History of imprisonment	~	~	13 (10.2)
Dublin (city and county) (place of dwelling)	63 (61.2)	18 (72.0)	81 (63.3)
Cause of death, No. (%)			
Poisoning	48 (46.6)	13 (52.0)	61 (47.7)
Non-poisoning	55 (53.4)	12 (48.0)	67 (52.3)
Co-morbidities, No. (%)			
Substance use history			
<i>Drug use only</i>	41 (39.8)	10 (40.0)	51 (39.8)
<i>Drug and alcohol use ^d</i>	19 (18.4)	8 (32.0)	27 (21.1)
<i>Alcohol use only ^d</i>	~	~	32 (25.0)
Ever injected	17 (16.5)	10 (40.0)	27 (21.1)
Injecting at time of death	~	~	10 (7.8)
Blood borne virus	13 (12.7)	8 (32.0)	21 (16.4)
Epilepsy	~	~	10 (7.8)
History of mental health issues ^e	30 (29.1)	13 (52.0)	43 (33.6)
Treatment history, No. (%)			
Ever treated for substance use	35 (34.0)	13 (52.0)	48 (37.5)
Current substance use treatment ^f	25 (24.3)	11 (44.0)	36 (28.1)
Opioid agonist treatment (OAT)	20 (19.4)	11 (44.0)	31 (24.2)
Prescribed medications	45 (43.7)	16 (64.0)	61 (47.7)

*Percentages may not add up to 100 due to rounding

a Age range is 5th percentile to 95th percentile (90% of cases are included within this range)

b Country of birth was not recorded for 86 people; due to small numbers, individual countries cannot be presented

c Where known. Refers to those unemployed, retired, or unable to work due to disability

d Includes problem alcohol use and alcohol dependency

e Ascertained through depositions from family members or from medical correspondence contained in the coronial file

f Current refers to within a month preceding death

~ Values suppressed due to small numbers

Characteristics of deaths

Place of death

- Most deaths (66.4%) among people who were homeless occurred in **Leinster** (77.0% of poisoning deaths and 56.7% of non-poisoning deaths).
- The majority of incidents (58.6%) occurred in **Dublin (city and county)**, with 8.6% occurring in **Cork (city and county)**. The small numbers of deaths per county outside of Dublin and Cork means that no county breakdown can be provided.
- Deaths by **PASS regions** are provided in Table 3, with deaths among those located in the Mid-West, West and North-West, and Mid-East, North-East and Midlands reported together due to small numbers.

Table 3 PASS region of deaths among people who were homeless, 2021

PASS regions	No. of deaths, (%) [*]
Dublin	81 (63.3)
South-East	7 (5.5)
South-West	16 (12.5)
Mid-West, West, and North-West ^a	13 (10.2)
Mid-East, North-East, and Midlands ^a	11 (8.6)
Total	128 (100.0)

^{*} Percentages may not add up to 100 due to rounding

^a Areas combined because of small numbers

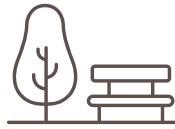
- The place of incident was specific **accommodation for people who are homeless** for 43.8% of deaths. A greater proportion of deaths among females (60.0%) than among males (39.8%) occurred in this type of accommodation.
- A further 39 (30.5%) incidents occurred in a **public place** such as a street, building, or car park, or in a derelict building. For 33.0% of males and 20.0% of females, the incident occurred in a public place or in a derelict building.
- Two in three (66.4%) people were **alone at the time of death**.
- The highest number and proportion of deaths (44, 34.4%) occurred in the first quarter of 2021, with March (18, 14.1%) having the highest number and proportion of deaths of any single month in 2021.

Place of death

59%
in Dublin

9%
in Cork

33%
Rest of Ireland



31%
occurred in a **public**
place, public building,
or derelict building



44%
died in
emergency
accommodation

*Percentages do not add up to 100 due to rounding

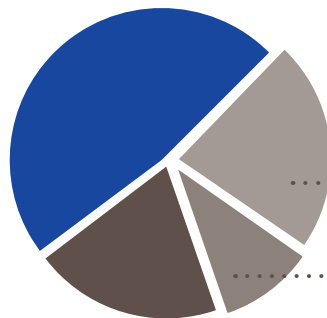
Cause of death

- In 2021, there were 61 (47.7%) poisoning deaths and 67 (52.3%) non-poisoning deaths.

Cause of death

48%
Poisoning

52%
Non-poisoning



Of non-poisoning deaths:

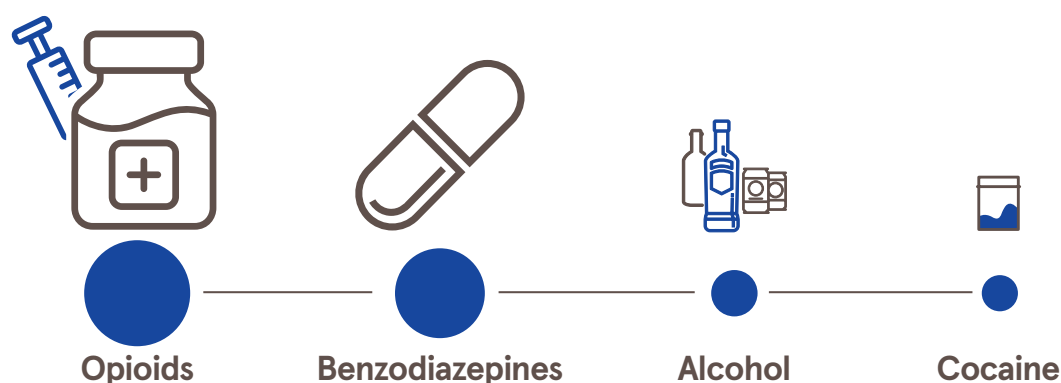
21% deaths due to
cardiovascular conditions

10% deaths due
to hanging

Poisoning deaths

- In 2021, there were 61 **poisoning deaths** among people who were homeless, 48 (78.7%) among males and 13 (21.3%) among females (Table 4).
- The **median age** of poisoning deaths was **41 years** (41 years for males and 37 years for females).

Most common drugs implicated in poisoning deaths



- The most common drug groups implicated in poisoning deaths were **opioids** (82.0%), **benzodiazepines** (68.9%), **alcohol** (37.7%), and **cocaine** (36.1%) (Table 4).
- Of the 61 poisoning deaths, 50 (82.0%) had **at least one opioid** implicated, with more than 1 in 5 (21.3%) poisoning deaths having **two or more opioid drugs** implicated.
- Methadone** (52.5%) was the most common drug implicated in poisoning deaths; it was implicated in a higher proportion of poisoning deaths among females (84.6%) than among males (43.8%).
- Benzodiazepines** were implicated in 68.9% of poisoning deaths, with almost 3 in 10 (27.9%) poisoning deaths involving **two or more benzodiazepine drugs**.
- Alprazolam** was implicated in 27 (44.3%) poisoning deaths. While most (77.8%) of these deaths were among males, the proportions were similar among males and females at 43.8% and 46.2% respectively.
- Pregabalin** was implicated in almost 1 in 5 (19.7%) poisoning deaths, with the majority occurring among males.
- Almost 1 in 3 (31.1%) of those who died by poisoning had a known history of **previous overdose**.
- Most (88.5%) poisoning deaths were **polysubstance poisonings** (deaths due to the toxic effects of more than one substance). These accounted for all poisoning deaths in females and 85.4% poisoning deaths in males.

Table 4 Demographics and characteristics of poisoning deaths by sex, 2021

	Male	Female	Total
Poisoning deaths, No. (%)	48 (78.7)	13 (21.3)	61 (100.0)
Demographics, No. (%)			
Age, median (range ^a)	41 (23.9 – 58.1)	37 (23.0 – n/a)	41 (23.2 – 57.0)
Not in employment ^b	34 (70.8)	7 (53.8)	41 (67.2)
Known to have children	~	~	12 (19.7)
History of imprisonment ^c	~	~	9 (14.8)
Dublin (city and county) (place of dwelling)	28 (58.3)	12 (92.3)	40 (65.6)
Treatment history, No. (%)			
Ever treated for substance use	25 (52.1)	8 (61.5)	33 (54.1)
Current substance use treatment ^d	18 (37.5)	7 (53.8)	25 (41.0)
History of previous overdose	~	~	19 (31.1)
Circumstance of death, No. (%)			
Ever injected	13 (27.1)	7 (53.8)	20 (32.8)
Injecting at time of death	~	~	9 (14.8)
Incident occurred in accommodation for people experiencing homelessness	26 (54.2)	9 (69.2)	35 (57.4)
Incident occurred in public place	~	~	13 (21.3)
Not alone at the time of death	~	~	18 (29.5)
More than one drug implicated in death	41 (85.4)	13 (100.0)	54 (88.5)
Drugs implicated in death, No. ^e			
Opioids	51	15	66
<i>Methadone</i>	21	11	32
<i>Heroin</i>	~	~	21
Benzodiazepines	48	14	62
<i>Alprazolam</i>	21	6	27
<i>Diazepam</i>	~	~	21
<i>Other benzodiazepines</i>	~	~	14
Alcohol	~	~	23
Cocaine	~	~	22
Antidepressants	~	~	21
Pregabalin	~	~	12
Z-drugs	~	~	12
Other illicit drugs ^f	~	~	16
Other medications ^g	~	~	14

*Percentages may not add up to 100 due to rounding
a Age range is 5th percentile to 95th percentile (90% of cases are included within this range)
b Where known. Refers to those unemployed, retired, or unable to work due to disability
c Data have not been validated with the prison services and therefore likely to be an underestimate
d Current refers to within a month preceding death
e Total number of drugs does not equate to the number of individual deaths, as more than one drug may be implicated in a death
f For example, 3,4-Methylenedioxymethamphetamine (MDMA), amphetamines, and novel psychoactive substances
g For example, antipsychotics and non-opioid analgesia
~ Values suppressed due to small numbers

Opioid poisoning deaths

- **Opioids** were implicated in 50 poisoning deaths (Table 5). Methadone was implicated in 32 deaths and heroin was implicated in 21 deaths.
- Seven different opioid-type drugs were implicated across the 50 opioid-related poisoning deaths.
- Almost 2 in 3 (60.0%) of the deceased in this group had **previously received substance use treatment** and 23 people were **in treatment** at the time of death.
- One in three (32.0%) of the deceased had a history of **previous overdose**.
- Of the 19 people known to have a history of injecting, 9 were **injecting at the time of death**.
- Six in ten (60.0%) poisoning deaths with opioids implicated occurred in **accommodation for people experiencing homelessness**. This included 75.0% of opioid poisonings among females and 55.3% of opioid poisonings among males.
- One in five (20.0%) opioid poisonings occurred in a **public place**, and all of these were among males.
- Almost 7 in 10 (68.0%) people were **alone at the time of the incident** that led to their death.

Table 5 Characteristics of opioid poisoning deaths by sex, 2021

	Male	Female	Total*
Opioid poisoning deaths, No. (%)	38 (76.0)	12 (24.0)	50 (100.0)
Ever treated for substance use	22 (57.9)	8 (66.7)	30 (60.0)
Current substance use treatment ^a	16 (42.1)	7 (58.3)	23 (46.0)
History of previous overdose	~	~	16 (32.0)
Ever injected	12 (31.6)	7 (58.3)	19 (38.0)
Injecting at time of death	~	~	9 (18.0)
Incident occurred in public place	~	~	10 (20.0)
Incident occurred in accommodation for people experiencing homelessness	21 (55.3)	9 (75.0)	30 (60.0)
Not alone at time of death	~	~	14 (28.0)
Polysubstance use implicated in death	37 (97.4)	12 (100.0)	49 (98.0)

*Percentages may not add up to 100 due to rounding

^a Current refers to within a month preceding death

~ Values suppressed due to small numbers

Non-poisoning deaths

- There were **67 non-poisoning deaths** among people who were homeless at the time of death, 55 (82.1%) among males and 12 (17.9%) among females (Table 6).
- The **median age** of non-poisoning deaths was **48 years** (48 years for males and 37.5 years for females).
- Seven in ten (70.1%) non-poisoning deaths were classified as **medical**, with 3 in 10 (29.9%) classified as **traumatic**.
- **Cardiovascular conditions** accounted for 1 in 5 (20.9%) of all non-poisoning deaths and were the most common cause of non-poisoning deaths overall.
- The median age of those who died due to cardiovascular conditions was 55 years.
- Most **deaths due to cardiovascular conditions** occurred among males (85.7%), two thirds of whom had a known history of drug or alcohol use.
- All of those who died due to cardiovascular conditions and who had a substance use history had a **positive toxicology** for either alcohol and/or illicit drugs at the time of death.
- The main drugs on post-mortem toxicology among those who died of cardiovascular conditions were **opioids**, then **benzodiazepines**, followed by **alcohol, cocaine, and other medications** (in the same proportions).
- The second most common non-poisoning cause of death was **hanging**. The majority of hangings occurred among males (85.7%). Deaths due to hanging were most often in a public place or derelict building (57.1%).
- All of those who died by hanging had a positive post-mortem toxicology, and nearly all had a history of substance use.

Table 6 Demographics and characteristics of non-poisoning deaths, 2021

	Total*
Non-poisoning deaths, No. (%)	67 (100.0)
Male	55 (82.1)
Female	12 (17.9)
Demographics, No. (%)	
Age, median (range ^a)	48 (29.0 – 66.2)
<i>Male</i>	48 (28.4 – 63.4)
<i>Female</i>	37.5 (29.0 – n/a)
Not in employment ^b	32 (47.8)
<i>Male</i>	26 (47.3)
<i>Female</i>	6 (50.0)
Known to have children <18 years	~
Dublin (city and county) (place of dwelling)	41 (61.2)
Circumstance of death, No. (%)	
Incident occurred in public place	26 (38.8)
Incident occurred in accommodation for people experiencing homelessness	21 (31.3)
Not alone at the time of death	17 (25.4)
Substance use history, No. (%)	
Alcohol use ^c	38 (56.7)
Ever injected	7 (10.4)
Other drug use	24 (35.8)
<i>Heroin</i>	7 (10.4)
<i>Cocaine (including crack cocaine)</i>	9 (13.4)
<i>Cannabis</i>	6 (9.0)
<i>Methadone</i>	~
<i>Benzodiazepines</i>	~
Cause of death, No. (%)	
Trauma	20 (29.9)
Hanging	7 (10.4)
Other external trauma ^d	13 (19.4)
Medical	47 (70.1)
Cardiovascular	14 (20.9)
Alcohol-related	7 (10.5)
Other medical ^e or unknown causes	26 (38.8)

*Percentages may not add up to 100 due to rounding

a Age range is 5th percentile to 95th percentile (90% of cases are included within this range)

b Where known. Refers to those unemployed, retired, or unable to work due to disability

c Includes problem alcohol use and alcohol dependency

d Includes assault, stabbing, fall, and drowning

e For example, cerebral event, infections, pancreatic disorder, liver disease, and cancer

~ Values suppressed due to small numbers

Deaths among people with no recorded history of substance use

- There were 18 (14.1%) deaths among people who were homeless and who had **no recorded history of substance use** (neither drugs nor alcohol). The majority were males.
- The **median age** in this group was **56.5 years**, with eight of the deceased aged 60 years or over.
- The deceased were mostly (57.5%) in **temporary or crisis accommodation**.
- Most of these deaths were **non-poisoning deaths**, most commonly due to cardiorespiratory disease (35.3%).

Deaths among People who were Homeless at the Time of Death in Ireland, 2019 to 2021

Number of deaths among people who were homeless in 2019 to 2021

- For the period 2019 to 2021, **347 deaths** among people who were homeless were recorded. Over the period, the number of deaths increased by 36.2% (Table 7); this increase was highest between 2019 and 2020 (33.0%). These figures occur in the context of the COVID-19 pandemic and related public health measures which began in March 2020. Interpretation of the annual figures and changes between years must be considered in this context.

Type of accommodation

- Over the period, those who died were mostly in **temporary or crisis accommodation** (210, 60.5%). The number increased from 46 (48.9%) in 2019 to 83 (64.8%) in 2021 (Table 7).
- **Sleeping rough** was the second most common accommodation type over the period (78, 22.5%). The proportion sleeping rough remained consistent over the period.

Demographics

- Deaths among **males** were in the majority throughout the period (Table 7). Deaths among females peaked in 2020, mainly due to poisoning deaths, which made up 71.4% of deaths among females that year.
- The **median age** of death increased over the three years, from 39.5 years in 2019 to 43 years in 2021.
- The majority of the deceased were homeless in **Dublin (city and county)** over the period, followed by **Cork (city and county)**. The figures for Dublin increased from 54 (57.4%) in 2019 to 81 (63.3%) in 2021. The figures for Cork decreased from 20 (16.0%) in 2020 to 13 (10.2%) in 2021.

Substance use

- The majority of people (89.3%) had a recorded history of **substance use** over the period (Table 7).
- One in four (85, 24.5%) of the deceased had a **history of injecting** over the three years. However, the proportion decreased to 21.1% in 2021, from 26.6% in 2019.
- The number of people **injecting at the time of death** (18) was highest in 2020, where over half (54.5%) of those with a history of injecting were injecting at the time of death.
- In 2021, 18 (14.1%) people had **no history of substance use**, the highest number over the period.

Mental health

- Over the period, **mental health issues** were common among the deceased. The number of people with a recorded history of mental health issues was highest in 2020, at nearly 1 in 2 (59, 47.2%).

Table 7 Demographics and characteristics of deaths among people who were homeless at the time of death, 2019 to 2021

	2019	2020	2021	Total
Number of deaths, No.	94	125	128	347
Demographics, No. (%)				
Male	76 (80.9)	97 (77.6)	103 (80.5)	276 (79.5)
Female	18 (19.1)	28 (22.4)	25 (19.5)	71 (20.5)
Age years, median (range ^a)	39.5 (24.8 – 59.3)	41 (22.3 – 62.7)	43 (26.5 – 60.6)	41 (24.4 – 60.6)
Dublin (city and county) (place of dwelling)	54 (57.4)	71 (56.8)	81 (63.3)	206 (59.4)
Category of homelessness, No. (%)				
Temporary or crisis accommodation	46 (48.9)	81 (64.8)	83 (64.8)	210 (60.5)
Sleeping rough	21 (22.3)	27 (21.6)	30 (23.4)	78 (22.5)
Other categories of homelessness ^b	27 (28.7)	17 (13.6)	15 (11.7)	59 (17.0)
Circumstances of death, No. (%)				
Incident occurred in public place	35 (37.2)	47 (37.6)	39 (30.5)	121 (34.9)
Incident occurred in accommodation for people experiencing homelessness	28 (29.8)	58 (46.4)	56 (43.8)	142 (40.9)
Cause of death, No. (%)				
Poisoning	49 (52.1)	72 (57.6)	61 (47.7)	182 (52.4)
Male	40 (81.6)	52 (72.2)	48 (78.7)	140 (76.9)
Female	9 (18.4)	20 (27.8)	13 (21.3)	42 (23.1)
Polydrug poisoning	37 (75.5)	58 (80.6)	54 (88.5)	149 (81.9)
Non-poisoning	45 (47.9)	53 (42.4)	67 (52.3)	165 (47.6)
Male	36 (80.0)	45 (84.9)	55 (82.1)	136 (82.4)
Female	9 (20.0)	8 (15.1)	12 (17.9)	29 (17.6)
Trauma	24 (53.3)	31 (58.5)	20 (29.9)	75 (45.5)
Medical	21 (46.7)	22 (41.5)	47 (70.1)	90 (54.5)
Substance use, No. (%)				
History of substance use	86 (91.5)	114 (91.2)	110 (85.9)	310 (89.3)
Drugs only	42 (44.7)	60 (48.0)	51 (39.8)	153 (44.1)
Alcohol use only ^c	22 (23.4)	20 (16.0)	32 (25.0)	74 (21.3)
Alcohol and drug use ^c	22 (23.4)	34 (27.2)	27 (21.1)	83 (23.9)
No recorded history of substance use	8 (8.5)	11 (8.8)	18 (14.1)	37 (10.7)
Ever injected drugs	25 (26.6)	33 (26.4)	27 (21.1)	85 (24.5)
Injecting at the time of death	12 (12.8)	18 (14.4)	10 (7.8)	40 (11.5)
Co-morbidities, No. (%)				
Blood borne viruses	18 (19.1)	19 (15.2)	21 (16.4)	58 (16.7)
History of mental health issues ^d	34 (36.2)	59 (47.2)	43 (33.6)	136 (39.2)
Treatment history, No. (%)				
Ever treated for substance use	39 (41.5)	55 (44.0)	48 (37.5)	142 (40.9)
Current substance use treatment ^e	27 (28.7)	31 (24.8)	36 (28.1)	94 (27.1)
Opioid agonist treatment (OAT)	25 (27.7)	26 (20.8)	31 (24.2)	82 (23.6)
Prescribed medications	37 (39.4)	58 (46.4)	61 (47.7)	156 (45.0)

a Age range is 5th percentile to 95th percentile (90% of cases are included within this range)

b Also includes substandard or insecure accommodation, and unknown types of homelessness

c Includes problem alcohol use and alcohol dependency

d Ascertained through depositions from family members or from medical correspondence contained in the coronial file

e Current refers to within a month preceding death

Characteristics of the deaths

- Over the period 2019 to 2021, most deaths (206, 59.4%) occurred in **Dublin (city and county)**.
- Deaths in **health regions** Dublin and North East, and Dublin and Midlands predominated over the period, together accounting for 6 in 10 deaths each year (range from 55.7% to 63.1%) (Appendix C).
- From 2019 to 2021, most incidents occurred either in **specific accommodation for people who were homeless** (142, 40.9%) or in a **public place or building** (116, 33.4%) (Table 7).
- The proportion of people who were **alone at the time of death** increased from 44.7% in 2019 to 66.4% in 2021.

Time of year

- In 2019 and 2021, the largest proportion of deaths occurred in the first quarter of the year, compared to the third quarter in 2020.
- March was the most common month of death in 2019 (13.8%) and 2021 (14.1%), whereas in 2020 it was July (17.6%).

Type of death

- Over the period, **poisonings** accounted for 52.4% (182) of all deaths among people who were homeless, while **non-poisonings** accounted for 47.6% (165) of deaths.
- Poisonings accounted for the majority of deaths in all years except 2021 (Table 7).

Poisoning deaths

- Poisoning deaths among females were notably higher in 2020 (n=20), compared to 2019 (n=9) and 2021 (n=13). This may be a phenomenon of the COVID-19 pandemic.
- Over the period, the majority of poisoning deaths were polysubstance poisonings (149, 81.9%).

Drugs implicated

- The most common **drug group** implicated in poisoning deaths each year was **opioids**; this was followed by **benzodiazepines**.
- The third most common **drug group** was **Z drugs** in 2019, **cocaine** in 2020, and **alcohol** in 2021.
- **Methadone** was the most common **drug** implicated in all years; **methadone** was implicated in over half of poisoning deaths each year from 2019 to 2021 (range 50.0% to 53.1%).
- The proportion of **heroin poisonings** decreased from 38.8% in 2019 to 34.4% in 2021.
- The proportion of **alcohol (alone or as part of polysubstance) poisonings** (37.7%) was highest in 2021.
- **Alcohol only poisoning**, where no other drug is implicated, decreased by 57.4% from 14 in 2020 to 6 in 2021.

Polysubstance poisonings

- The proportion of deaths that were **polysubstance poisonings** increased over the period from 75.5% in 2019 to 88.5% in 2021.
- The number of individuals with **more than five drugs** implicated in their death increased from 16.2% in 2019 to 24.6% in 2021.

Table 8 Drugs implicated in poisoning deaths among people who were homeless at the time of death, 2019 to 2021

Drugs implicated in death, No. ^a	Year of death			
	2019	2020	2021	Total
Opioids	48	72	66	186
<i>Methadone</i>	26	36	32	94
<i>Heroin</i>	19	26	21	66
Benzodiazepines	37	74	62	173
<i>Alprazolam</i>	16	36	27	79
<i>Diazepam</i>	16	29	21	66
<i>Other benzodiazepines</i>	~	~	~	28
Alcohol	16	18	23	57
Cocaine	12	30	22	64
Antidepressants	13	17	21	51
Antiepileptics/gabapentinoids	~	~	~	35
<i>Pregabalin</i>	~	~	~	33
Z-drugs	18	11	12	41
Other illicit drugs ^b	9	10	16	35
Other medications ^c	12	19	14	45

^a Total number of drugs does not equate to the number of individual deaths, as more than one drug may be implicated in a death

^b For example, 3,4-Methylenedioxymethamphetamine (MDMA), amphetamines, novel psychoactive substances, and volatile inhalants

^c For example, antipsychotics and non-opioid analgesia

~ Values suppressed due to small numbers

Non-poisoning deaths

- While most **non-poisoning deaths** in 2019 and 2020 were due to traumatic causes (mainly hanging), the non-poisoning deaths in 2021 were more often due to medical conditions or causes (mostly cardiovascular conditions).

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Notes

1. To cite this publication: Riordan F, Gopalakrishnan A, Kelleher C and Lyons S (2025) *Deaths among people who were homeless at time of death in Ireland, 2021*. HRB Statlink Series 22. Dublin: Health Research Board. Available at <https://www.drugsandalcohol.ie/42963/>
2. Department of Tourism, Sport and Recreation, Ireland (2001) *Building on Experience: National Drugs Strategy 2001 – 2008*. Dublin: Stationery Office.
3. Information in coronial files is not originally generated for research purposes and so the data are not complete for some variables (e.g., country of birth, ethnicity, and history of imprisonment). For some variables, it may be that positive instances are indicated in the files (e.g., the deceased was once in prison), while the opposite is less likely to be stated (i.e., the deceased was never imprisoned). Where relevant in this publication, variables with incomplete data are highlighted with language such as “where known” and “at least”.
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5. Edgar B (2012) The ETHOS definition and classification of homelessness and housing exclusion. *European Journal of Homelessness*, 6(2), 219–25.
6. Department of Justice, Ireland (2022) *Coroner’s annual returns 2021*. Last updated 9 May 2024. Available at <https://www.gov.ie/en/publication/393c3-coroners-annual-returns-2021/>
7. Starting with deaths in 2023, the HRB is collating data on deaths among tenants of the Housing First initiative, in collaboration with the HSE, the Housing Agency, and Department of Health. Figures will be published separately.
8. Central Statistics Office *An Phríomh-Oifig Staidrimh* (CSO) (2022) *Deaths occurrence (Final)*, VSA07 – Deaths occurring, last updated 31 October 2024. Available at <https://data.cso.ie/table/VSA07>
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13. Guilfoyle S, Daly A, Craig S, Corroon-Sweeney E and O’Donnell P (2023) Revisiting the profile of patients with no fixed abode admitted to psychiatric inpatient units 2017–2021. *Irish Medical Journal*, 116(6), 786.

Appendix A

Protocol for determining homelessness in coronial files

1. **Homeless – Without accommodation:** can include sleeping rough or rooflessness.
2. **Homeless – Temporary or crisis accommodation:** hostels are the main form of temporary or crisis accommodation. As hostels do not suit everyone, e.g., families or those with medical/social needs, bed and breakfasts, hotels, and families' hubs may be provided.
3. **Homeless – Severely substandard or highly insecure:** this includes but is not limited to, accommodation that is severely below the minimum standards for housing with fire hazards or potential health risks (e.g., severe dampness, infestation), structurally unsafe buildings, a lack of sanitary facilities etc., and accommodation where the deceased does not have a contract and is at risk of losing his/her home at any time.
4. **Homeless – Unknown:** it is reported in the file that the deceased is homeless, but no further details are provided.
5. **Unstable:** includes temporary living arrangements. For example, staying with a friend on a temporary basis.
6. **Long-term accommodation (LTA):** LTA refers to where the deceased is in accommodation provided by a homeless agency (non-governmental organisations or State agency) that is not on a day-to-day basis, i.e., it was provided to the deceased on a long-term basis. For example, living long term in a flat provided by the Simon Community. People in this category were not included in this bulletin as they were not homeless at the time of death.

The category that most closely equated to a person's accommodation status at the time of death was assigned to each case, based on the information available within each coronial file. This category may not reflect what is recorded in PASS for the deceased. For example, a person recorded as sleeping rough, may have used temporary or crisis accommodation some time prior to their death. In Dublin, there is considerable movement between rough sleeping and temporary or crisis accommodation in people who are chronically homeless ^{10, 11, 12, 13}.

Appendix B

Table 9 contains **2021 data for 27 people who did not meet the homeless inclusion criteria** but are considered as homeless (housed) (excluding Housing First ⁷), as they were housed in long-term supported accommodation (LTA) for people who were homeless or were recently housed after a period of homelessness (duration unknown).

Table 9 Demographics and characteristics of deaths among people who were homeless (housed) in 2021 (NDRDI)

	Total*
No. of deaths, No. (%)	27 (100.0)
Male	20 (74.0)
Female	7 (26.0)
Demographics, No. (%)	
Age, median (range ^a)	54 (24.8 – 76.2)
Not in employment ^b	16 (59.2)
Known to have children <18 years	~
Location (place of dwelling)	
<i>Dublin (city and county)</i>	18 (66.7)
<i>Rest of Ireland</i>	9 (33.3)
Cause of death, No. (%)	
Poisoning	9 (33.3)
<i>Polydrug poisoning</i>	9 (100.0)
Non-poisoning	18 (66.7)
Substance use history, No. (%)	
Alcohol use ^c	8 (29.6)
Drug use only	7 (25.9)
Alcohol and drug use ^c	10 (37.0)
Type of drug used	
<i>Opioids</i>	17 (63.0)
<i>Heroin</i>	7 (41.1)
<i>Cocaine (including crack cocaine)</i>	6 (22.2)
Co-morbidities, No. (%)	
Ever injected drugs	6 (22.2)
Blood borne viruses	8 (29.6)
History of mental health issues	13 (48.1)

*Percentages may not add up to 100 due to rounding

a Age range is 5th percentile to 95th percentile (90% of cases are included within this range)

b Where known. Refers to those unemployed, retired, or unable to work due to disability

c Includes problem alcohol use and alcohol dependency

~ Values suppressed due to small numbers

Appendix C

Table 10 contains the number and proportion of deaths among people who were homeless in 2019 to 2021 by HSE health regions where the incident occurred.

HSE health regions

HSE Dublin and North East: North Dublin, Meath, Louth, Cavan, Monaghan

HSE Dublin and Midlands: Longford, Westmeath, Offaly, Laois, Kildare, parts of Dublin and Wicklow

HSE Dublin and South East: Tipperary South, Waterford, Kilkenny, Carlow, Wexford, Wicklow, part of South Dublin

HSE South West: Kerry and Cork

HSE Mid West: Limerick, Tipperary North, Clare

HSE West and North West: Donegal, Sligo, Leitrim, Roscommon, Mayo, Galway

Table 10 Deaths among people who were homeless by HSE health regions of incident, 2019 to 2021

	Year of death		
	2019	2020	2021
Number of deaths, No. (%)			
HSE Dublin and North East	33 (35.1)	38 (30.4)	47 (36.7)
HSE Dublin and Midlands	28 (29.8)	36 (28.8)	31 (24.2)
HSE Dublin and South East	9 (9.6)	16 (12.8)	12 (9.4)
HSE South West	11 (11.7)	20 (16.0)	14 (10.9)
HSE Mid West	~	~	9 (7.0)
HSE West and North West	~	7 (5.6)	~
Ireland unknown/other ^a	~	~	10 (7.8)

^a Other: relevant geocodes were not available.

~ Values suppressed due to small numbers



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