



Surviving **Heat** on the Streets

An Assessment of the Psychosocial Impacts of Extreme Heat
on Homeless Persons



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Report Prepared By

Nivea Jain and Aishwarya Ayushmaan (with inputs from Enakshi Ganguly and Anagha Jaipal)

Editor

Aishwarya Ayushmaan

Research Assistance

Aditi Singh, Saiyad Waris, Shravani Bolage, and Omya Joshi

Survey Team

Mansoor Khan, Saiyad Waris, Israr Khan, Suman Kumari, Shalu Shaikh, Nivea Jain, Shravani Bolage, Aditi Singh, Omya Joshi, and Asima Dash

Report Design and Illustrations

Altr Collective and Nayanika Chaterjee

Content Warning

This report highlights traumatic experiences of homeless persons and mentions physical violence, sexual violence, and self-harm, which may be distressing for some readers. In case the material is triggering, please reach out to iCALL at 9152987821 (Available from Monday to Saturday between 10 a.m. to 8 p.m.).

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Housing and Land Rights Network
X-54, Second Floor
Green Park Main
New Delhi – 110 013, INDIA
+91-11-4054-1680
contact@hlrn.org.in
www.hlrn.org.in

New Delhi, October 2025

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Acknowledgments

For over twenty-five years, Housing and Land Rights Network (HLRN) has been highlighting the critical issue of homelessness, supporting people living without housing to improve their living conditions, and calling for the provision of a continuum of affordable housing options. HLRN has also developed seasonal recommendations (in summer, winter, and monsoons) to mitigate the impacts of inclement weather on homeless persons.

Recognising the growing impact of climate change on mental health of populations, HLRN embarked upon a study that examines the psychosocial impacts of extreme heat on homeless persons and builds on our ongoing efforts to address the emerging challenges of climate change for those living without a home.

We would like to express our gratitude to:

- **Mariwala Health Initiative (MHI)** for their support in making this report possible.
- Raj Mariwala, Mohammad Nawazuddin, and the entire MHI team for providing guidance for the study and facilitating our engagement with mental health experts.
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- The entire survey team—Mansoor Khan, Saiyad Waris, Israr Khan, Suman Kumari, Shalu Shaikh, Nivea Jain, Shravani Bolage, Aditi Singh, Omya Joshi, and Asima Dash—for conducting the surveys, focus group discussions, and interviews.
- Aishwarya Ayushmaan and Nivea Jain for leading the study, guiding the team, and preparing this report; and Anagha Jaipal for her valuable inputs and support in the survey and report preparation.

The lives of the homeless people are difficult at the best of times. Delhi's extreme weather changes make it even more. HLRN would also like to thank the individuals who participated in this study, for trusting the team to document their experiences—often difficult and painful—with empathy and honesty.

We hope this report will help highlight the pervasive psychosocial impacts that result from the lack of housing and are further exacerbated by the effects of climate change.

Enakshi Ganguly

Executive Director, Housing and Land Rights Network

New Delhi, October 2025



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Introduction

“


No person can ever truly be **happy** while living on the street.”

| A 55-year-old man living on the streets in Delhi

Introduction

Across the globe, homelessness is on the rise.¹ As cities expand at an unprecedented pace, large sections of the population continue to live without adequate housing and essential services.² Excessive dependence on private housing, coupled with speculation in real estate, has rendered formal housing unaffordable and inaccessible for vast groups of people who migrate to the cities in search of livelihood.³ The persistent eviction of people from low-income groups—often without rehabilitation—contributes significantly to the increasing homelessness. In India, the Covid-19 pandemic had a profound impact on the homeless populations, with long-term consequences for their access to livelihoods and their capacity to shift to other housing options.

The human right to adequate housing, recognized by the Indian judiciary as an integral aspect of the right to life, requires the State to ensure that no individual is deprived of basic shelter and housing.⁴ However, policy responses to homelessness in India have largely remained fragmented and short-term in nature, with the establishment of shelters constituting the most common, yet inadequate, measure to address this multifaceted issue.

 Homelessness is **not merely the lack of a roof, shelter, or a house**, but signifies a degree of **social exclusion**. It implies a sense of **belonging nowhere** rather than simply having no place to sleep.⁵

Homelessness not only undermines the right to housing but also profoundly impacts the fundamental right to mental health. Mental health encompasses more than the absence of mental disorders; it is a state of well-

being that enables individuals to cope with life's stresses, realize their abilities, and reach their potential.⁶ It exists on a continuum, experienced differently by each person, with varying levels of distress.⁷ The mental well-being of those living without a home is often impaired from the outset, affecting their ability to cope with other stressors.

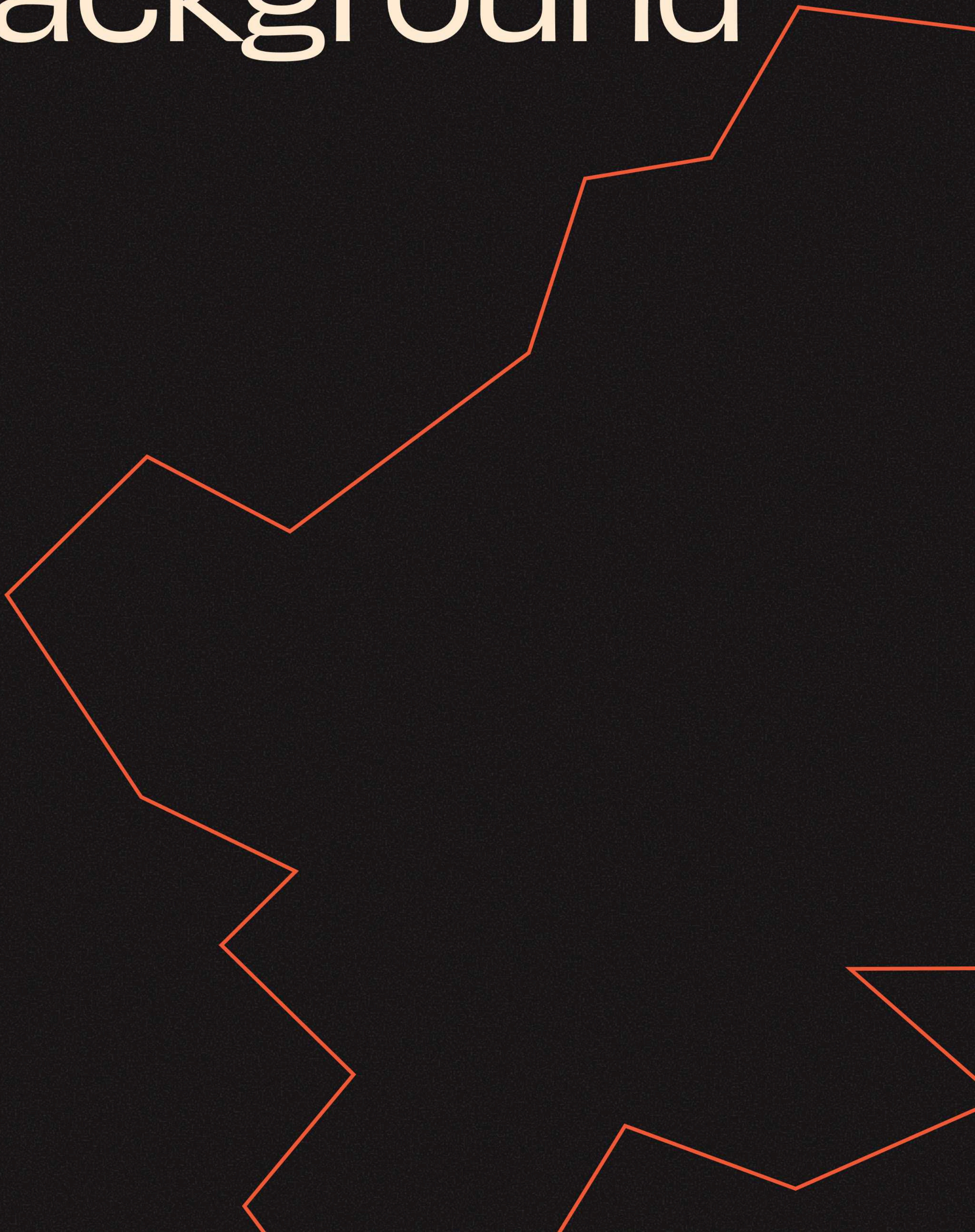
With rising heat, the challenges faced by homeless persons have increased manifold. In the absence of adequate housing—the primary protection against external environmental conditions—they remain directly exposed to the most severe impacts of climate change. Extreme heat disproportionately affects people without housing and those with mental illnesses, while intensifying barriers to accessing housing and attaining mental well-being.

In 2023, HLRN conducted a preliminary assessment of the impact of extreme heat on homeless individuals, particularly on their health, livelihood, and access to shelter and basic necessities.⁸ While not fully anticipated, homeless persons in the study described, in their own words, a range of experiences reflecting mental and emotional distress, triggered or worsened by extreme heat. This reinforced the need to further examine the pervasive psychosocial impacts of extreme heat resulting from the lack of adequate housing.

This report presents the findings of a study conducted between June and August 2025 with homeless persons in Delhi to examine the psychosocial impacts of extreme heat. It foregrounds the voices of those living without a home and highlights how rising temperatures influence their living conditions and mental well-being. The report underscores the urgency of addressing homelessness in India in the context of extreme heat and emphasizes the provision of adequate housing as a central response to support the adaptation of, and protection for, vulnerable groups without shelter.

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Background



Background

The Census of India refers to “houseless population”, as people who “do not live in census houses” (i.e., a house with a roof) but rather in open spaces such as pavements, under flyovers and staircases, places of worship, or railway platforms.⁹ According to the Census, urban India has 942,000 people living in homelessness while Delhi has 46,724 homeless residents. However, independent experts estimate that at least one per cent of the urban population in India (or 4 million persons) is homeless.¹⁰ In 2024, a headcount of homeless persons conducted by *Shahri Adhikar Manch: Begharon Ke Saath (SAM: BKS)*¹¹ revealed that over 300,000 are compelled to sleep on the streets in Delhi in precarious locations—on pavements and sidewalks, under flyovers, outside places of worship, in market places—weathering intense and unpredictable climate all year round.¹²

A large number of homeless persons, particularly working men, are highly concentrated in areas with access to livelihood opportunities. For instance, in Old Delhi, the gradual decline of residential spaces and the proliferation of commercial and manufacturing activities since early 1960s has led to an increase in availability of informal jobs.¹³ This has attracted primarily male migrant workers who are unable to find formal or informal housing in or around such locations. Some sleep in the few government-run night shelters, while others are forced to sleep on pavements, in markets, including in meat markets, under bright streetlights, and on hard surfaces, in order to continue to earn a living.

The headcount report by SAM:BKS reveals that a large number of women, children, and families continue to sleep on the streets in Delhi without access to housing.¹⁴ The increase in homeless families over the years can be attributed to mass evictions in the city across informal settlements without rehabilitation, climate-induced migration, and opportunities for both men and women to engage in informal labour to supplement household income, among others. Intergenerational homelessness, observed in many locations across Delhi, signifies that children are born into homelessness with limited means to break cycles of poverty and marginalization.

As per data compiled by the National Eviction and Displacement Observatory established by HLRN, around

16.8 lakh people were forcefully evicted and their homes demolished between 2017 and 2023, many of whom were rendered homeless.

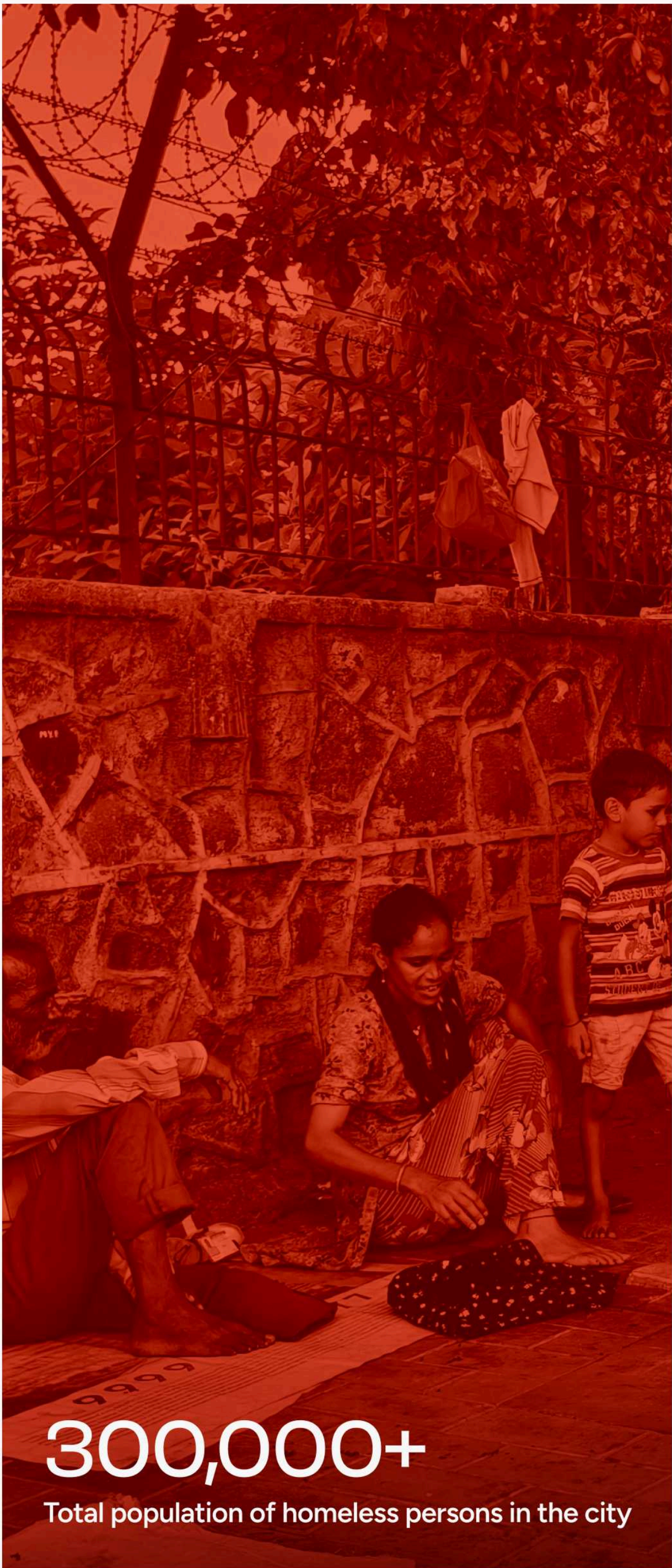
This includes the demolition of eight government run homeless shelters in Delhi’s Sarai Kale Khan area and Yamuna Pushta, which impacted at least 1,280 homeless persons.

The lack of adequate housing results in numerous human rights violations, such as of the human right to adequate housing, food, water, livelihood/ work, health, sleep, education, and the right to live with dignity among others.¹⁵ Various sub-groups of vulnerable and marginalized populations, including women, trans persons, children, older persons, persons with disabilities, Dalits, Adivasis, and religious and ethnic minorities, among others, face multiple layers of marginalization due to their social, political, and economic exclusion.¹⁶ For instance, women living in homelessness, particularly young girls, are vulnerable to verbal abuse, sexual abuse, exploitation, or trafficking, and are considered 10 times more vulnerable than homeless men.¹⁷

Provision of Homeless Shelters

The Government of the National Capital Territory of Delhi (GNCTD), through the Delhi Urban Shelter Improvement Board (DUSIB), operates 195 permanent and temporary homeless shelters across National Capital Territory (NCT) of Delhi. These shelters cater to men, women, families, and persons recovering from critical health issues and addiction to chemical substances. During winters, DUSIB sets up an additional, approximately 100 tent shelters to provide relief to homeless persons against extreme cold. However, despite the highest number of permanent shelters in the country, homeless shelters in Delhi cater to only a fraction—2,792 people during the day and 4,258 people during the night, as of 1 October 2025—of the over 300,000 population of homeless persons in the city.¹⁸

Several homeless persons, including the respondents in this report, highlight that many of the shelters are not infrastructurally sound, and lack basic facilities, such as functional water coolers and dispensers, adequate toilets that are regularly maintained, repaired, and cleaned, and potable drinking water and clean water for bathing, washing and personal use. Almost half of all the shelters (103), are temporary porta cabins, which are tin shed-like structures, often without adequate doors and windows, resulting in heat being trapped inside during summers. The fans and coolers provided in these shelters are not sufficient, and the small size of the cooler is not adequate for cooling, making it unbearable to live in during summer months. Homeless persons have also highlighted that pest and vector control measures are not implemented regularly and timely, resulting in infestation of rodents which contaminate food and destroy people’s belongings. Particularly during the monsoons, mosquitoes are present in large numbers due to absence of mosquito repellents and non-functional anti-mosquito devices.¹⁹



Access to Services and Entitlements for Homeless Persons

Most homeless persons who live on the streets and in the shelters are excluded from social security schemes, primarily due to the lack of any documentation. Without a permanent address, economic resources, and accurate information about document registrations, many lack identity proofs such as Aadhaar cards, birth certificates, or voter identity cards. Due to this, homeless persons are unable to access adequate and timely healthcare services. Pregnant women and lactating mothers cannot access necessary vaccinations and natal medicines. A study conducted by HLRN, on the impact of the Covid-19 pandemic on homeless persons, found that nearly 20 per cent of the respondents could not get vaccinated due to the lack of identity documents.²⁰

The lack of documents also render homeless persons ineligible from schemes for housing, livelihood support, pensions, and ration, among many others. The Pradhan Mantri Awas Yojana-

Urban 2.0 (PMAY-U 2.0) does not prioritize homeless persons in its eligibility criteria. While it recognizes vulnerable populations, including widows, persons with disabilities, senior citizens, transpersons, persons belonging to Scheduled Castes/ Scheduled Tribes, Street Vendors identified under PMSVANidhi Scheme, among others, these require documentary proof. Homeless persons are mentioned as a target group under the Affordable Rental Housing vertical, however, the scheme has not been implemented fully, particularly in Delhi.²¹ The Deendayal Antyodaya Yojana National Urban Livelihoods Mission (DAY-NULM)- Scheme of Shelters for Urban Homeless (SUH) was the only national level policy which recognized the housing needs for the homeless, but it remained limited to shelters. However, the Union Budget of 2025-26, did not allocate any funds towards the DAY-NULM scheme, significantly impacting the SUH component.²²

Homelessness and Mental Health

Overall, the lack of housing and essential services have a profound impact on the lives of homeless persons, including their mental wellbeing. There is limited reliable data on the prevalence of mental illness among people experiencing homelessness in India. However, the National Mental Health Survey, 2016, offers an approximate estimate of about 1 per cent of all mentally ill persons are homeless, with numbers reaching up to 15,000 in certain states.²³ A hospital-based study of 140 homeless individuals in northern India found that the vast majority (90.7%) were living with mental health conditions, while the remainder were identified with intellectual disabilities.²⁴

The bi-directional relationship between homelessness and mental illness is well established, as homeless persons are more prone to mental illnesses, and mentally ill persons more prone to homelessness due to the lack of effective care and support. However, dominant discourses on mental health, particularly for homeless persons, take a bio-medical approach focusing on underlying biological causes and institutional care.²⁵ These frame mental health as a personal issue, devoid of any influence from existing systems that continue to marginalize a significant number of people. Such a view also focuses primarily on commonly recognizable “mental disorders”, and not a person’s overall mental wellbeing.

The World Health Organization (WHO) defines mental health as

A state that enables people to **cope with the stresses of life, to realize their abilities, to learn well and work well, and to contribute to their communities.**

Mental health is an integral component of health and well-being and is more than the absence of mental disorder.²⁶

The social determinants of mental health, i.e., people’s lived experiences and the contexts in which they exist are deeply rooted in structural inequalities across physical, social, and economic environments, all of which directly affect mental wellbeing.²⁷ Research indicates that poverty, violence, and forced migration can harm mental health and increase vulnerability to common mental disorders, especially in low- and middle-income countries.²⁸

For most homeless persons, their everyday lives and experiences are shaped by structural inequalities, which deprive them of the most foundational aspects of a stable and dignified life. Common stereotypes— such as viewing homeless people as lazy, criminal, or addicted— portray them either as threats to the society or as powerless individuals, often deemed unworthy of state support. These perceptions have serious consequences, as homeless persons are systematically excluded from accessing adequate housing, livelihood, education, healthcare, or social security schemes, and subject to state violence in the form of police harassment and brutality. The police regularly abuse homeless persons verbally and physically, snatch away their goods used for livelihood, and destroy their property.²⁹ In particular, homeless persons are constantly displaced from their places of stay, and their shelters are demolished, to “clean up” pavements, spaces under flyovers and other areas, often in the name of city beautification.³⁰

In 2022 and 2023, at least **3,261 homeless persons** were evicted in Delhi.

These experiences can be detrimental to their mental health, and can diminish their ability to cope with their conditions. In such circumstances, relying only on bio-medical or institutional treatments for mental illness is insufficient.

Improving mental wellbeing in socially and economically deprived communities requires addressing these broader social and structural realities.³¹

Provisions for Homeless Persons in Laws and Policies Governing Mental Health

The **National Mental Health Policy 2014**³² approaches mental health using a rights-based framework, recognizing the intricate link between poverty, homelessness, and mental health. It acknowledges the impact of discrimination, malnutrition, and the lack of access to safe water, toilets, and sanitation, on mental health. With this, it offers two critical guidelines that highlight a progressive outlook towards addressing mental health.

First, increasing awareness among policy-makers, planners, and governments to address systemic level issues such as social exclusion, unequal opportunities, income disparities, and perceived lack of control over one's social and economic life, which are linked to high rates of depression. Second, addressing poor living conditions, especially of homeless persons, including overcrowding, lack of access to safe drinking water, toilets, and sanitation, and inadequate nutrition.

The directives also include addressing stigma around mental health, and provision of housing and other support for homeless persons living with mental illnesses. Despite this, implementation remains limited. The gap between the policy's progressive vision and the lived reality of vulnerable populations underscores the urgent need for concrete action and accountability.

The **Mental Healthcare Act 2017**³³ outlines directives for the care of persons with mental illnesses, by protecting, promoting, and fulfilling their rights during the delivery of mental healthcare and

services. Adopting a progressive, rights-based approach, the Act guarantees access to mental healthcare for persons with mental illness, in line with India's obligations under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

The Act particularly recognizes destitute and homeless persons, and their right to access mental healthcare free of cost at establishments run or funded by the government. Significantly, it emphasizes the right to community living, affirming that no person should remain under institutional care simply for being homeless or lacking family/community facilities. It directs the government to provide or establish less restrictive community-based establishments including half-way homes or group homes for those who no longer require care in restrictive mental health facilities.

While the Act represents a significant step forward by offering support beyond institutional care, its primary focus remains on mental disorders, rather than on the broader psychosocial dimensions of mental wellbeing. These dimensions—shaped by physical, social, and economic environments—are especially critical for persons experiencing homelessness. Shifting the framework of mental health to include preventative measures that address systemic issues such as water insecurity, livelihood precarity, and health inequality—all of which stem from the structural exclusion of homeless persons—is critical to provide comprehensive mental healthcare.

Extreme Heat and Homelessness

The lack of adequate housing on the lives and the mental wellbeing of homeless persons, are further compounded by extreme heat. In recent years, Delhi—like much of India—has faced increasingly severe heatwaves, with daytime temperatures in parts of the city approaching 50 degrees Celsius in 2024, and nighttime temperatures reaching as high as 36 degrees Celsius.³⁴ It is projected that heatwaves in India will become more frequent and intense by the late 21st century, due to Greenhouse Gas (GHG) emissions.³⁵

Policy responses to extreme heat in India, primarily in the form of Heat Action Plans (HAPs), currently rely on the definition of heatwaves³⁶ as the principal measure of extreme heat. However, only a few identify homeless persons as a vulnerable category in their plans, and even fewer recommend targeted guidelines to address the vulnerability faced by homeless persons (See Annexure 1). Furthermore, the definition of heatwave alone does not adequately capture the full extent of the risks faced by highly vulnerable groups. For homeless persons, the climate crisis is not experienced solely in the extremes, but also in their everyday lives. In addition to daytime ambient temperatures, other factors, such as relative humidity, land surface temperatures, and elevated nighttime temperatures, among others, determine the impacts of heat on homeless persons.

Higher humidity slows down the human body's ability to release heat through sweat, resulting in excessive accumulation of body heat even at relatively lower temperatures.³⁷ As a result, humid areas are predicted to experience a greater number of deadly days, as the threshold temperature at which conditions become fatal decreases with rising relative humidity.³⁸ This is particularly concerning for Delhi, which has seen a rise in relative humidity during summers in the past decade.³⁹ Heat Index, which combines air temperature with relative humidity, measures the “feels like temperature”, gives a more accurate picture of the physiological stress caused by heat and humidity. For people experiencing homelessness, this combined effect can be especially severe. The discomfort and strain on their bodies not only jeopardize their health but also threaten their livelihoods, as many depend on informal, outdoor forms of labour. Furthermore, the physical discomfort caused by elevated temperatures and high humidity directly impacts one's cognitive abilities which further leads to loss in productivity.⁴⁰ As this report demonstrates, the loss of livelihood acts as a significant economic stressor, which in turn weakens the capacity to cope with extreme heat and causes mental health distress.

“

Over the past few years, the heat has been increasing in Delhi. In our village, the heat does not feel as intense, but in the city it feels much worse because of the big buildings, heavy traffic, and paved roads.”

A 25-year-old homeless person living on the streets

Moreover, in urban areas, rampant concretization results in higher land surface temperature due to higher heat absorption and slower radiation back into the atmosphere, known as the urban heat island effect. In 2022, the average land surface temperature in Delhi was 45 degrees Celsius, as compared to Bawana Industrial Area in northwest Delhi where it reached 62 degrees Celsius.⁴¹ As this report shows, homeless persons, living on the streets, are unable to sleep on hot concrete surfaces. Many homeless persons wait up to 2 to 3 a.m. in the night for the pavements to cool down, when they can finally rest, and wake earlier as the sun rises and surfaces heat up again. This is further aggravated by nighttime ambient temperatures which are continuing to rise rapidly.⁴² In Delhi's central areas, where a significant population of homeless persons reside, the land surface temperature at night is 2.9 degree Celsius higher than its peripheral areas during the night.⁴³

Collectively, these factors illustrate that not only heatwaves, but heat throughout the summer poses disproportionate risks for people experiencing homelessness. Over the years, the number of deaths of homeless persons during summer months in Delhi has also been significant.

Deaths of Homeless Persons During Summers

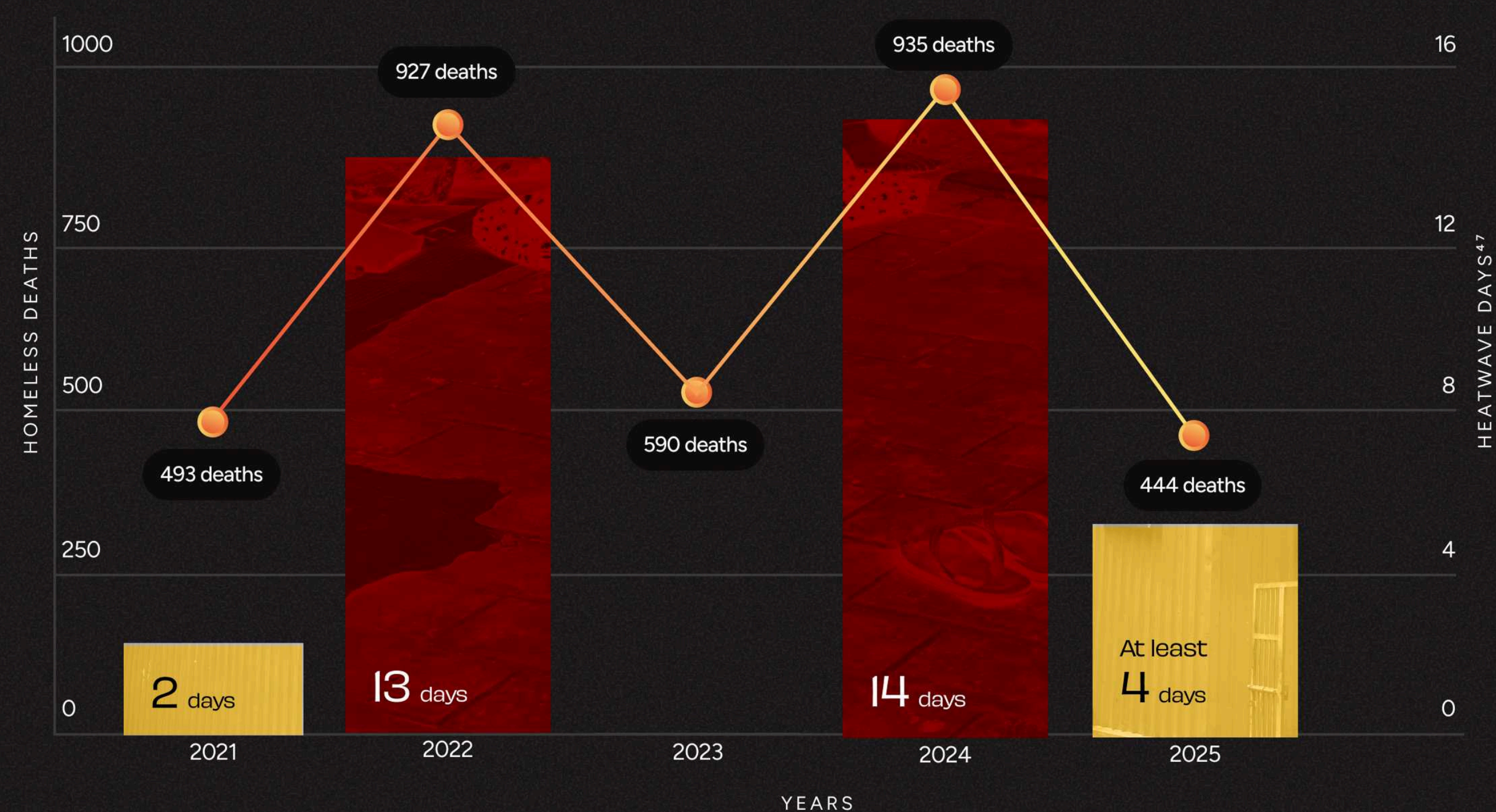
In India, there is no official record of deaths of homeless persons. Some states record data on the number of ‘unidentified dead bodies’. In reality, many of these are homeless persons living on their own. But this does not include deaths of homeless persons living with families or in shelters or whose bodies are identified. It is conservatively estimated that at least 60 to 80 per cent of ‘unidentified dead bodies’ in Delhi were persons living in homelessness. While deaths of homeless persons can be attributed to various factors, including violence, severe health issues, or age, it is difficult to estimate how many of these deaths are caused due to extreme heat.

Heat related deaths in India are often under-recorded and widely disparate among various sources, due to different methodologies used to record such data.⁴⁴

Furthermore, there are challenges with classifying heat-related deaths, which can be due to direct exposure to sunlight or due to high ambient temperatures, typically affecting those with comorbidities, which are often not attributed to heat.⁴⁵ It is thus difficult to get a clear picture of heat-related deaths, especially of homeless persons.

However, the data from previous years indicates a correlation between the intensity of summer (April to June) and the number of deaths of homeless persons in the given year.⁴⁶ Across 2021 to 2024, cumulatively, the number of deaths between April to June have been higher at 2,915 deaths than in the other months.

Estimates Deaths of Homeless Persons in the Summer Months (April-June) in Delhi



Extreme Heat, Mental Health, and Homelessness

Socioeconomic exclusion and persistent marginalization, combined with the dangers and indignities of outdoor living, profoundly damage the mental wellbeing of homeless persons, locking them into cycles of poor health and poverty. Constant exposure to harsh environmental conditions—soaring daytime temperatures, high humidity, and hot concrete surfaces, as well as elevated nighttime heat—only intensifies their daily survival challenges, further disrupting sleep, undermining physical health, and threatening livelihoods.

Without access to shelter, water and sanitation facilities, regular and secure livelihoods, and adequate remedies, their vulnerability to mental distress and psychological disorders increases sharply, while opportunities for recovery and coping are drastically reduced. Sleep deprivation—common among homeless individuals—severely impacts physical and mental health, leading to anxiety, depression, and cognitive impairments which affect worker productivity, and increases the chances of workplace errors and accidents.⁴⁸ Studies from sub-Saharan Africa show that water insecurity is linked to fear, shame, anger, worry, quarrels, and social disengagement.⁴⁹ Malnutrition, especially among children, is also a key risk factor which negatively impacts cognitive development, school performance, and productivity.⁵⁰

Existing research indicates that people with mental illness are three times more likely to run the risk of death from a heat wave than those without mental illness.⁵¹ Vulnerable groups within homeless populations—such as women, children, older persons, persons with disabilities, and those marginalized on the basis of caste, gender, sexuality, or religion—are already more susceptible to mental disorders and are

therefore likely to be more severely affected by extreme heat.

Effectively addressing these interconnected risks requires approaches that recognize mental health as shaped by both environmental hazards and the broader structural inequalities faced by those living in homelessness.

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Objective and Methodology

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Objective and Methodology

This report aims to forefront the experiences of homeless persons and document the impact of heat on their living conditions and mental wellbeing. The findings in the report are based on a rapid assessment survey, focus group discussions, and interviews

conducted with homeless persons across Delhi, over the course of three months (June to August 2025). It focuses on the following questions:

Q.

How does extreme heat impact the vulnerability of homeless persons, living without access to adequate housing or basic facilities?

Q.

How do these experiences affect the mental wellbeing of homeless persons?










Q.

How do homeless persons cope with extreme heat and its associated challenges and what policy provisions can remove the systemic barriers affecting their ability to cope?

The report adopts a socio-political lens towards mental health that focuses on one’s life experiences, contexts, and the structures that shape and influence these, while steering away from a diagnostic and bio-medical perspective. In connecting mental health with heat, this study seeks to look at impact beyond heat strokes and focus on the everyday lived experiences of homeless persons.

Data Collection

The participants for this study were chosen to represent people across different age, gender, physical abilities, place of stay, and geographical location to ensure that differing experiences are captured in the study. The team surveyed 111 people and conducted focus group discussions (FGDs) with 90 people. Four people—a homeless man, a pregnant woman, a person with disability, and a man whose house was demolished during peak summer, rendering him temporarily homeless—were interviewed for case studies.

| | | | |
|-------|----|-------------------------------|--|
| FGD 1 | 12 | Women (including new mothers) |  Shelter |
| FGD 2 | 15 | Men (including older men) |  Shelter |
| FGD 3 | 14 | Young People aged 10-18 years |  Shelter |
| FGD 4 | 8 | Men (including older men) |  Shelter |
| FGD 5 | 14 | Men |  Shelter |
| FGD 6 | 16 | Men |  Recovery Shelter |
| FGD 7 | 5 | Women |  Street |
| FGD 8 | 6 | Young People |   Street & Shelter |

In each case, the respondents were informed of the context and the objective of the study, and consent was taken verbally. They were also informed in advance about sensitive topics, which were kept optional to answer. Lastly, the respondents were assured of confidentiality and anonymity, and no names have been used throughout this report.

To assess the impacts of various stressors such as livelihood, lack of access to basic necessities, and health, among others, on their mental health the respondents were given the options of sadness or despair, anger or irritation, worry, restlessness, and helplessness to

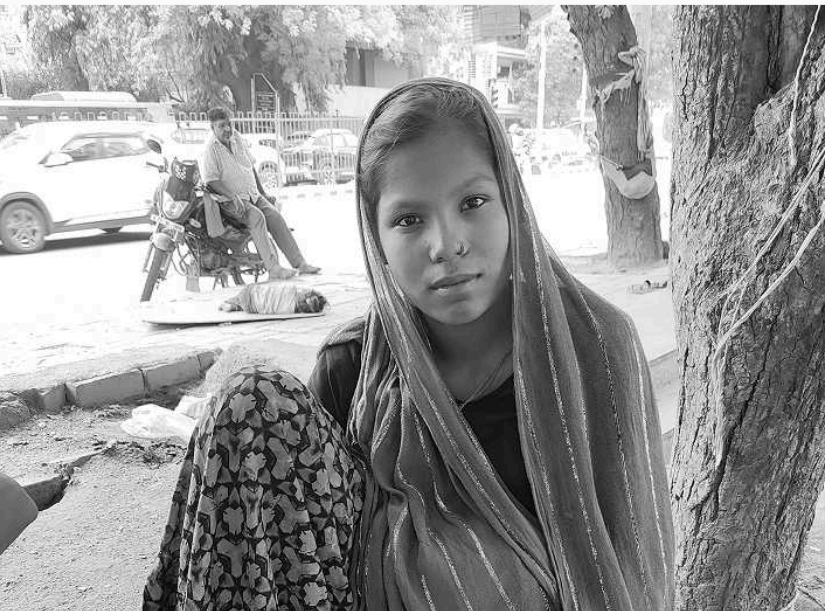
choose from. These terms were used on the basis of the answers of the respondents of HLRN’s 2023 study on the impact of heat on homeless persons⁵², as well as the Kessler Psychological Distress Scale.⁵³

The aim of this study is not to diagnose mental disorders among the respondents, rather identify and show the relationship between the living conditions and structural inequalities faced by homeless persons, and their mental health.

Demographic Distribution

The participants for this study were chosen to represent people across different age, gender, physical abilities, place of stay, and geographical location to ensure that differing experiences are captured in the study. The team surveyed 111 people and conducted focus group discussions (FGDs) with 90 people. Four people—a homeless man, a pregnant woman, a person with disability, and a man whose house was demolished during peak summer, rendering him temporarily homeless—were interviewed for case studies.

Most respondents (93 per cent) have lived in Delhi for at least five years, while 77 per cent and 53 per cent of the respondents have lived in Delhi for at least 10 and 20 years respectively. Around 77 per cent of the men surveyed lived alone and 76 per cent of the women surveyed lived with their families. Almost 63 per cent of the respondents live on the streets, of which 56 per cent were men and 44 per cent were women. Of those living on the streets, about half live on **footpaths along streets, whereas others live near places of worship, near parks, under flyovers, in marketplaces, near railway tracks, and near transport hubs such as metro stations, railway stations, or bus terminals.**



3 Minors (Below 18)
Women



25 Young (18-35)
Women



13 Middle aged (36-60)
Women



1 Minors (Below 18)
Men



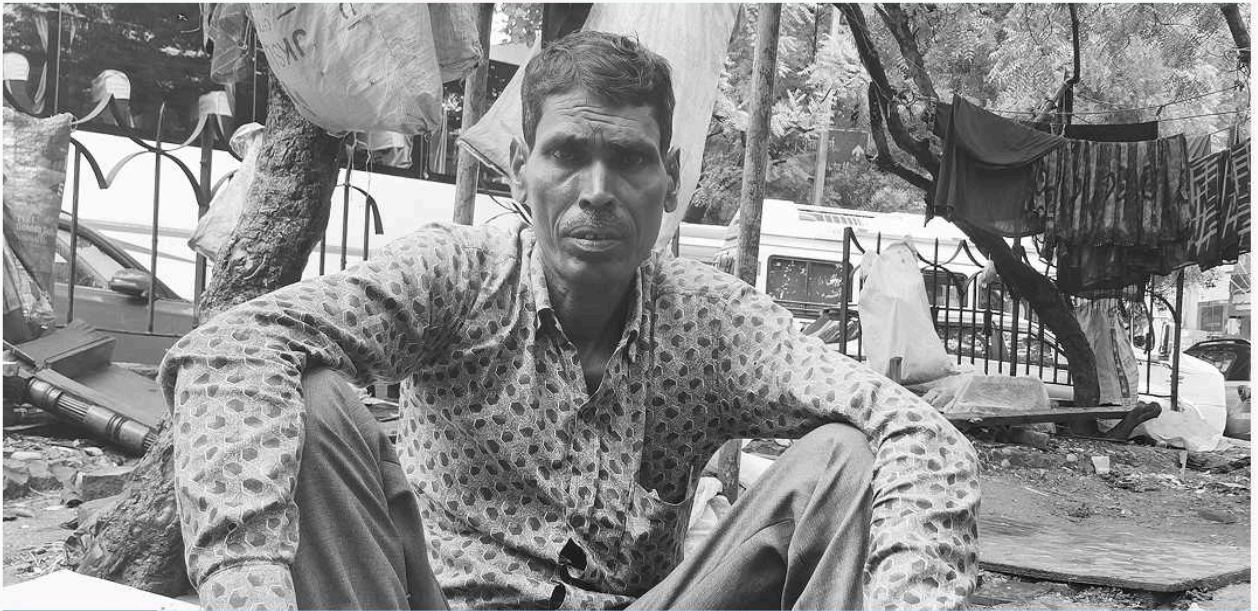
33 Young (18-35)
Men



24 Middle aged (36-60)
Men



1 Senior Citizen (Above 60)
Women



1 Young (18-35)
Men

Men

who participated in the study

26

Stay alone on streets

13

Stay with family on streets

1

Stay with family in shelters

20

Stay alone in shelters

Women

who participated in the study

2

Stay alone on streets

10

Stay with family on streets

10

Stay with family in shelters

10

Stay alone in shelters

Limitations

While the study adopts a socio-political lens, focusing on the lived experiences of homeless persons, their historical backgrounds and experiences of caste and religious marginalization are not explored. Over 81 per cent of the respondents were Scheduled Castes, Scheduled Tribes, Other Backward Classes, or Muslims, however, ascertaining the impact of caste and religious discrimination on the lives and mental health of homeless persons was beyond the scope of this study.

Further, while a gendered lens is adopted in our analysis, none of the participants identified as non-binary, transgender, and other gender-diverse persons. Consequently, the experiences of persons with non-normative gender identities living in homelessness have not been incorporated in the report.

As a non-diagnostic assessment of mental health impacts, the respondents were asked to describe impact on their mental health in each thematic section. The findings are based on the respondents' self-assessment of their mental health wellbeing, as well as observations made by the surveyors. The surveyors from the HLRN team are familiar with the issue of homelessness, but they are not experts on mental health. Prior to the survey, the surveyors were trained on crucial concepts of mental health and wellbeing. While it is known that extreme heat exacerbates existing illnesses, homeless persons living with mental illnesses were not included in the survey as the team did not have the required expertise to interview such individuals.

Given the sensitivity of the topics discussed, and the pre-existing stigma surrounding mental health, surveyors from our team identified that some respondents grew uncomfortable answering the questions during the course of the survey. Some respondents were also weary of the multiple surveys and studies that they are subject to, without leading to any changes in their living conditions. Having anticipated these challenges, the team ensured that no one was made to answer forcefully, and was as comfortable as possible.



Interestingly, many respondents also highlighted how the survey and talking about their life experiences in detail was cathartic and made them feel hopeful.



Mental Health Impacts of Heat

Homeless persons are experiencing **behavioural changes** due to extreme heat, making them **angrier and quieter or withdrawn**.

Comparatively, more women reported these behavioural changes than men.



82 %

Respondents reported increased anger



64 %

Respondents shouted more often



53 %

Respondents became withdrawn



48 %

Respondents cried more frequently or intensely or both

The mental health impacts of extreme heat are **gendered**.

While men most often reported worry, anger, and helplessness, women across age groups experienced all emotions at higher rates—especially sadness, despair, and restlessness

Extreme heat is causing homeless persons to **lose motivation to work** or **engage in daily activities**.

Experience mental fatigue and confusion, feel isolated, and even develop thoughts of self-harm.

Homeless persons are facing **heightened climate anxiety** as 77 per cent of the respondents are **fearful of summers**.

In the absence of adequate state interventions, the growing intensity and duration of extreme heat, followed by the heightened unpredictability of monsoons, homeless persons are underprepared and unable to adapt to changing climate, increasing their susceptibility to climate anxiety.



Housing Insecurity

For homeless persons, neither their places of work, nor their places of stay have **adequate facilities to protect them against the heat.**

Most homeless persons **feel worried** (78 per cent), **helpless** (73 per cent), and **angry or irritated** (72 per cent) about not having adequate housing.

Nearly all respondents (95 per cent) reported feeling extremely hot during afternoons, and over half (56 per cent) also experienced extreme heat at night.



Lack of Water and Poor Sanitation

Homeless persons are spending up to **43 per cent of their monthly earnings on water.**

Nearly all respondents (95 per cent) reported feeling extremely hot during afternoons, and over half (56 per cent) also experienced extreme heat at night.

Without adequate toilets, homeless women reported **shame in bathing publicly and fear of physical and sexual violence.**





Food Insecurity

Nearly **69 per cent** of all the survey respondents reported that **food was among their primary expenses during the summer months.**

Women highlighted that the intense heat from cooking, combined with soaring summer temperatures, leads to excessive sweating, faintness, and anxiety, while smoke from the stoves causes coughing and respiratory discomfort. This prevents them from cooking too often, due to which they have to rely on donors or buy food for themselves.



Livelihood Challenges

On an average, homeless persons are **losing 72 minutes of work** each day.

Nearly all respondents (95 per cent) reported feeling extremely hot during afternoons, and over half (56 per cent) also experienced extreme heat at night.

Livelihood insecurity is a **major concern of worry** (89 per cent) for men and women.



A black and white photograph showing several homeless individuals sleeping on the floor of a shelter. They are lying on mats or blankets, some under simple wooden frames. The environment appears crowded and basic.

Sleep Deprivation

Only **2 per cent** of the respondents **sleep for more than six hours** at night during summers.

Among shelter residents, inadequate fans and coolers were the primary reason for disrupted sleep, while among those living on the streets, it was overheated pavements. This is affecting their ability to carry out routine tasks and work and often leads to an increase in anger and irritation.

Physical Health Risks

The majority of homeless persons (76 per cent) experience **discomfort during summers, and 65 per cent felt sick or extremely tired** frequently.

More homeless women experienced dizziness or fainting, loss of or reduced appetite, difficulty in breathing, stomach ache, fever, cough and cold, and loose motions or diarrhoea. Whereas, more homeless men experienced excessive sweating, heat rashes and skin itching, and vomiting. 91 per cent of the respondents were worried about their health and related concerns, while 77 per cent felt anger and irritation.



Adaption and Coping Strategies

Without **systemic provisions to cope** with the mental health impacts of heat, homeless persons have to find their own way.

Other coping mechanisms include talking to others, spending time with friends and family, praying, or visiting a doctor.



64 %

Respondents prefer to spend some time on their own



56 %

Respondents try to sleep



51 %

Respondents take a walk to find relief from the heat and its associated mental health impacts



64 %

Respondents rely on alcohol or other substances sometimes, or regularly

The need for housing **emerged as a primary requirement** for homeless persons to cope with extreme heat.

Seventy-nine per cent of respondents said they need adequate housing to cope with extreme heat, while nearly half of those in shelters (48%) called for better shelter conditions.

The Psychosocial Impact of Extreme Heat on Homeless Persons



Rising temperatures affect homeless persons in multiple, interlinked ways. While extreme heat is a stressor in itself, it also acts as a multiplier, intensifying the other challenges that shape their daily lives. Compelled to live and often work outdoors, homeless persons face prolonged exposure to high temperatures, which directly impacts their physical health and contributes to heightened psychological distress. At the same time, extreme heat exacerbates existing vulnerabilities by constraining access to food, water, shelter, and healthcare, while simultaneously limiting livelihood opportunities. The findings of this report highlight the various stressors that arise due to extreme heat, and the ways and extent of their psychosocial impact on people living without a home.

“

The new RO (water filter) installed in the shelter is not working. There is no drinking water available, which is a serious need. People are forced to drink untreated water, which causes illness. There is also constant worry about having to cook food with contaminated water.”

| A 30-year-old woman shelter resident



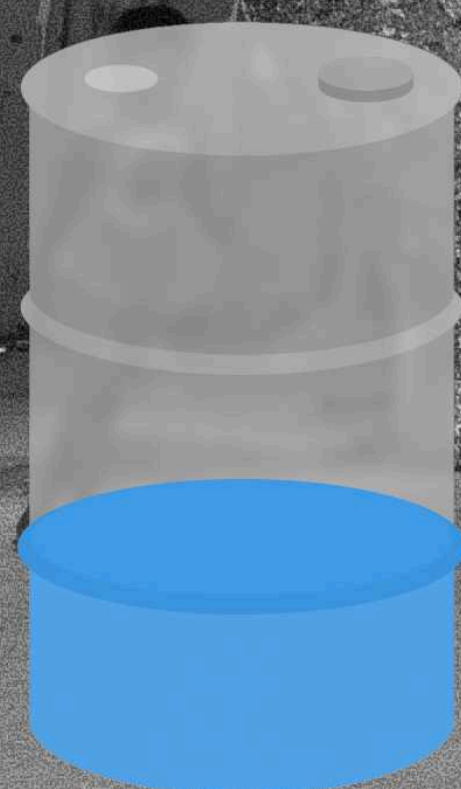
I. Inadequate Water and Sanitation

Throughout the year, homeless persons struggle to to access reliable and clean sources of water and sanitation. In Delhi, while those living in shelters are better connected to these services than those living on the streets, both groups of people face distinct challenges, which are further compounded during summers, when the need for water and sanitation facilities is much higher.

All homeless shelters in Delhi are equipped with potable water, water for washing and bathing, as well as toilets and bathrooms, however, these are not always adequate, sufficient, or functional. **Nearly 34 per cent of the respondents living in shelters stated that access to water in their shelter is inadequate, and 51 per cent of the respondents mentioned that toilet and bathing facilities in their shelter were not adequate.**

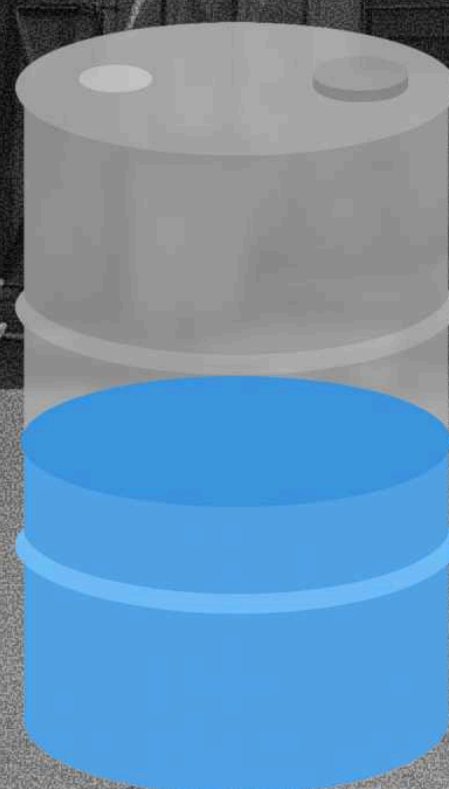
During a discussion with women living in a shelter (FGD-1), participants highlighted that while plenty of water was supplied in the morning and the evening, they would store it in containers which heats up quickly during summers. The quality of water available in the shelters is also a concern among the respondents in the survey.

Several respondents revealed that their shelters were equipped with toilets but no bathing spaces. **Consequently, women were compelled to bathe in the open with their clothes on, which not only causes skin irritation, and but also a sense of shame due to the lack of privacy.** Where bathrooms were available, they were often unclean and emitted foul smells, rendering them unusable.



34%

of the respondents living in shelters said that access to water in their shelter is inadequate



51%

of the respondents said that toilet and bathing facilities in their shelter were not adequate

Sources of water to bathe

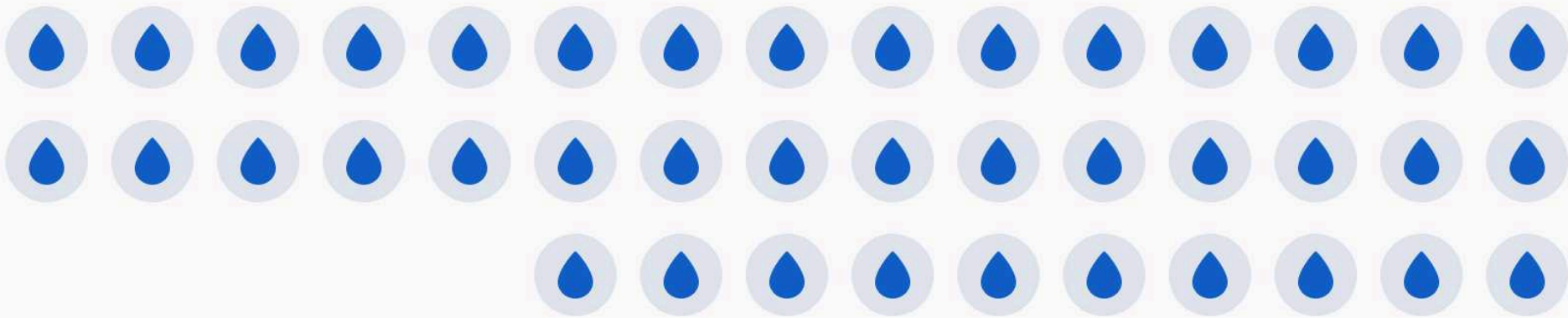
5

Purchased water



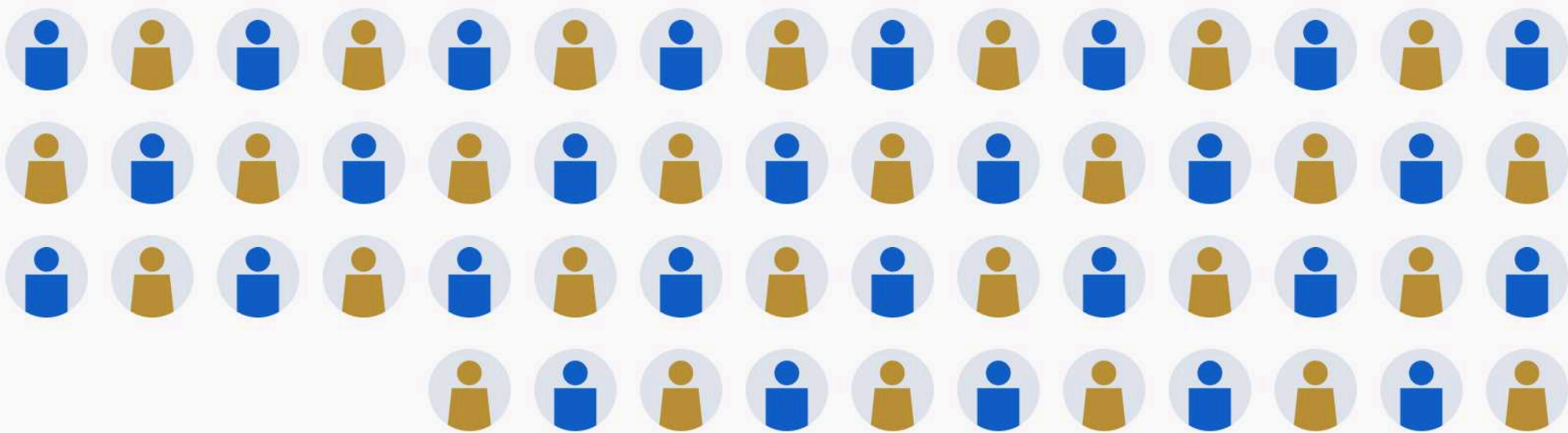
40

Municipal taps



56

Public toilets



12

Drawing a line from municipal pipes



7

From nearby parks or other sources



For homeless persons living on the streets, access to water and sanitation is rarely reliable, and often expensive. **At least 74 per cent of the respondents living on the streets rely on more than one source of drinking water, and at least 57 per cent rely on more than one service to bathe.** In both cases, sources included water tankers, nearby parks, municipal taps, public toilets and bathrooms, drawing a line from municipal water pipes illegally, and purchasing water. Sources of drinking water also included nearby places of worship, public coolers and pots, or by asking shopkeepers and other people.

Sources of drinking water

27

Purchased water



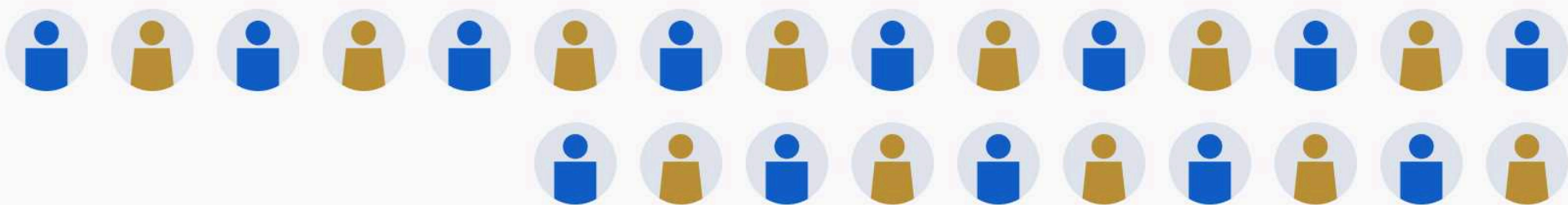
54

Municipal taps



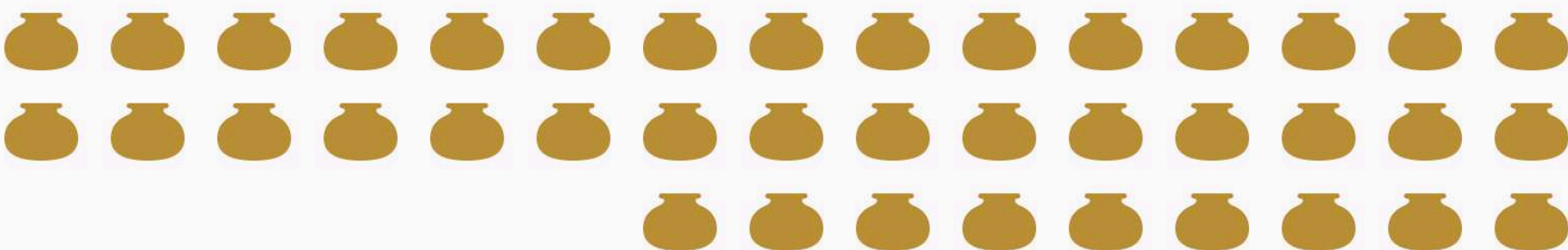
25

Public toilets



39

Public coolers and pots



2

Water tanker



2

From nearby parks



13

Others
(Asking shopkeepers or others, from
nearby parks or places of worship)

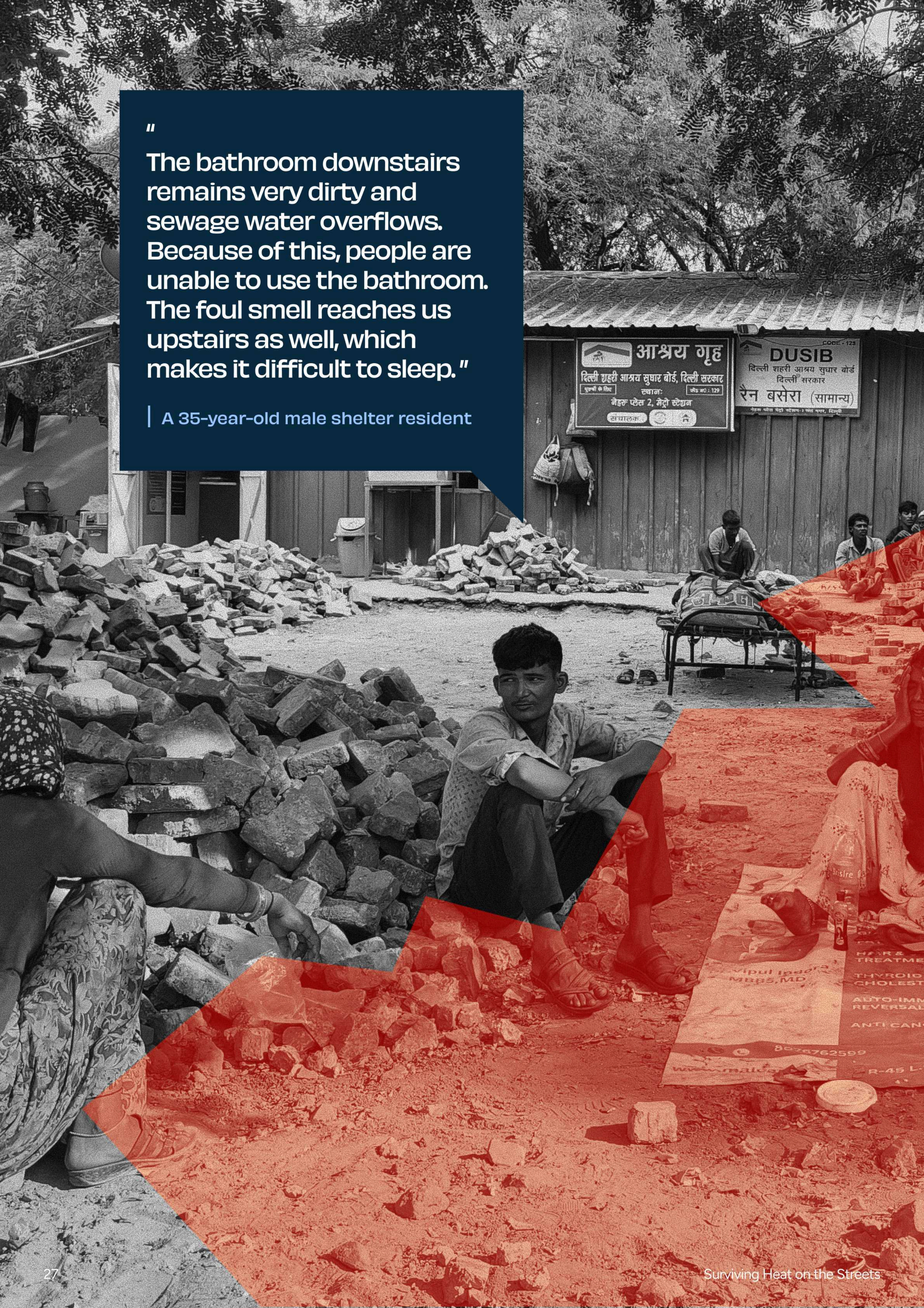


Thus, a significant number of homeless persons living on the streets have to navigate this uncertainty and expend time and energy to find water from one of these sources. Several respondents also stated that they have to walk for longer distances (ranging from 500 meters to 2 kilometres) to access public toilets, and sometimes have to use auto-rickshaws to reach there. Oftentimes, due to the lack of availability of public water sources, or due to the lack of money, homeless persons have to stay thirsty.

“

The bathroom downstairs remains very dirty and sewage water overflows. Because of this, people are unable to use the bathroom. The foul smell reaches us upstairs as well, which makes it difficult to sleep.”

| A 35-year-old male shelter resident





“

When I am walking on the streets, sometimes I don't find water as there are no facilities or shops nearby. Other times, I don't have the money to buy water. I have to remain thirsty.”

| A 30-year-old woman who picks waste

Water insecurity among homeless persons is burdening them **financially**, especially during summers.

The research conducted by HLRN finds that homeless persons are forced to purchase water after having exhausted all other options. At least 39 per cent of the respondents living on the streets are purchasing drinking water, while 87 per cent purchased water or used paid public toilets to bathe. For 67 per cent of the respondents, water made up one of highest household expenditure during summers. This adds a considerable financial burden on homeless persons, who are already experiencing livelihood precarity.

Overall, **60 per cent of the respondents spend up to Rs 100 (1.13 USD) per day on water**, while 16 per cent spend up to Rs 200 (2.27 USD) on water every day. These include 83 per cent respondents living on the streets, as well as 68 per cent respondents living in shelters. When mapped against the modal income⁵⁴—between Rs 7,001–9,000 (79.32 USD–101.97 USD)—of those surveyed, homeless persons are spending up to **43 per cent of their monthly earnings on water during summer months**.

In FGD–3, young children who either work as waste pickers, or accompany their parents to pick waste, said that they earned Rs 300–400 (3.41 USD–4.54 USD) on a good day, but spent about Rs 60 (0.68 USD), or 20 per cent of their daily income, only on water.

“

We get water from a shopkeeper, or sometimes we fill it from a public water point. When we can't get it from anywhere, we are forced to buy it.”

| **A 20-year-old woman who lives on the streets**





Impact on Mental Health

Due to Inadequate Water and Sanitation

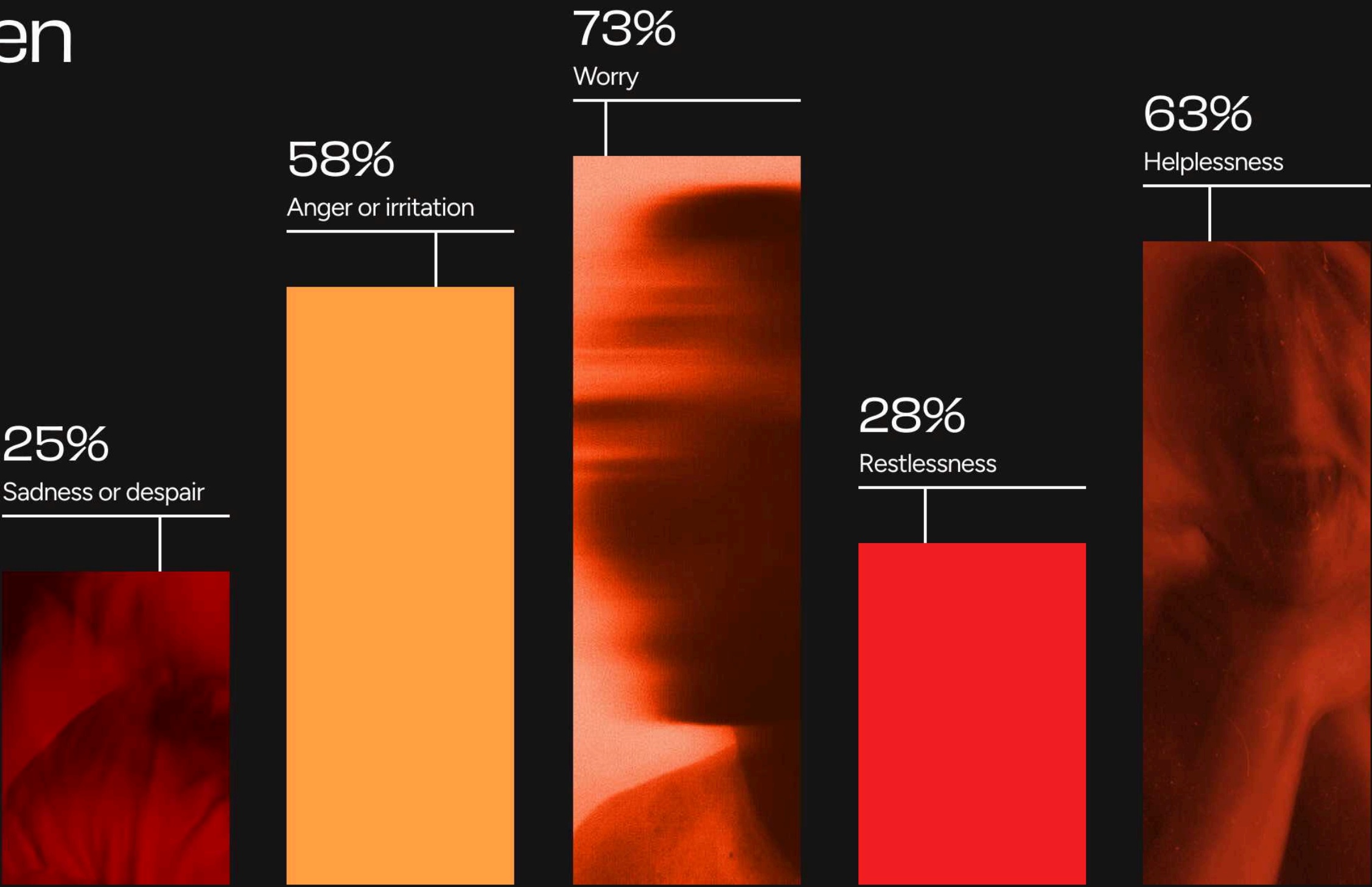
For homeless persons the lack of reliable access to water and sanitation facilities is a profound source of emotional distress. Around 73 per cent of the respondents in the survey were worried about the lack of reliable and adequate water and sanitation facilities, 71 per cent were feeling helpless, and 68 per cent were angry or irritated.

Women, in particular, face unique challenges. Some respondents who live on the streets are forced to bathe in the open with their clothes, which leaves them feeling ashamed. Others using public toilets and bathrooms highlighted the fear of using such facilities. Existing research also indicates that the lack of adequate sanitation facilities increase fear among women, particularly young girls who are at risk of physical and sexual violence.⁵⁵ ***“I am fearful that someone might come inside. Using the public toilet is a big problem, but what can we do — we have to go anyway”*** (A 20-year-old woman who lives on the streets).

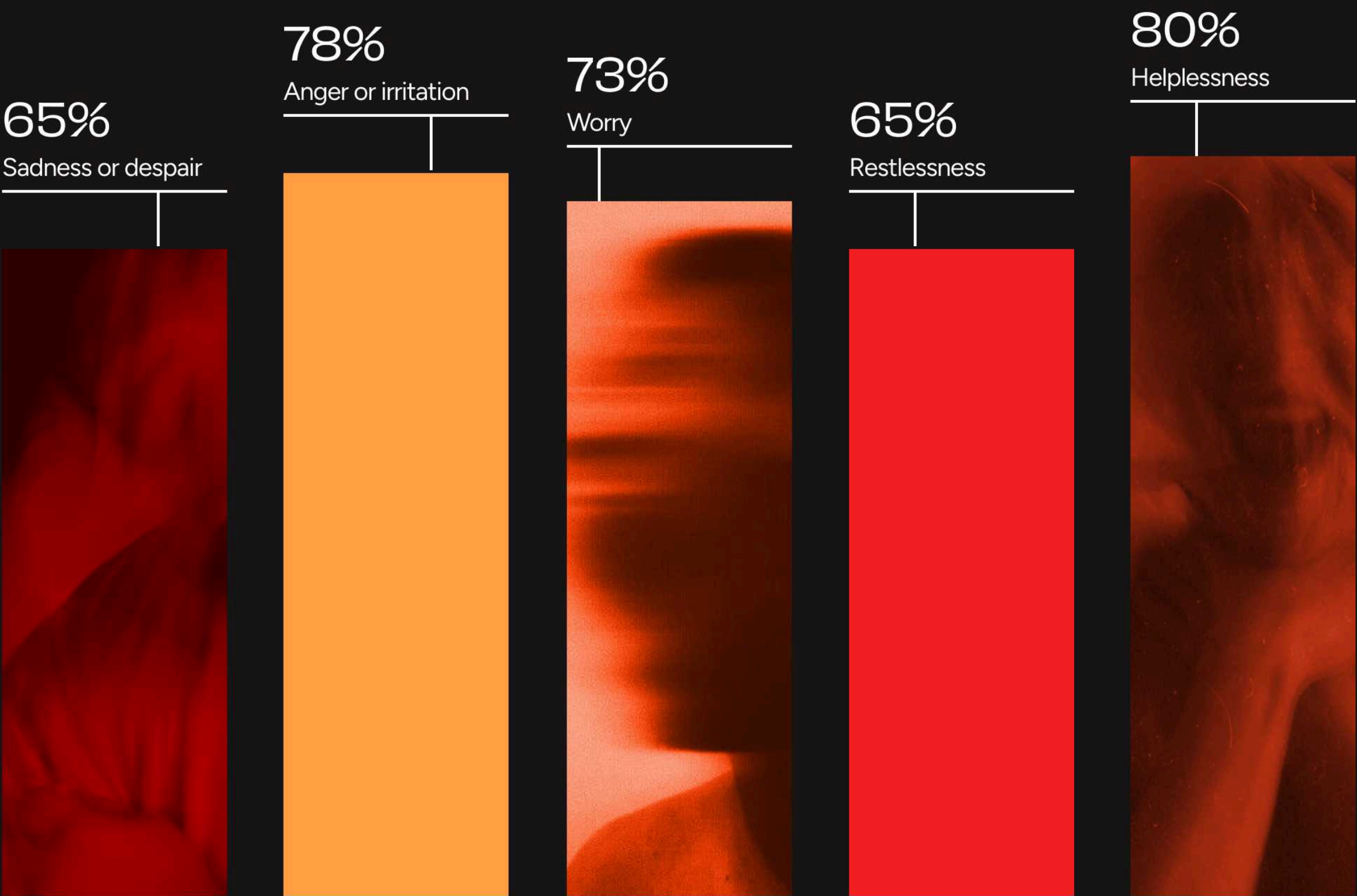
Although women and men feel equally worried, the survey indicates that a greater percentage of women feel helpless, angry, or irritated. There is a striking difference between the percentage of women and men feeling restless and sadness or despair, demonstrating how women are shouldering the disproportionate emotional and psychological burden linked to inadequate access to water and sanitation.

Impact of **Inadequate Water and Sanitation** on the Mental Health of the Homeless Persons

Men



Women



Surviving Extreme Heat Near a Landfill

A Case Study on Caste and Climate Vulnerability

Chote Lal,⁵⁶ a 40-year-old man, lives on the streets near Ghazipur Paper Market, alongside 60 to 70 families who shelter themselves using plastic sheets. He belongs to a small village in Uttar Pradesh, but landlessness and severe droughts in the area forced him and his family to migrate to Delhi in search of work and housing, over 10 years ago. While the plastic sheets provide little protection from the weather, these too, have been demolished by the state several times over the years. The community belongs to the 'Gihara Samaj' community, which is recognized as a Scheduled Caste (SC) or Scheduled Tribe (ST) in different states.⁵⁷

With the rising heat in Delhi, Chote Lal and his family have been facing many difficulties. The settlement has no water, electricity connections, toilets, health services, or social services. Government water tankers are the only source for accessing water for the community. But the tankers do not arrive regularly, and even when they do, there is not enough water for all the residents. The residents collect water in vessels which turns hot within an hour, and cannot be used for drinking or bathing.

Living near one of Delhi's biggest landfills, Ghazipur, leaves their bodies exhausted, making them weak and tired. They face health problems such as breathing difficulties, itching, rashes, and skin diseases. The air carries a strong odour that causes headaches and constant irritability, persisting throughout the year. In the summers, fires frequently break out in the garbage heaps.⁵⁸ The smoke causes severe discomfort. People cannot breathe, their eyes burn, and coughing becomes common. However, residents continue to live there only for nearby sources of livelihood.

For children, summers are particularly harsh. **In the afternoons, the children are extremely**

distressed due to which they become withdrawn, stop playing, and lose interest in everything. This silence and restlessness upsets their parents as well. Only in the evening, can they play a little. At night, mosquitoes trouble them continuously, and the lack of breeze makes it difficult to sleep. Like their children, the parents also spend the nights restless with broken sleep. The heat affects Chote Lal's wife severely, as she experiences frequent nosebleeds, often feels dizzy, and loses the desire to work.

According to Chote Lal, the government does nothing for them, and people from outside avoid them. Others dislike their way of living and eating, which results in social isolation and discrimination. Chote Lal's experience highlights the deep-seated relationship between caste and homelessness and shows how those belonging to marginalized castes are often the most affected by climate change.

2. Food Insecurity

Nearly 69 per cent of all the survey respondents reported that food was among their primary expenses during the summer months.

In Delhi, following sustained requests by civil society organizations, including HLRN, the provision of free meals twice daily in homeless shelters was initiated during the COVID-19 pandemic and continues to this day. Despite this, 49 per cent of the respondents living in shelters spend a considerable amount of their incomes on food, flagging concerns over the quality and quantity of the food available.

Additionally, the food in shelters does not meet the nutrition requirements for various groups of people, particularly those engaged in heavy manual labour, women, especially pregnant and lactating mothers, children, older persons, and persons with serious

health issues. In FGD-6, respondents in a recovery shelter said that they are mostly served potatoes with some rice and few rotis (breads), which not only impacts how they recover, but also increases their discomfort during summers.

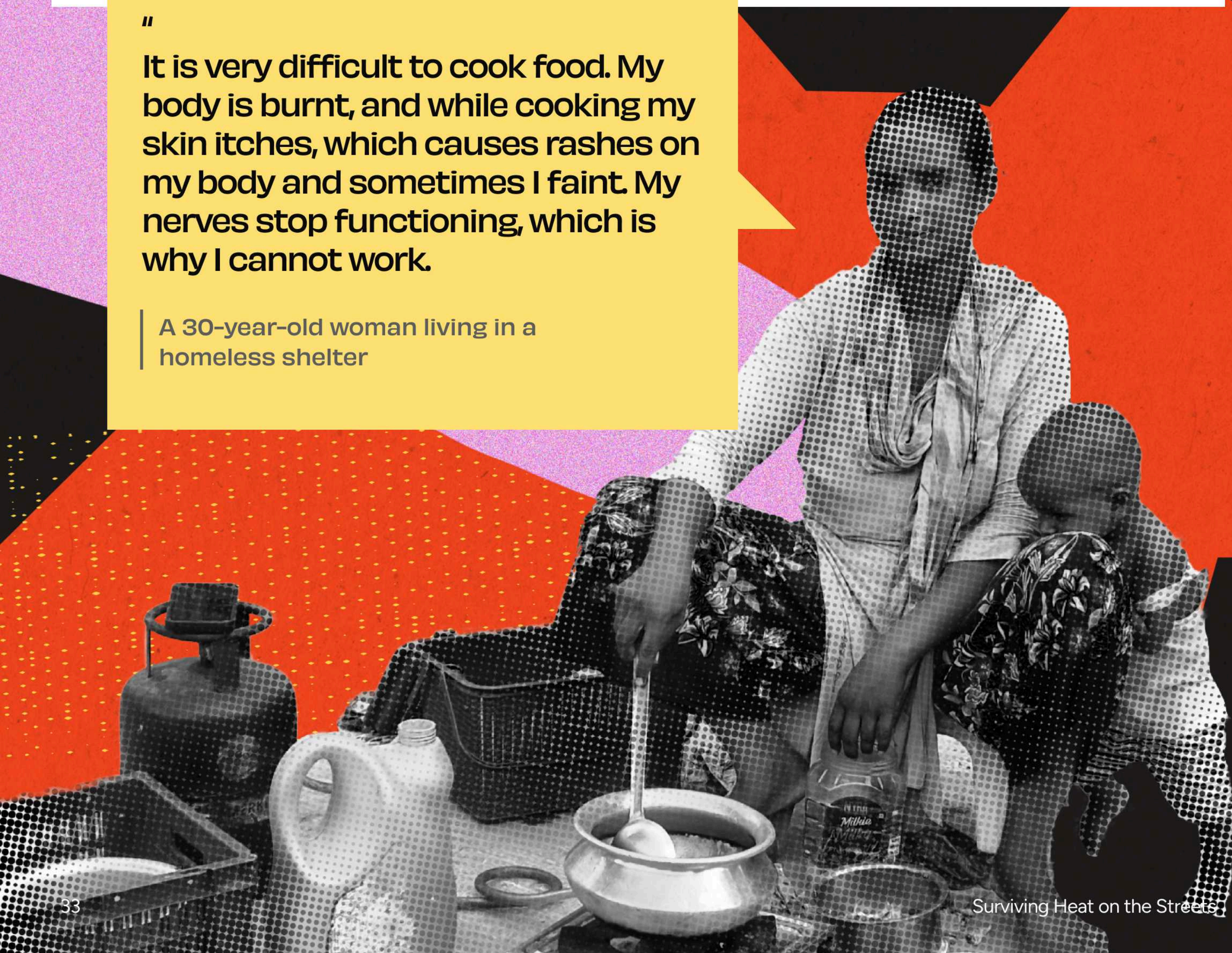
Challenges in Cooking and Storing Food

The provision of free meals in shelters is restricted for the residents, leaving out a vast majority of homeless persons living on the streets. Thus, they have to buy or cook their own meals or rely on charitable organizations or individuals. However, many households lack ration cards, due to which they cannot buy ration at market rates daily and have to rely on donors or sleep hungry (FGD-7).

“

It is very difficult to cook food. My body is burnt, and while cooking my skin itches, which causes rashes on my body and sometimes I faint. My nerves stop functioning, which is why I cannot work.

A 30-year-old woman living in a homeless shelter



Furthermore, those living in the shelters and the streets cannot store coked food, as it spoils quickly during the heat. This places a disproportionate burden on women, who are largely responsible for cooking, as they have to cook multiple times in a day. With most households lacking access to gas cylinders, women often cook on traditional chulhas (mud or clay stoves).

Sometimes, rats and dogs also make it difficult for them to cook and store food, due to which some women have to make extra rotis (bread) to feed the animals (FGD-7). Others said that they did not feel like cooking during summers, due to which they either rely on donors or buy food from outside.

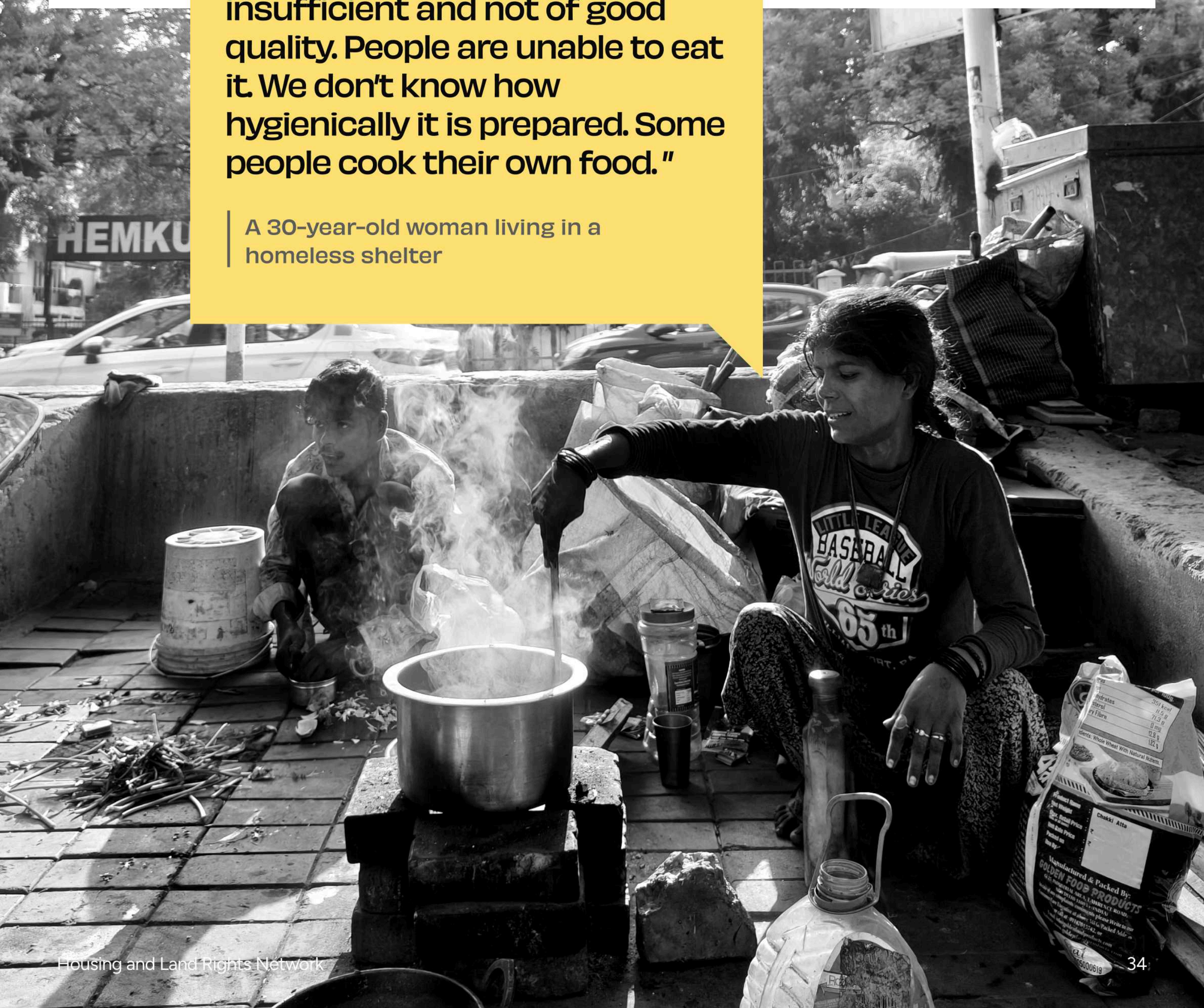


The intense heat from cooking, combined with soaring summer temperatures, leads to **excessive sweating, faintness, and anxiety**, while smoke from the stoves causes **coughing and respiratory discomfort**.

"

The food provided is insufficient and not of good quality. People are unable to eat it. We don't know how hygienically it is prepared. Some people cook their own food."

A 30-year-old woman living in a homeless shelter



3. Livelihood Challenges

As informal workers, homeless persons face livelihood uncertainty because of lack of formal education or professional training, pre-existing health conditions, and lack of availability of work. Post the Covid-19 pandemic, livelihood options for homeless persons continues to be affected, forcing many to rely on begging for survival.

Around 72 per cent of the homeless persons surveyed engage in the informal economy as daily wage labourers, waste pickers, waiters and helpers in weddings and parties, construction workers, street vendors, rickshaw pullers, among others. Nearly 16 per cent of the respondents rely solely on begging for income, while 12 per cent depend on their family for sustenance.

Several respondents engage in more than one type of informal work depending on seasons and availability, and a few beg when there is no work available.

" I do not get work, and whenever I do, it is for very little money. **I am always unwell, so I don't even feel like working.** On top of that, in the heat, I just feel like lying down and not going to work at all. "

A 28-year-old man who works small jobs and engages in begging

Health Impacts of Informal Work

These challenges are further exacerbated during summers, due to the physically intensive nature of manual work.

Others who worked as construction workers, and loaders and unloaders, said that they could not pick heavy objects throughout the day as they felt breathless while working. Similarly, a balloon seller also remarked about feeling breathless while blowing balloons during heat. Those who worked near traffic signals, either selling small goods, or begging, have to also face the heat emanating from stationary cars.

Others who worked as construction workers, and loaders and unloaders, said that they could not pick heavy objects throughout the day as they felt breathless while working. Similarly, a balloon seller also remarked about feeling breathless while blowing balloons during heat. Those who worked near traffic signals, either selling small goods, or begging, have to also face the heat emanating from stationary cars.

Nearly 78 per cent of the respondents who work, spend their day and sometimes evenings and nights working outdoors, whereas 20 per cent of the respondents work indoors. The remaining 2 per cent work both outdoors and indoors. While those working outdoors face numerous challenges due to direct exposure to heat, indoor workers who are carpenters, painters, labourers, domestic workers, factory workers, among others, do not have adequate facilities in their workplace such as fans, air conditioners, or cold water to cope with the heat. **When we work inside homes, it feels humid and suffocating, and when we work outside, the heat and hot winds feel unbearable. (A 48-year-old man working as a painter indoors and outdoors).** For those who work in wedding-parties, although fewer jobs are available during summers than in other months, being inside air-conditioned halls provides some momentary relief from the heat, however, the impact of stepping back outside in the heat is worse, as they feel dizzy, thirsty, and even find it difficult to walk sometimes (FGD-5).

Other physical impacts of working during heat includes a combination of burning sensations, skin irritation, marks and boils on the skin or feet, excessive sweating, eye burns, headaches, body aches, hand and leg aches, excessive thirst and dehydration, sickness or fever,

feeling tired, numbness in the body, weakness, breathlessness, and vomiting. Several respondents mentioned that sweat gets into their eyes, causing a burning sensation, difficulty in seeing, and inability to continue working.

"

While pulling my vending cart, my clothes get completely drenched, and by evening my body starts itching. My throat feels dry from the heat and thirst and I no longer feel like working. My whole body heats up, making it very difficult to work"

A 30-year-old man old street vendor

01

“

Here, under the bridge, the hot air from the vehicles makes it hard to breathe, and the road becomes so hot that heat radiates from it. Because of this, the body feels overheated, sweat pours out, and itching starts all over. I cannot work due to these problems.”

A 54-year-old man who sells goods at traffic signals and sometimes engages in small labour work.



"

The heat and hot winds make my body burn, and my clothes are soaked with sweat. I don't feel like working at all, and because of the lack of water in the heat, I am unable to work."

A 27-year-old man who works at wedding-parties and as a loader-unloader.

Physical Impacts of Working During Heat

13 respondents
Burning sensation in the body and the eyes.

20 respondents
Thirsty / Dehydration

10 respondents
Skin irritation and marks/boils on the skin / feet

13 respondents
Sickness / fever

23 respondents
Excessive sweating

28 respondents
Feeling tired or weak

16 respondents
Ache in the body, head, hands, or legs

20 respondents
Feeling faint or breathless



Homeless Persons Engaged in Informal Work Are Losing Work Hours in the Absence of Protection Against Heat in their Workplaces

“ When the sun is too strong, working becomes very hard. I feel dizzy and want to take a day off, but I can’t, because if I do, I won’t get the day’s wage. At work, when we ask for cold water, the contractor gives us hot water. I don’t feel like drinking it, but the thirst forces me. When new houses are being built, there’s no electricity, so there’s no air inside. I feel suffocated and anxious, and I can’t work. Sometimes blood even comes from my nose, and I have to stop working.”

- A 32-year-old man working as a construction worker

Homeless persons working in the informal economy are especially vulnerable to heat related impacts, due to the absence of any form of protection against the heat at their places of stay and work. **Only 5 per cent of the respondents who work, have basic facilities for drinking water or shade provided by their employers.**

These include those working and living in the homeless shelters, and those who work as tailors and in boutiques. The rest have to purchase drinking water or rely on others to give them water, while they find shade under nearby trees, flyovers, inside metro stations, outside temples or air-conditioned shops.

The physical stress of working during the heat, along with the absence of basic facilities provided by the employers, impacts the mental health of homeless persons and is resulting in direct loss of working hours and wages. At least 8 respondents felt restless due to the heat, while 13 respondents didn’t feel like working during the heat. Around 51 per cent of the respondents who work said that they were losing between one to six hours of work each day. Of these, 72 per cent were sole earners

of their household. While 31 per cent of the respondents were losing up to 2 hours of work, on an average, **homeless persons are losing 72 minutes of work each day.**

“

When we go to work somewhere, if the employer is kind, he gives us cold water, tea, or cola. If the employer is not, then **we don’t get any such facilities, and sometimes we even have to buy drinking water with our own money.”**

A 33-year-old man working as a manual labourer

In FGD–1, women who are employed as construction workers explained how the heat severely affects their ability to work, limiting them to only 4–5 hours of labour each day. One woman shared that she brings her child to the worksite and works near him; the child also suffers in the heat and frequently develops a fever.

Moreover, 73 per cent of the respondents could not work for up to 40 days in the two months preceding this survey due to heat. 60 per cent of them are sole earners in their households. 15 per cent of the respondents could not work for up to 15 days, while on an average, the respondents lost 14 days of work in two months. Many had to take

leaves due to the impact of heat on their health, while others lost their jobs due to sickness and consequent leaves from work. **“When I fall sick, they remove me from work”**, a 30-year-old woman working as a labourer said.

In addition to this, some respondents are adjusting their working hours by starting earlier in the day then working in the evenings. They either do not work during the afternoons at all or keep taking short breaks.

Notably, some of the remaining 49 per cent of the respondents who were not losing work hours, or 27 per cent who did not take leaves, were not unaffected by heat, but simply had to continue working despite the harsh conditions or lose their daily wages.

“I mostly try to finish whatever work I can in the early morning, because in the afternoon it is impossible to pull my cart rickshaw. After that, I try to work again in the evening, if I can find it.






I sometimes work at noon, but the heat is so intense that **the hot winds make my whole body burn, which causes dizziness, and once my nose even bled** in the summer. That is why I prefer to work only in the cooler hours. ”

A 30 year-old-man who works as a rickshaw cart puller

Increase in Expenditure and Debt

Amidst precarious livelihoods and reducing incomes, homeless persons bear additional financial burden to access basic necessities during summers. Food, water, and health and medicine related expenses were the biggest household expenses for them.

Highest expenditure items during summers

| | |
|--|------|
|  Food | 69 % |
|  Water | 68 % |
|  Health and Medicines | 65 % |
|  Alcohol and Other Substances | 32 % |
|  Childcare | 23 % |

Additionally, 32 per cent of the respondents have obtained loans and accrued debts, for health related, and wedding related expenses, among other household requirements.

Repaying these loans levy heavy financial burden during summers as homeless persons earn less and spend more on basic necessities. One female respondent stated that she is struggling to pay her loan of Rs 10,000 (113.48 USD) back, which she availed due to her child’s ill health eight months ago. Her monthly household income is between Rs 5,000–7,000 (56.74–79.44 USD), and she spends up to Rs 3,000 (34.05 USD) on water during summers.

“ There is always worry about the debt—**where the money will come from, how it will be repaid**—and due to the interest, the debt keeps increasing. ”

A 60-year-old woman whose monthly household income is between Rs 1,000–3,000 (11.35–34.05 USD).

Impact on Mental Health

Due to Livelihood Challenges

Almost 89 per cent of the respondents are worried about the various challenges related to livelihood, 77 per cent are angry or irritated, and 68 per cent are feeling helpless. While men overwhelmingly reported worry (90 per cent) and anger or irritation (70 per cent), the data shows that women are experiencing consistently higher levels of emotional distress across all five emotions measured. Around 90 per cent of the women reported feeling helpless, nearly double the rate among men, whereas 78 per cent women expressed sadness or despair compared to only 28 per cent of men.

“

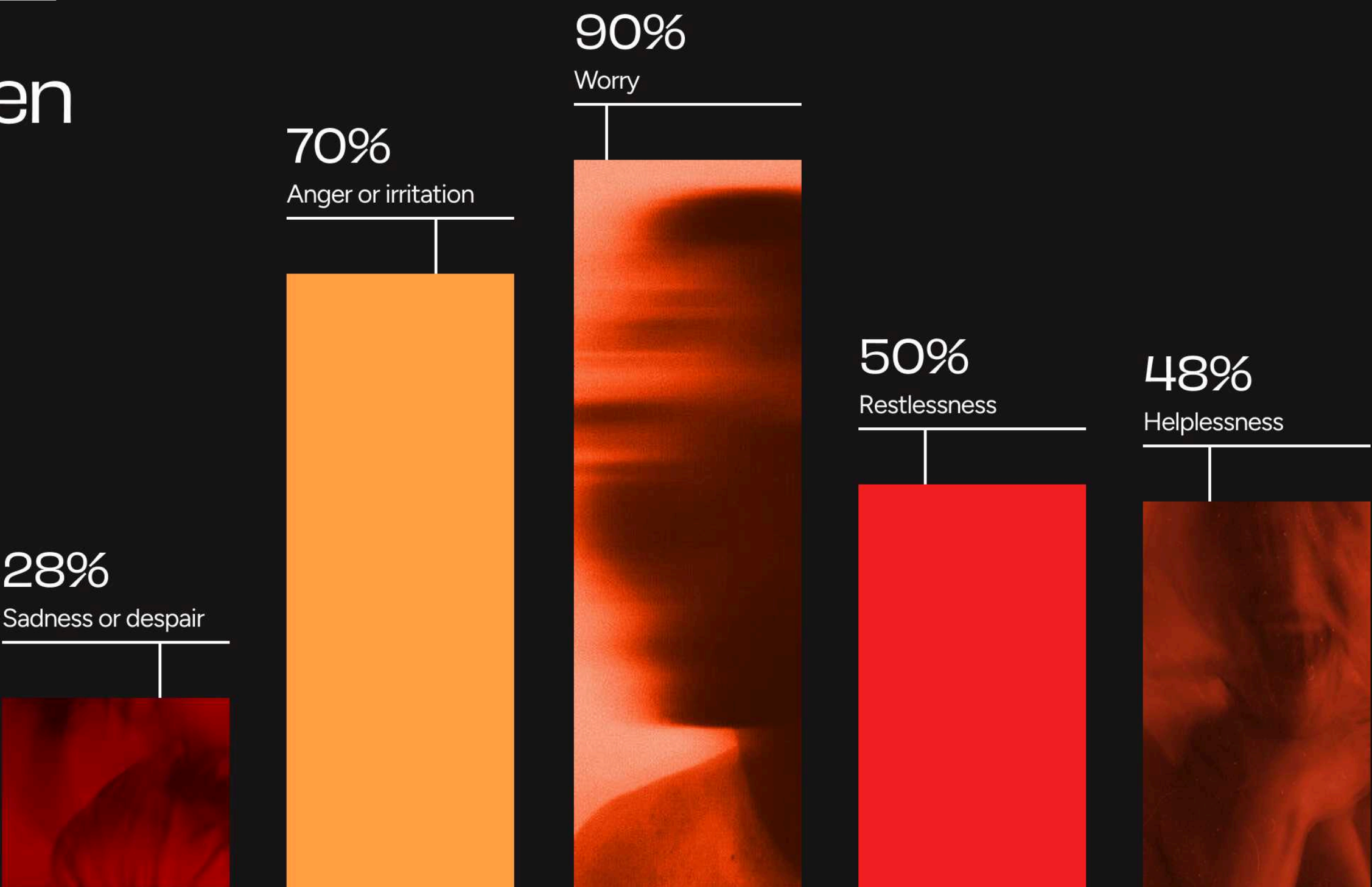
Because of all these worries, there is constant restlessness in the mind, my health suffers, and I live in fear.”

A 60-year-old man who works at wedding-parties and engages in small labour work

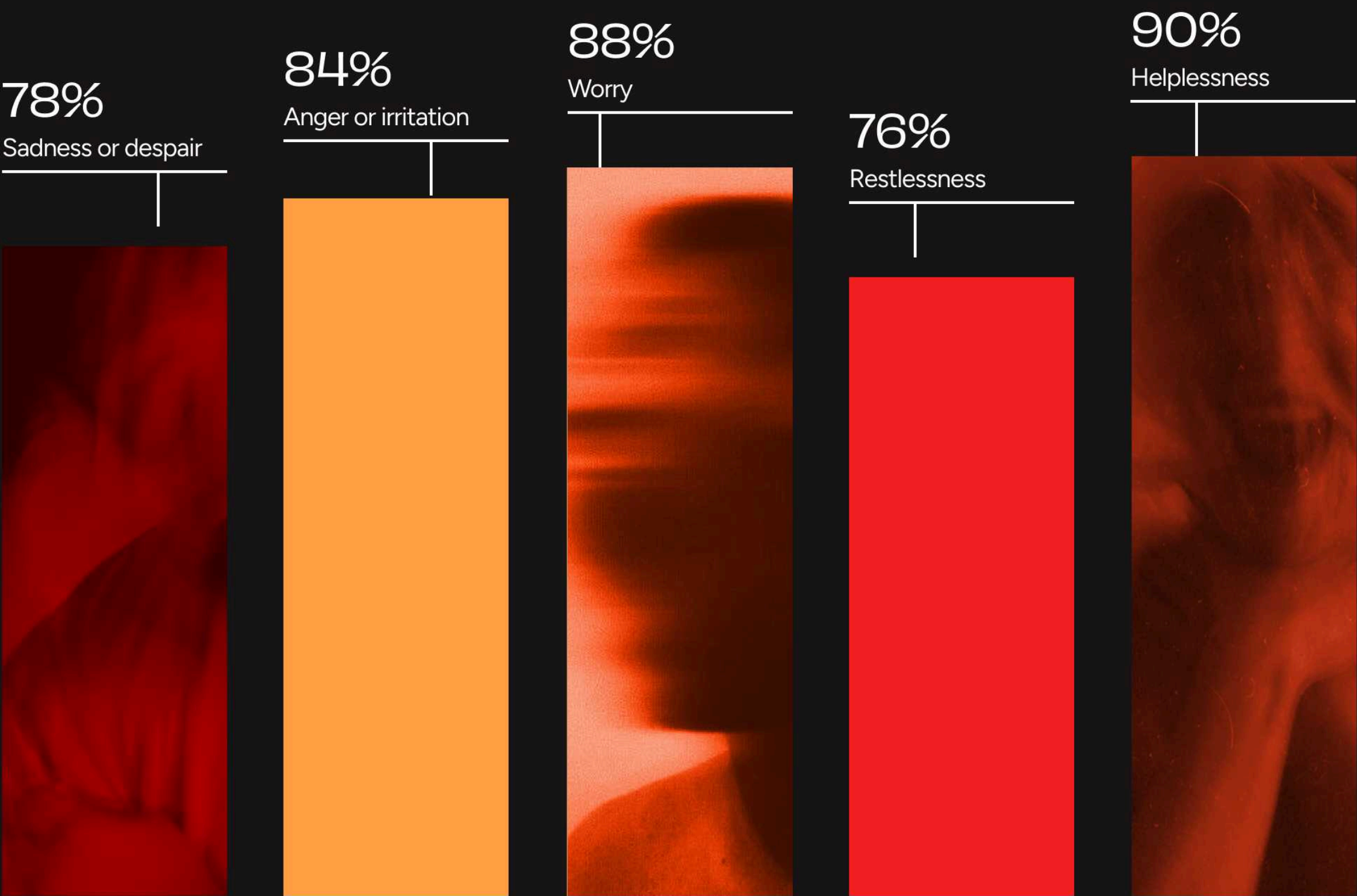


Impact of **Livelihood Challenges** on the Mental Health of the Homeless Persons

Men



Women



Livelihood Struggles under Extreme Heat

A Case Study from Delhi's Traffic Signals

Sanjeet, a 35-year-old man, lives with a physical disability which developed when he was five to six years old. Originally from Ajmer, Rajasthan, he has been living in Nehru Place, Delhi for the past 15 to 20 years. He lives on the streets with his community of more than 100 families, from Rajasthan. These families spend their days, working in a nearby market, selling toys, pushing carts, or doing daily wage labour.

When Sanjeet first came to Delhi, he survived by begging. Later, someone donated a wheelchair to him, which allowed him to set up a small shop selling bidi (hand-rolled cigarettes) and cigarettes. Occasionally, during festivals, he sells seasonal goods.

The lack of adequate housing is one of his biggest challenges. With no permanent shelter, he stays on the pavement, without electricity, water, toilets, health services, food security, or a safe place to store his belongings. **He lives with the constant fears of theft, harassment by police, insects during the rainy season, and the lack of proper bedding and clothing.**

Summers are especially harsh for him. Due to his disability, his body temperature rises quickly in the heat, and he experiences dizziness, excessive sweating, dehydration, itching from sweat, redness and burning of the skin, and rashes. At night, the pavement remains hot, making it nearly impossible to sleep. There is no breeze, mosquitoes bite constantly, and the noise of vehicles continues throughout the night disturbing his sleep and leaving him weak and tired during the day. His body feels drained, and he loses all motivation to work.

Continuing his livelihood in these conditions is a daily struggle. Standing under the scorching sun on the pavement to sell goods is exhausting, and

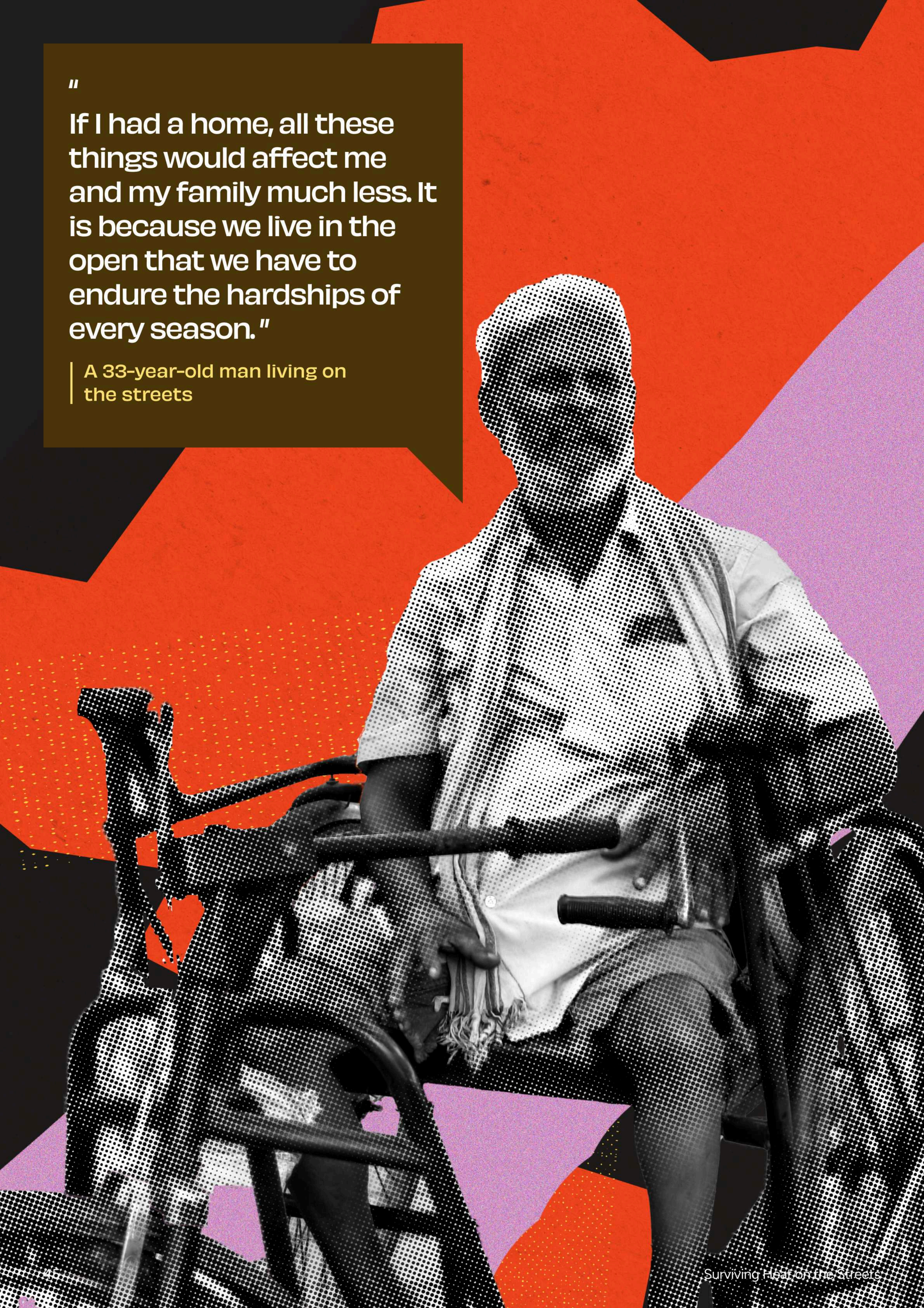
by noon, he wishes to bathe again, becomes excessively thirsty, and longs for cold water. The heat, dizziness, and thirst make it almost impossible to continue for long. Customers rarely get out of their vehicles in such conditions, which has further reduced his earnings. Whatever little he earns is spent entirely on food and medicines.

The heat sometimes overwhelms him so much that he feels his mind stops functioning. He becomes angry and frustrated, at times feeling like leaving the place altogether or harming himself. Surrounded by others in similar conditions, he often withdraws himself and avoids speaking to anyone. The constant stress of living on the pavement weighs heavily on him, leaving him mentally strained and unwilling to work.

“

If I had a home, all these things would affect me and my family much less. It is because we live in the open that we have to endure the hardships of every season.”

| A 33-year-old man living on the streets



4. Housing Insecurity

For urban poor communities, access to adequate housing⁵⁹ is not only about having a physical structure but also about safety, stability, and opportunity. Adequate housing protects against extreme weather, reduces exposure to violence, and supports economic and psychological wellbeing by offering better access to livelihoods, education, and basic services. In its absence, people are left vulnerable to health risks, theft, assault, sexual violence, and constant displacement,⁶⁰ which can cause significant physical and psychological trauma. Over time, these experiences further result in their social exclusion, restricting access to education, employment, and basic services, and reinforcing intergenerational cycles of poverty and homelessness.

Nearly 95 per cent of the respondents stated that they felt extremely hot during afternoons, while 56 per cent said that they also felt extremely hot at nights. During these times, they were mostly present at their workplaces, or on the streets or shelters where they live, indicating that neither their workplaces, nor their places of stay were well-equipped with facilities to reduce the impact of heat on them.

“

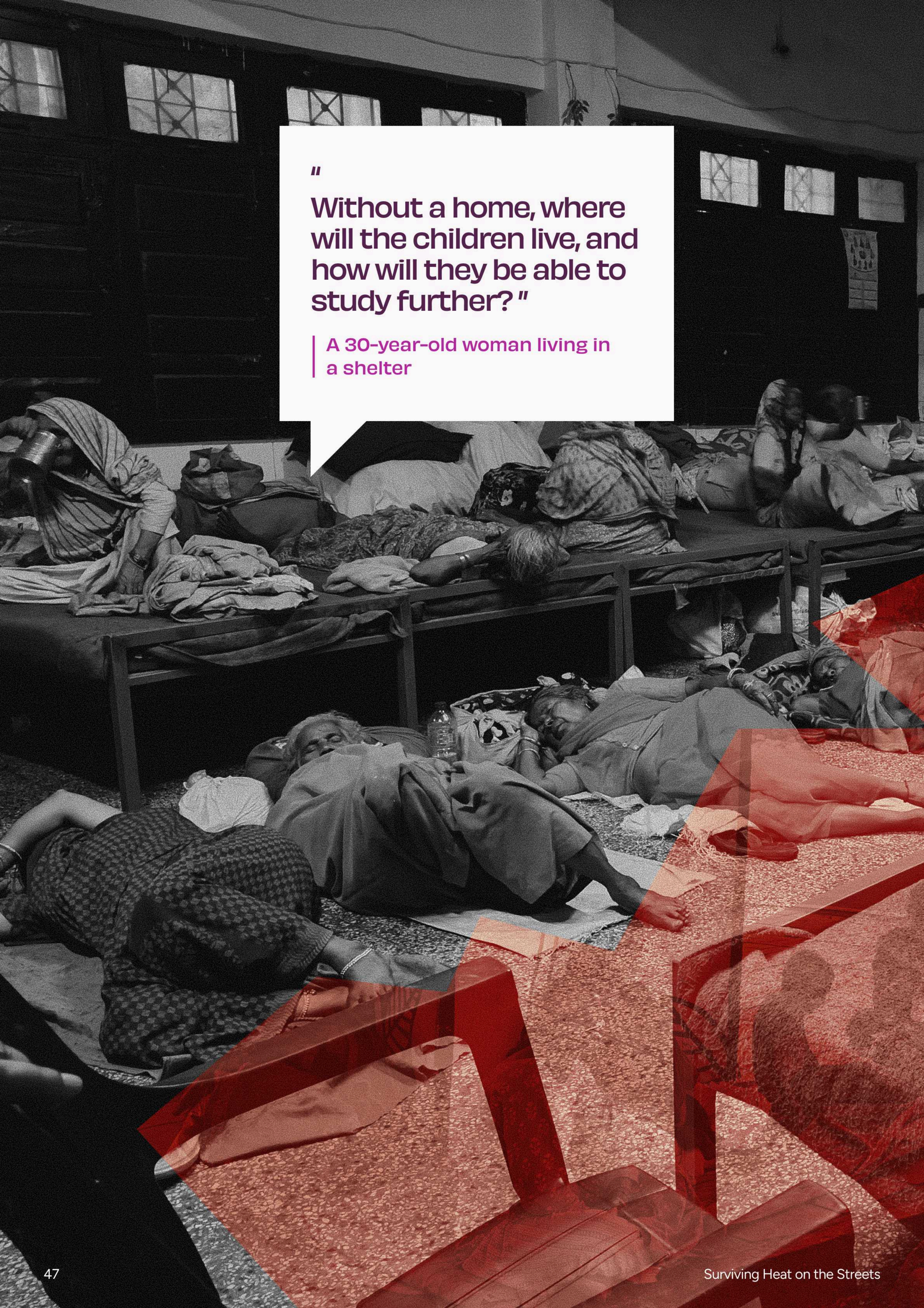
Our situation is such that we cannot afford to rent a house. The rent itself is Rs 6,000–7,000 per month, and with that amount, it becomes very difficult to manage the household.”

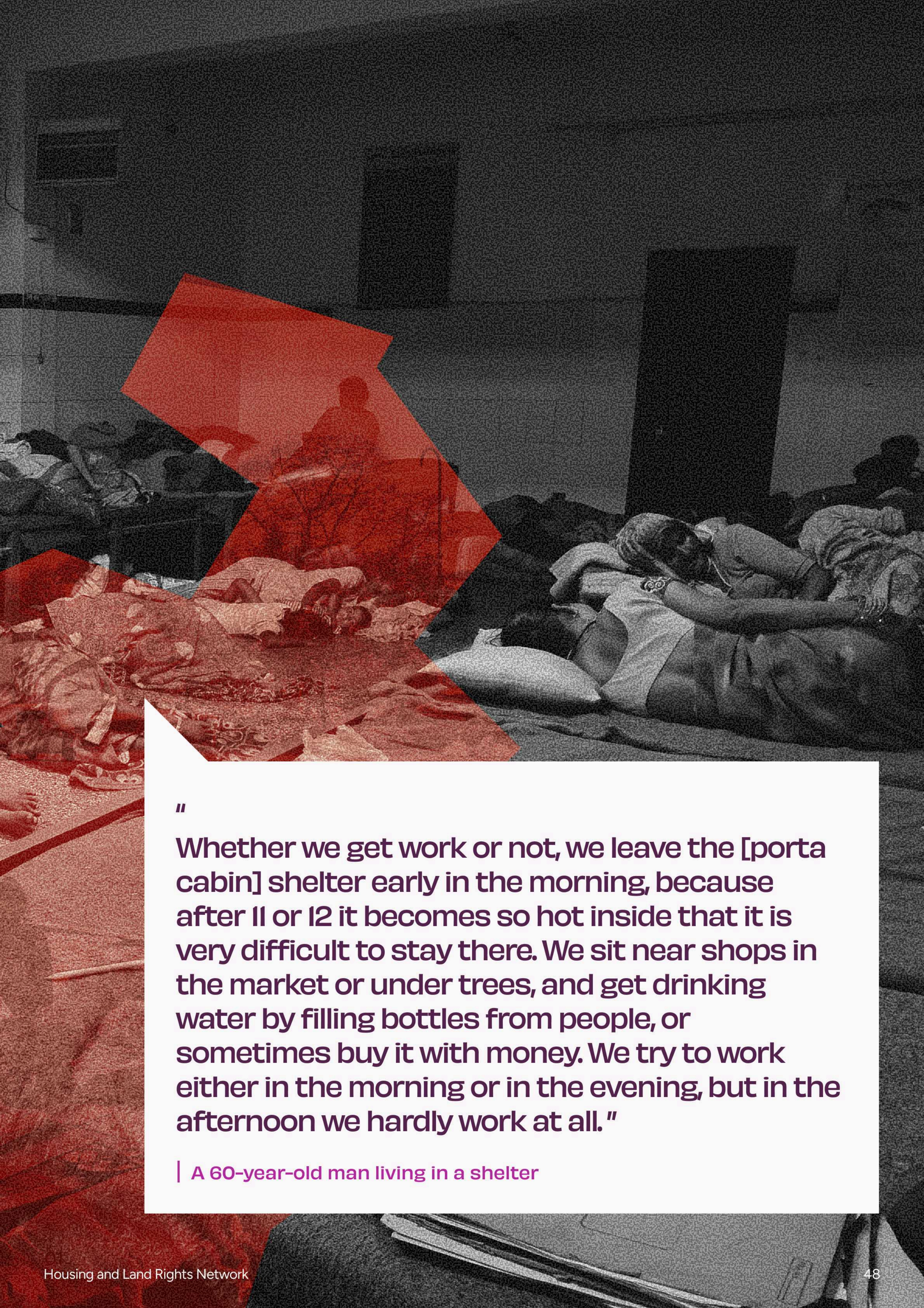
A 37-year-old man living on the streets

“

Without a home, where
will the children live, and
how will they be able to
study further?”

| A 30-year-old woman living in
a shelter





“

Whether we get work or not, we leave the [porta cabin] shelter early in the morning, because after 11 or 12 it becomes so hot inside that it is very difficult to stay there. We sit near shops in the market or under trees, and get drinking water by filling bottles from people, or sometimes buy it with money. We try to work either in the morning or in the evening, but in the afternoon we hardly work at all.”

| A 60-year-old man living in a shelter



“

If we had our own home, we
would bathe with running water,
stay under lights and fans,
study properly at home, watch
TV, and play with friends in the
park.”

| A 13-year-old boy living on the streets

“

If we had our own home, we would live so well. But here, with children, how are we supposed to live? There is always a sense of restlessness in the mind, and anger builds up because we don't have a home of our own.”

| A 35-year-old woman living on the street



Impact on Mental Health

Due to Housing Insecurity

Around 78 per cent of respondents reported feeling worried about not having adequate housing, while 73 per cent felt helpless and 72 per cent expressed anger or irritation. There was little difference in the mental health impacts of those living on the streets or shelters, accounting for 83 per cent of those living on the streets and 71 per cent of those living in the shelters, feeling worried; 74 per cent of those living on the streets and 71 per cent of those living in the shelters feeling helpless; and 73 per cent of those living on the streets and 71 per cent of those living in shelters feeling anger and irritation. 61 per cent of those living on the streets reported feeling restless and 56 per cent felt sadness or despair as compared to 47 per cent of those living on the streets feeling both. This indicates that those living in the shelters are equally, if not more, distressed about the lack of adequate housing, as those living on the streets.

Women consistently reported higher levels of negative emotions than men, pointing to the gendered impacts of housing insecurity. Among men, a higher percentage (75 per cent) expressed that they were worried, followed by 67 per cent feeling angry or irritated, and helpless. On the other hand, a higher percentage of women (82 per cent) expressed feeling worried, followed by 80 per cent feeling helplessness, and 78 per cent anger or irritation. Additionally, significantly higher levels of restlessness (76 per cent), and sadness or despair (71 per cent) among women as compared to men is observed.

"

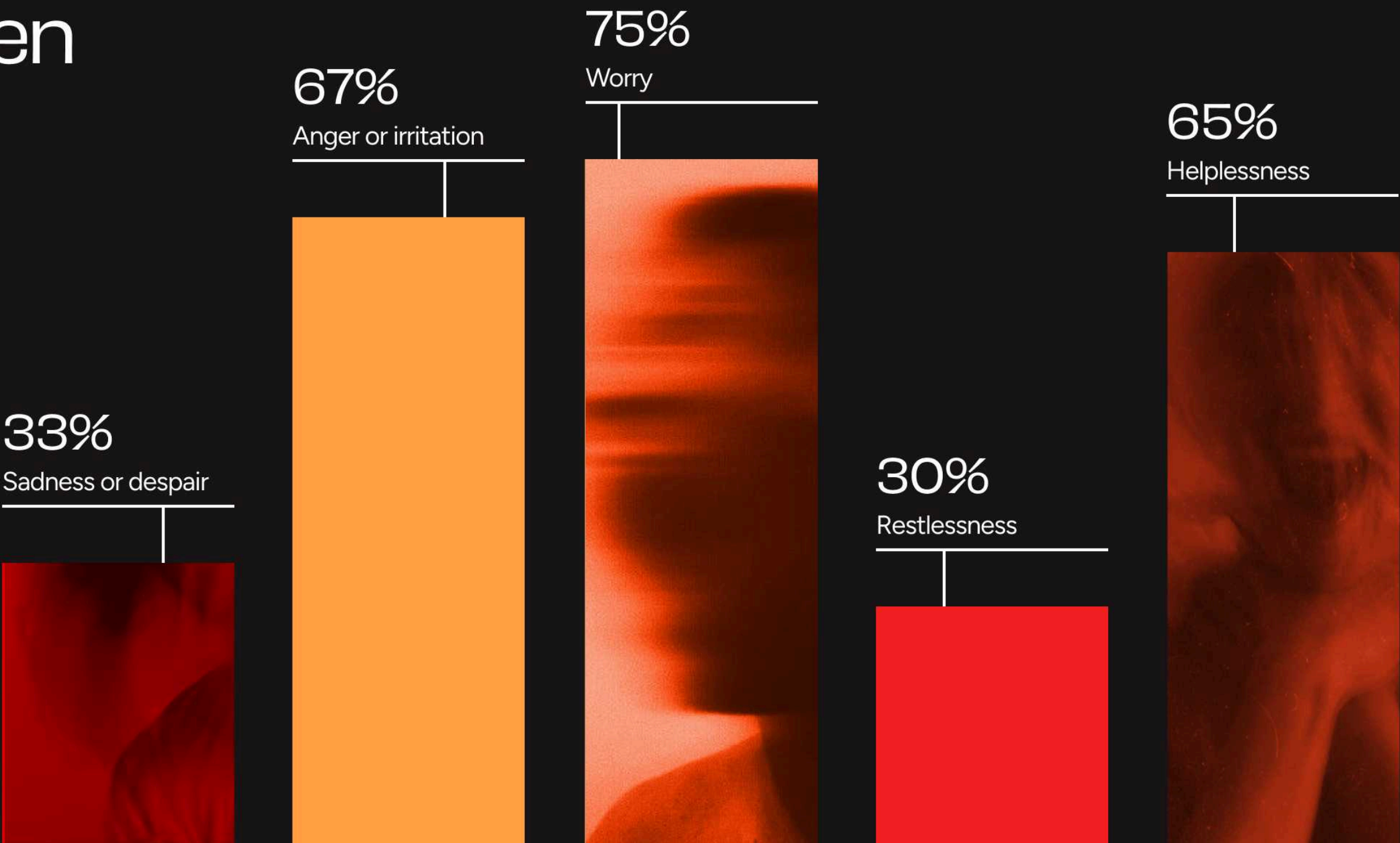
Shelters should be built in a better way, with more colours, and they should be proper RCC buildings. The porta cabins become very hot. There should also be trees and plants around the shelter."

| A 60-year-old man living in a shelter

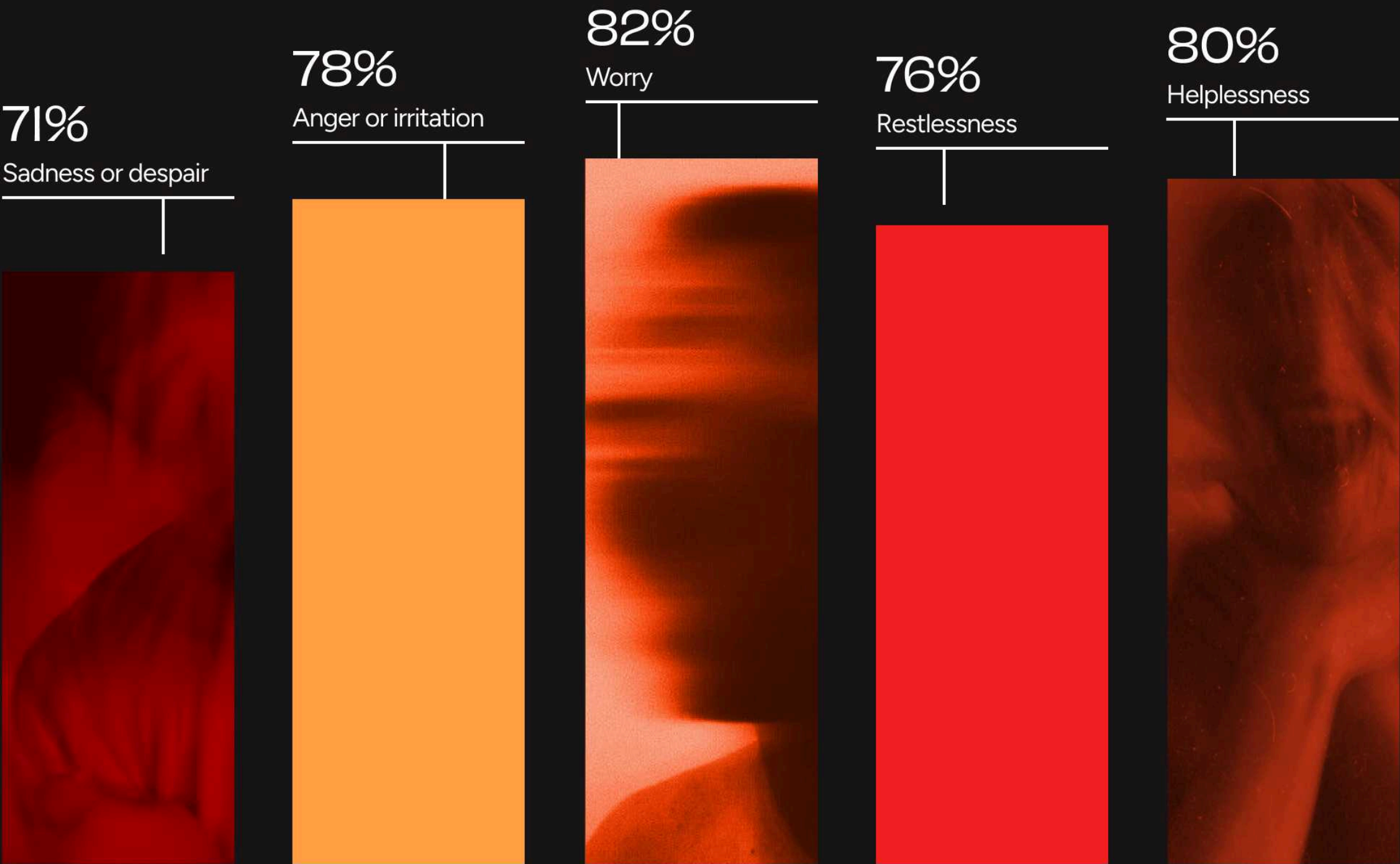


Impact of **Housing Insecurity** on the Mental Health of the Homeless Persons

Men



Women



Homeless in the Heat

A Case Study of an Evicted Family in Delhi

Kishore, a 55-year-old ironsmith from the Gadia Lohar community (traditional blacksmiths), currently resides in an informal settlement at Harijan Basti in Dwarka Sector 7, Delhi. He has seven children, five of whom are married. One daughter and one son continue to live with him. The forceful demolition of the informal settlement in May 2025, has brought significant disruption to their lives and continues to shape their daily struggles.

This demolition, which rendered his family homeless, was carried out during peak summer month in Delhi. Prior to their eviction, electricity and water connections were cut off. Ever since, families have been compelled to procure drinking water from distant locations, often transporting it on rented carts or rickshaws at a cost of Rs 250 per household. This water supply is limited to drinking purposes only. The absence of electricity during the summer months exacerbated their hardship. Living outdoors left families exposed to the severe mosquito infestations that peak during this season. As a result, illnesses became widespread within the community, with frequent cases of malaria, dengue, typhoid, and diarrhoea, including one child who contracted typhoid three times. Children were unable to sleep at night due to heat and mosquitoes, leading to irregular school attendance. **Over time, their enrolment was cancelled, and Kishore's two children, who were in ninth and tenth grade at the time of demolition, now dropped out of education.**

The family's financial condition has also deteriorated. For two months after the demolition, Kishore searched unsuccessfully for rental accommodation. Eventually, when he found a

house, he was forced to borrow a sum of Rs 60,000 (675.69 USD) on interest to pay the rent. The accumulating interest has since nearly doubled the amount he owes. Kishore, like many other Gadia Lohar families, sources clay idols from Kolkata to be sold during the festive season as an additional source of income. After the demolition, he was forced to buy these idols on credit, adding another financial burden to the family. Since the demolition, harassment from government authorities and the police to vacate the land completely has meant that most families were unable to set up their shops, leading to a severe loss of income. **Kishore's daughter's marriage had to be cancelled because there was no home where the groom and his family could be received.**

The caretaker visits sporadically and fails to maintain cleanliness, leaving the toilet in an unhygienic state. Water supply is irregular, forcing families to ration their use. A nearby drain, dug up during the demolition, remains unrepaired. During heavy rains, waterlogging rises to knee level, worsening unsanitary conditions and fuelling mosquito breeding. Snakes are also frequently spotted in the area. Illness is widespread among both children and adults, while high rates of school dropouts persist across the community.

Kishore's situation reflects the wider challenges faced by families arbitrarily evicted by government authorities without rehabilitation. In 72% of forced evictions recorded in 2022 and 2023, the state failed to provide resettlement or rehabilitation, leaving families permanently or temporarily homeless. Preliminary findings from



HLRN's National Evictions and Displacement Observatory indicate that in 2024 as well, most displaced families received no state support. The demolition has left Kishore's community without stable housing, utilities, sanitation, healthcare, or education for their children. Livelihoods have collapsed, debt burdens are rising, and the

community now appeals for urgent intervention: restoration of electricity and water, provision of alternative housing or relocation sites to sustain livelihoods such as idol-making, and improved sanitation and drainage systems. Without such support, these families remain caught in a cycle of displacement, poverty, and ill health.

The community now appeals for urgent intervention: restoration of electricity and water, provision of alternative housing or relocation sites to sustain livelihoods such as idol-making, and improved sanitation and drainage systems.

5. Physical Health Risks

Homeless persons face several physical health challenges due to the prolonged exposure to extreme heat. **Over 76 per cent of the respondents felt discomfort during summers, and 65 per cent felt sick or extremely tired frequently.** The findings from HLRN's survey highlight a range of health conditions and symptoms that affect homeless persons, including headaches, dizziness or fainting, excessive sweating, reduced or loss of appetite, heat rashes and skin itching, among others. More women experienced dizziness or fainting, loss of or reduced appetite, difficulty in breathing, stomach ache, fever, cough and cold, and loose motions or diarrhoea. Whereas, more men experienced excessive sweating, heat rashes and skin itching, and vomiting.

Around 43 per cent of women are also mentioned that they experience irregular periods during summer months, which includes 72 per cent women between the ages 18–35 years. Eight respondents mentioned that they had boils and rashes on their thighs during their periods, due to which some found it difficult to walk. Some women also felt hotter during their menstruation cycle in the summers, which made them feel disgusted (FGD–7).

For 65 per cent of the respondents, accessing healthcare and related services is one of the biggest household expenses. Nevertheless, 44 per cent of the respondents relied on private doctors or chemists for illnesses during the summer months. Many are unable to go to government hospitals due to the lack of Aadhaar cards, while others find private services more reliable.

For 65 per cent of the respondents, accessing healthcare and related services is one of the biggest household expenses. Nevertheless, 44 per

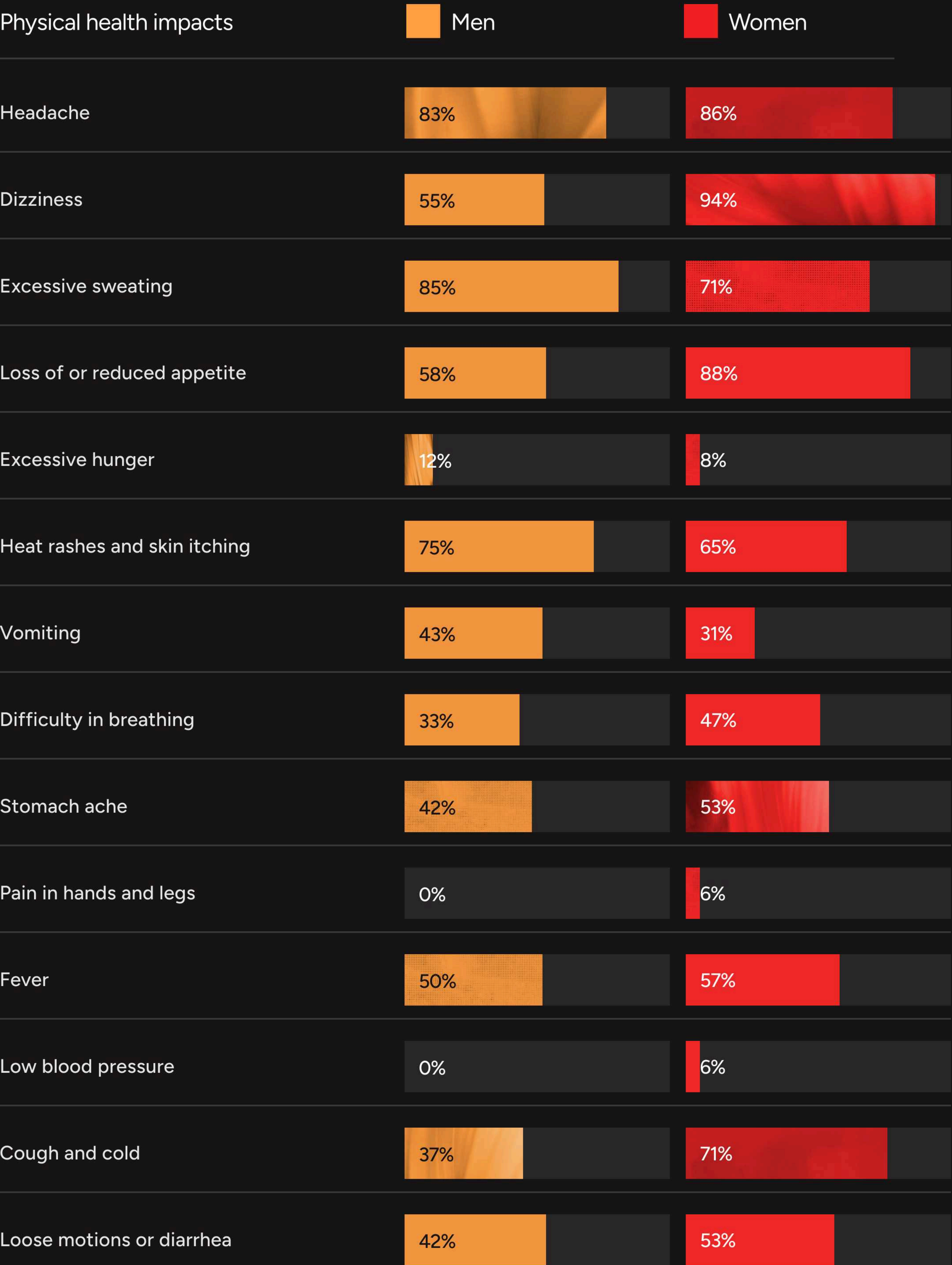
cent of the respondents relied on private doctors or chemists for illnesses during the summer months. Many are unable to go to government hospitals due to the lack of Aadhaar cards, while others find private services more reliable.

" There is **too much running around in government hospitals**, which I cannot manage, so we are consulting **a private doctor in Khanpur.** "

A 14-year-old girl pregnant with her first child

The remaining 46 per cent rely on government hospitals and mohalla clinics (Community Clinics). In FGD–5, respondents stated that earlier they could get medicines at the nearby mohalla clinics, however, since its closure, they have to go to the hospital, which is unaffordable for many.

Impact of heat on the physical health of the respondents



Strategies to Cope with the Physical Impacts of Heat are Not Adequate

In the absence of adequate access to healthcare, homeless persons have to rely on readily accessible remedies to adapt to the heat. These include fanning themselves, wearing loose clothes, or staying hydrated by drinking water, lemonade, *sattu* water ⁶¹, buttermilk, juice, glucose water, and Oral Rehydration Salts (ORS) water, depending on availability.

Respondents also bathe or wash hands and face multiple times a day, and wrapping themselves with wet cloth, but these put them under the risk of running a summer cold and fever.

Some respondents have adapted to the heat by modifying their working hours, beginning early in the morning and returning in the evening, while either pausing work during the hottest hours or taking multiple short breaks.

Many utilize public spaces such as metro stations, temples, or outside air-conditioned shops to find relief from the heat. However, shopkeepers do not let them stay there for long and throw water outside to prevent anyone from sitting there.

"

To protect myself from the heat, I mostly drink lemon water, glucose water and lassi at night so that my body has strength and energy. But still, because of the sun and the heat, by evening my body feels very exhausted."

A 31-year-old man living on the streets

Impact on Mental Health

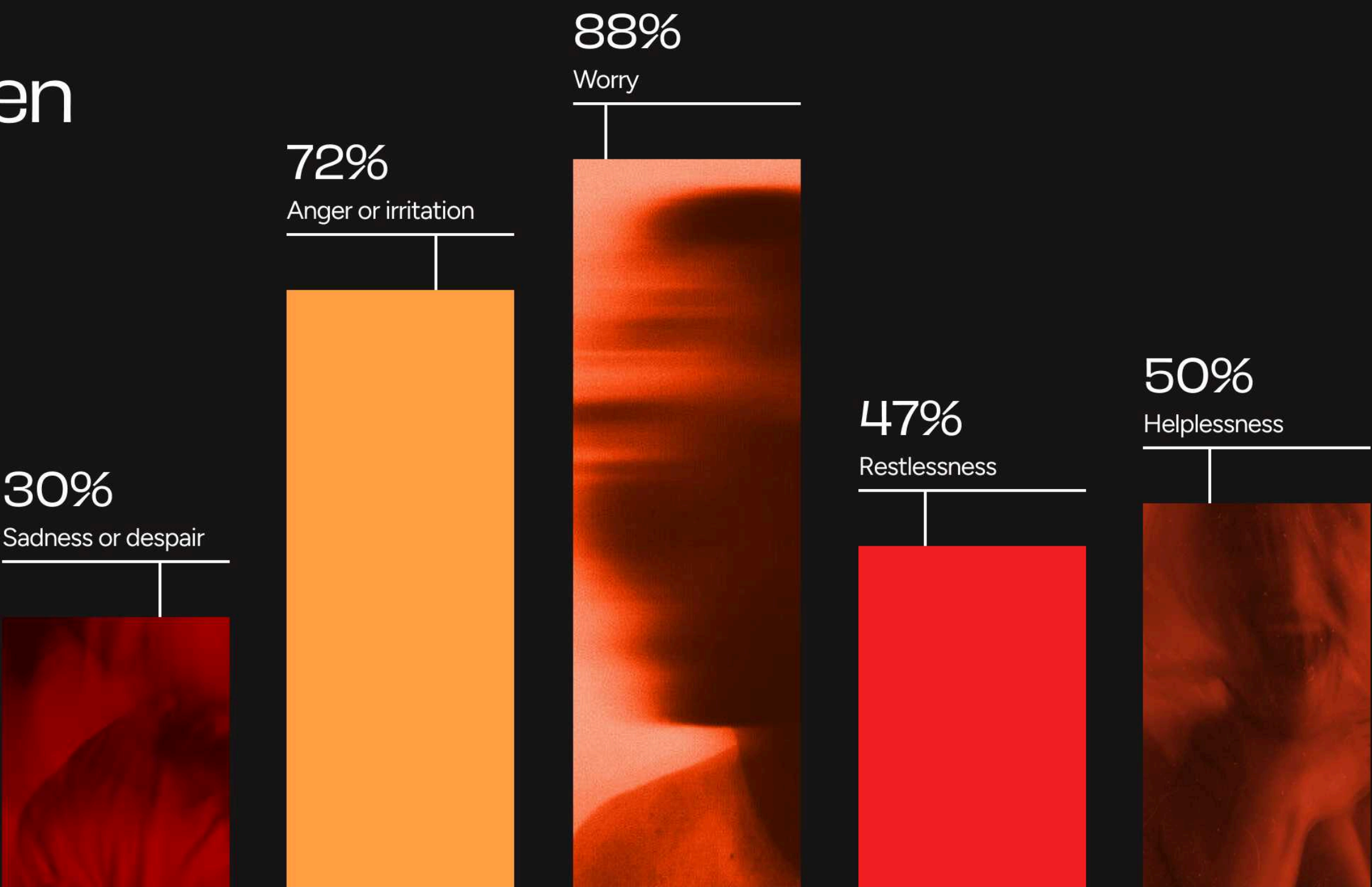
Due to Physical Health Risks

An overwhelming 91 per cent of the respondents were worried about their health and related concerns, while 77 per cent felt anger and irritation. Constant illness, the absence of adequate medical support, and the costs of treatment not only strain their bodies but also impact their mental health. A higher percentage of women expressed mental distress across the five emotions measured, as compared to men, highlighting the disproportionate mental burden of lack of access to healthcare among women.

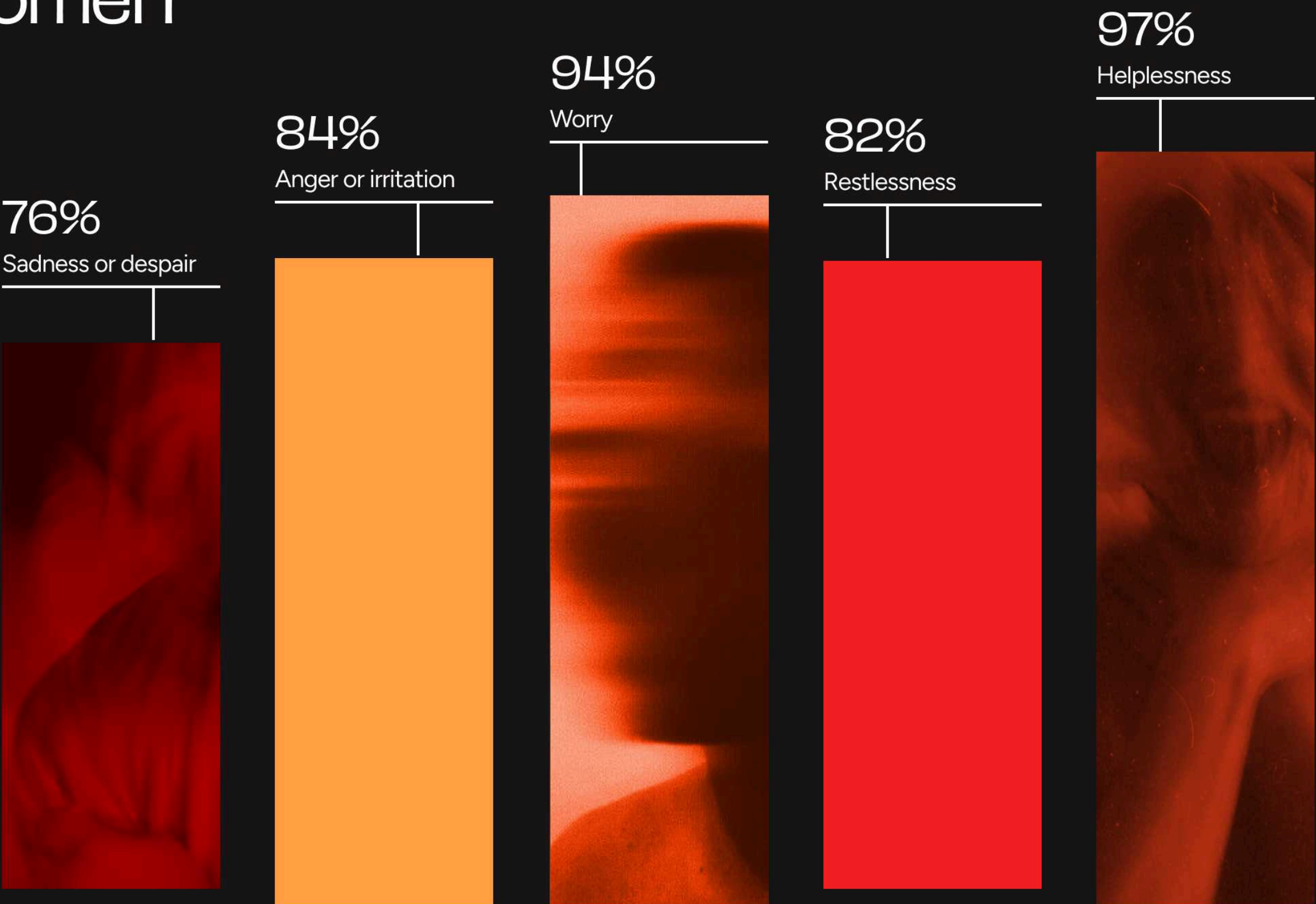


Impact of **Physical Health Risks** on the Mental Health of the Homeless Persons

Men



Women



Extreme Heat and Health

A Case Study of a Homeless Family in a Porta Cabin

Ravi Babu, aged 29, lives with his wife Phooldevi, aged 26, who is three months pregnant, and their four children at a government run homeless shelter for families at Britannia Chowk. They earn a living by collecting and sorting garbage. On Saturdays, he hangs lemon–chili charms (*nimbu-mirch*) on shops and houses and occasionally works as a manual labourer when he finds work.

The family used to live in an informal settlement in Pandu Nagar till they were forcefully evicted and their settlement demolished. While Ravi Babu's family, consisting of him, his wife, his elder brother, sister-in-law, and mother, were resettled in Anand Parbat, the allotment was in his brother's name. It was impossible for two families to live in a single room, due to which Ravi Babu, his wife, and his mother moved to the shelter at Britannia Chowk.

The shelter where they live is a porta cabin, which is a structure made with corrugated metal sheets and a tin roof. Thus, during summers, the shelter becomes suffocating and extremely hot. While DUSIB-run shelters are supposed to have various facilities to deal with the heat, the cooler is broken, the fans do not work, and there is often no electricity. Because of this, the family has to leave the shelter and sit under the roadside shade from morning until evening. At night, they return to wash and bathe, but the water available is hard. In the mornings, water tankers arrive, but the water is dirty and sometimes contains insects. The family has to fetch water from a government tap located 800 meters away from the shelter. The water cooler inside the shelter is always broken, so they purchase ice for cold water. Occasionally, they drink *lassi* (buttermilk) or cold drinks, spending about Rs 50 to 100 daily on these items.

Every day at 5:00 a.m., Ravi Babu goes out to collect garbage and returns by 9:00 a.m. **During the day, the heat makes it difficult for him and his wife to sort through the garbage. The scrap emits a foul smell, causing breathing problems, and shortness of breath.**

Carrying the heavy bags full of garbage causes shoulder pain, scratches on the body, exhaustion, dizziness, and extreme fatigue. To cope with the extreme heat, they wash their hands and feet. Moreover, during summer, there is less work. Even when they get work, they find it difficult to work because of the harsh sun, exhaustion, and dehydration. This makes them irritable, unwilling to talk, and sometimes angry. Sometimes, Ravi Babu also gets agitated at his wife and children.

Recently, their son suffered a heatstroke and was admitted to a government hospital for a week. The family had to spend all their savings, between 8,000—9,000 INR (90.09—101.36 USD) for his medicines and food.

For Phooldevi, who is three months pregnant, the heat causes dizziness and anxiety. The doctor told her she suffers from a lack of water and blood in the body and advised her to get medical tests done, but she could not afford to do so. The doctor also advised her to eat well, stay at home, and avoid worrying. ***“How can I stay at home when I don't have a home? And we can't live without worrying”***. Sorting out scrap materials is also more difficult for her, because the items give off a foul smell, and the filth makes her sick and vomit.

Since cooking is not allowed inside the shelter, they cook their meals by the roadside. Dust blows into the food due to the wind, and mosquitoes and insects fall into the food at night. While cooking, she feels dizzy and nauseous. She often gets angry thinking about the life they are forced to live, becomes silent, and avoids talking. She dreams of relocating to a better place where life would be less harsh, yet knows that hope alone cannot change her reality.

The family expressed their desire for the government to provide them with a small piece of land so they could slowly build their own house, establish a livelihood, and educate their children properly.

6. Sleep Deprivation

Sleep deprivation is a widespread concern among homeless persons, particularly during the summer months. Overall, 68 per cent reported experiencing disturbed sleep at night, while 24 per cent stated that they were unable to sleep at all. **Only a small fraction**—2 per cent—managed to sleep more than **six hours per night**. By contrast, 29 per cent slept for only three to four hours, and 25 per cent for just two to three hours.

Differences were observed between those living on the streets and those in shelters. 76 per cent of respondents living on the streets and 54 per cent of those living in shelters reported disturbed sleep. Interestingly, a complete lack of sleep was reported more frequently by shelter residents (34 per cent) than by those on the streets (19 per cent), contrary to expectations. This can be partly explained by the excessive heat inside porta cabin shelters. In FGD–5, men described feeling the most discomfort at night because their porta cabin shelters, which traps heat throughout the day, is overcrowded at night, which

heats it up even more. In FGD–7 women explained that despite the challenges of sleeping on the streets, including the fear of violence and theft, and the presence of rats and mosquitoes, they avoided sleeping in the porta cabins because of the excessive heat inside. Instead, one or two of them stay up late in the night to guard the others, while they send their young girls to the shelters to sleep.

Multiple factors contribute to this sleep deprivation, some of which are present throughout the year. However, conditions were markedly worse during summers. As many as 95 per cent of respondents attributed their inability to sleep due to the heat, while 94 per cent cited mosquito bites. Additionally, 49 per cent identified mental stress and worry as a barrier to sleep, and 48 per cent pointed to the physical effects of heat, such as constant itching.



68 %

Reported experiencing disturbed sleep at night



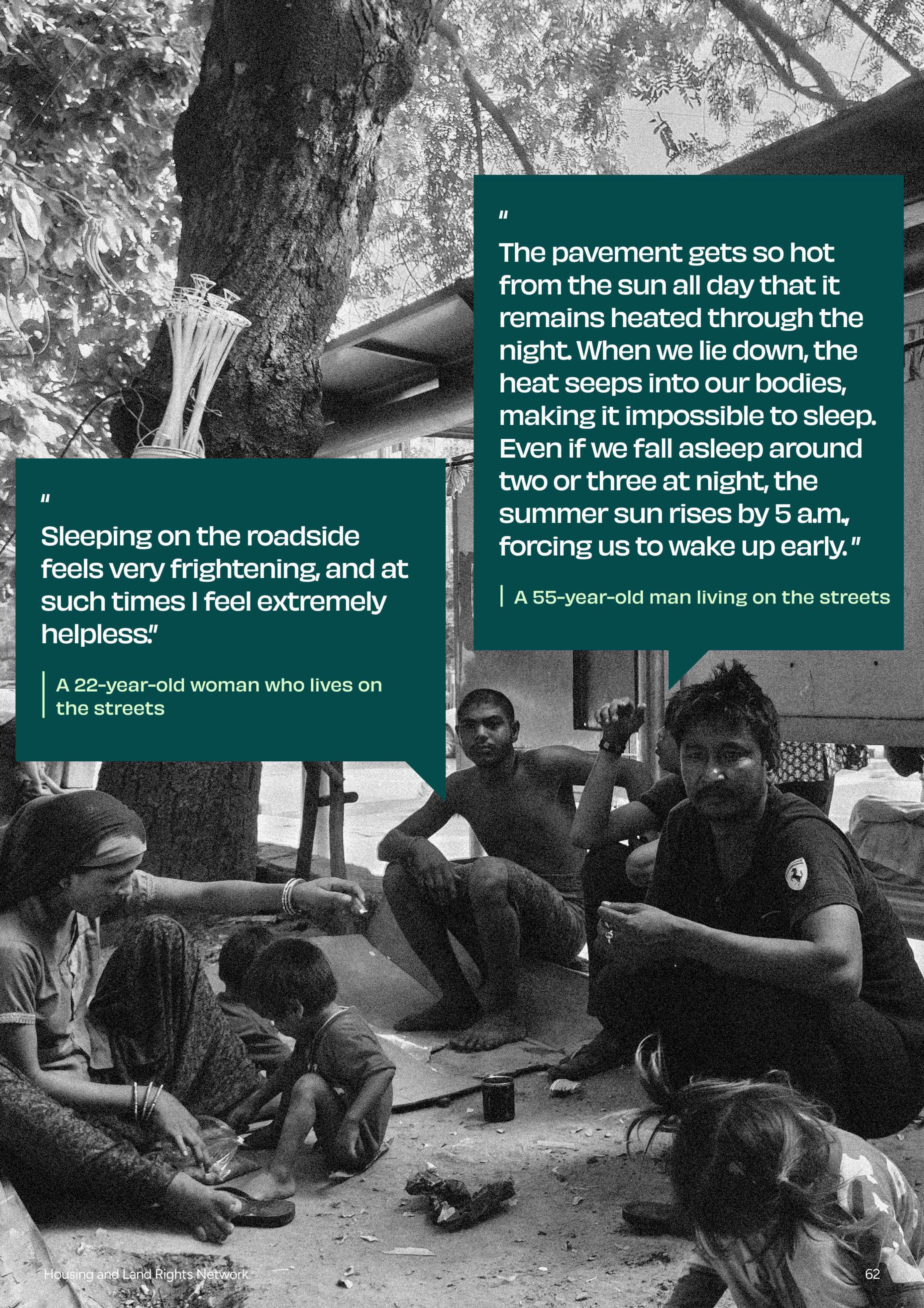
24 %

Were unable to sleep at all



2 %

Managed to sleep more than six hours per night.



“

Sleeping on the roadside feels very frightening, and at such times I feel extremely helpless.”












| A 22-year-old woman who lives on the streets

“

The pavement gets so hot from the sun all day that it remains heated through the night. When we lie down, the heat seeps into our bodies, making it impossible to sleep. Even if we fall asleep around two or three at night, the summer sun rises by 5 a.m., forcing us to wake up early.”

| A 55-year-old man living on the streets

Reasons for Sleep Disruption Among Homeless Persons During Extreme Heat

| | | |
|---|--|------|
|  | Excessive heat | 95 % |
|  | Mosquito bites | 94 % |
|  | The pavement becomes hot (on the streets) | 51 % |
|  | Mental stress and worry (on any matter) | 49 % |
|  | Physical problems or illness (such as itching all night) | 48 % |
|  | No relief from fans or coolers (in the shelters) | 40 % |
|  | Due to excessive noise | 34 % |
|  | Fear of the police | 34 % |
|  | Fear of violence | 33 % |
|  | Lack of privacy | 32 % |
|  | Hot air and smoke from vehicles | 29 % |

Among shelter residents, 80 per cent find it difficult to sleep due to inadequate fans and coolers, while 46 per cent could not sleep due to lack of privacy as compared to 23 per cent of those living on the streets. Of the respondents living on the streets, 79 per cent cited overheated pavements as the reason, 54 per cent reported the fear of police harassment, and 51 per cent highlighted the fear of violence.

Homeless women were more impacted by physical and mental health issues that disrupted their sleep. **At least 69 per cent of women reported being unable to sleep due to mental stress and worry, compared to 32 per cent of men.** Similarly, 67 per cent of women reported physical impacts of heat such as itching, compared to 32 per cent of men. Fear of violence was also higher among women (41 per cent) than men (27 per cent).

Impact on Mental Health

Due to Sleep Deprivation

The lack of sound sleep has significant repercussions on daily life and livelihoods.

Respondents of FGD-4 noted that excessive heat at night often led to irritation and frustration, where minor disagreements quickly escalated into anger. Thus, instead of interacting with others, they often preferred to sit alone at night to avoid conflict.

Around 88 per cent of the respondents were worried due to the lack of sleep and its implications, and 80 per cent felt anger or irritation. A higher percentage of women reported feeling worried, angry, or irritated compared to men. Specifically, 86 per cent felt restless and helpless, 84 per cent experienced anger or irritation, and 73 per cent reported sadness or despair.

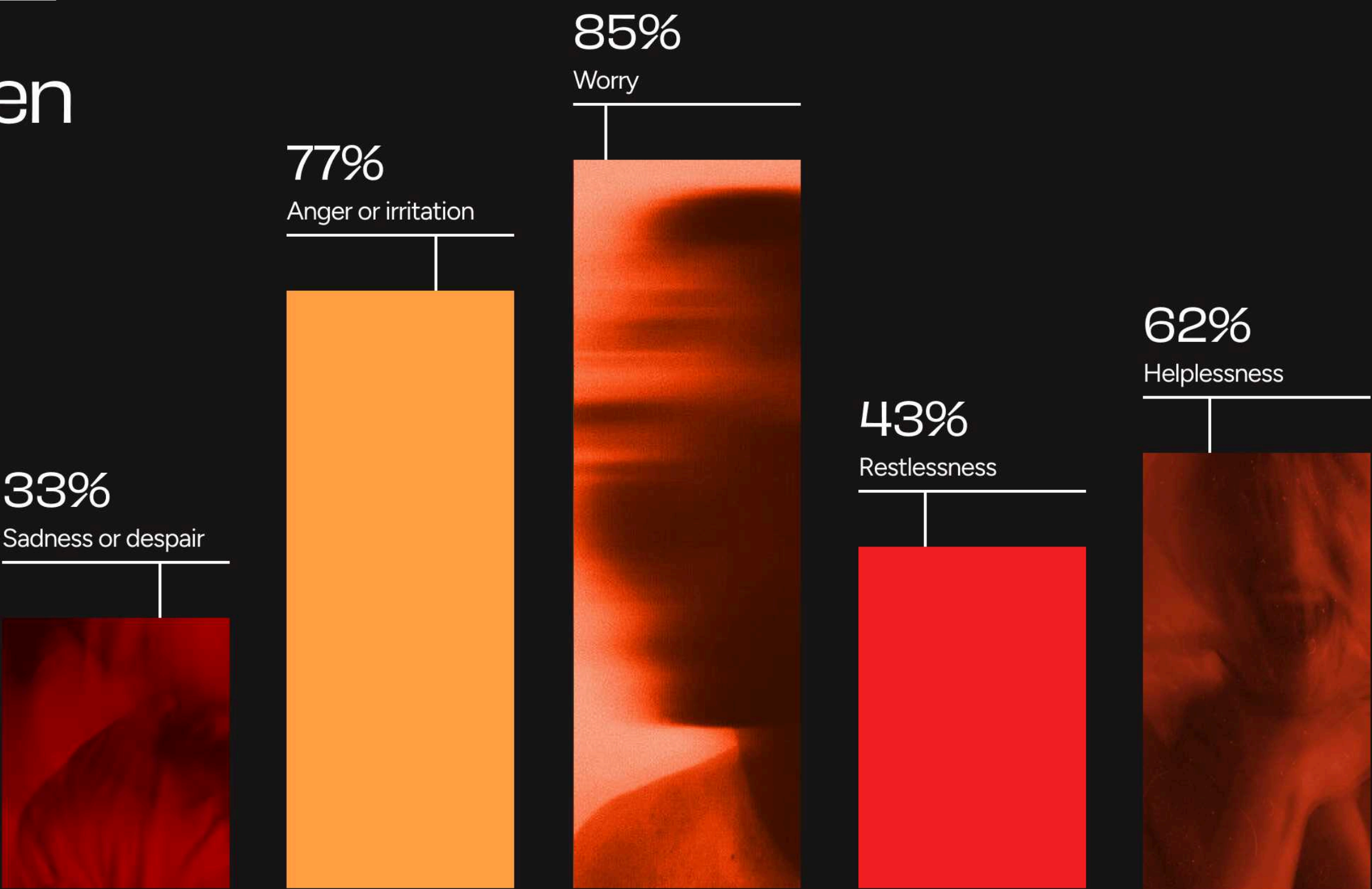
“

When we are unable to sleep due to the heat, we walk in the corridor outside the shelter to get some relief. As a result, we do not get enough rest, and in the morning, we feel tired and lack the motivation to work

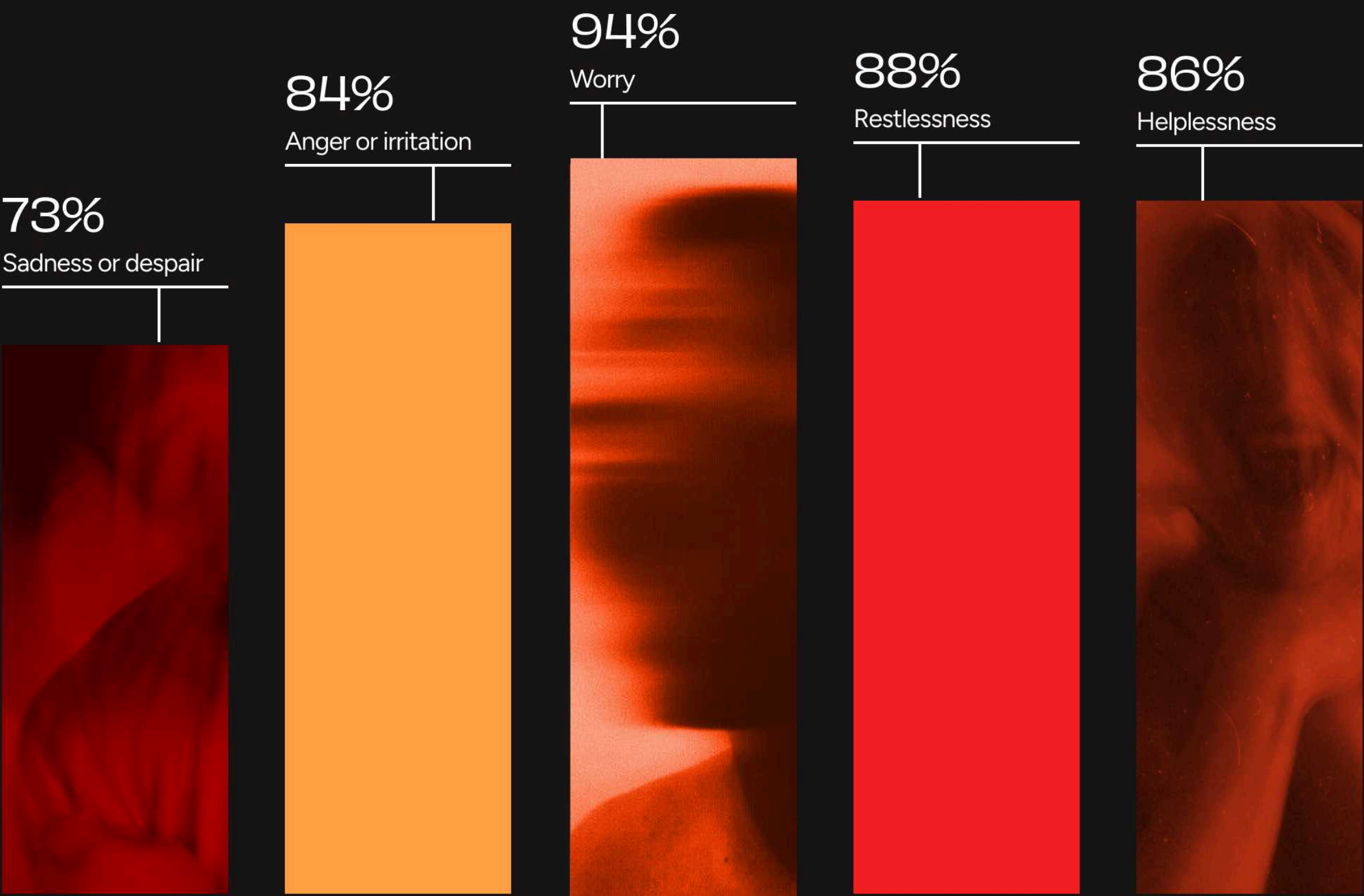
| FGD-5

Impact of **Sleep Deprivation** on the Mental Health of the Homeless Persons

Men



Women



7. Overall Impacts on Mental Health

Across various thematic challenges studied above, respondents have consistently reported high levels of mental distress. Worry has emerged as the most pervasive emotion, followed closely by anger or irritation and helplessness.

Men most frequently reported feeling worried, followed by anger or irritation, and helplessness, with relatively fewer instances of sadness or despair and restlessness. By contrast, women across age groups reported experiencing all five emotions in higher proportions. Feelings of sadness or despair and restlessness, in particular, were reported by significantly more women than men. Across age groups, among men, anger and irritation were concentrated between the ages of 18–35, while among women, these emotions were distributed more widely across age groups.

These figures suggest that women shoulder a heavier emotional burden of homelessness, in addition to the disproportionate responsibilities of caring for children, cooking with inadequate resources, and navigating unsafe environments. However, these figures also indicate a gendered bias, where it is more acceptable for women to feel and openly express their emotions, especially of sadness and helplessness, while men are expected to suppress or mask such feelings, leading them to report worry, anger, or irritation more readily.

Around **91 per cent** of the respondents reported that they were **worried about health issues associated with extreme heat** and the **high costs of accessing healthcare**.

This was followed by 89 per cent feeling worried about livelihood related challenges, 88 per cent worried about challenges related to the lack of sleep, 78 per cent about the lack of adequate housing, and 73 per cent about inadequate water and sanitation facilities.

For many, these were overlapping concerns. Health and sleep both have an impact on livelihood and earnings, without which accessing water to cope with heat is nearly impossible.

"

I constantly worry about my health because if **my health gets worse, I will lose my job**. If I lose my job, then **money will become scarce**, and that will bring even more **difficulties and problems** for my life and for my family."

A 41-year-old man who lives in a porta cabin shelter and works in a garment factory

"

We always worry about where the money will come from, how we will get treatment, where we will buy medicines from, and how we will manage food. The person who earns for the family often falls sick the most during the summer."

| A 65-year-old woman who lives on the streets in Delhi



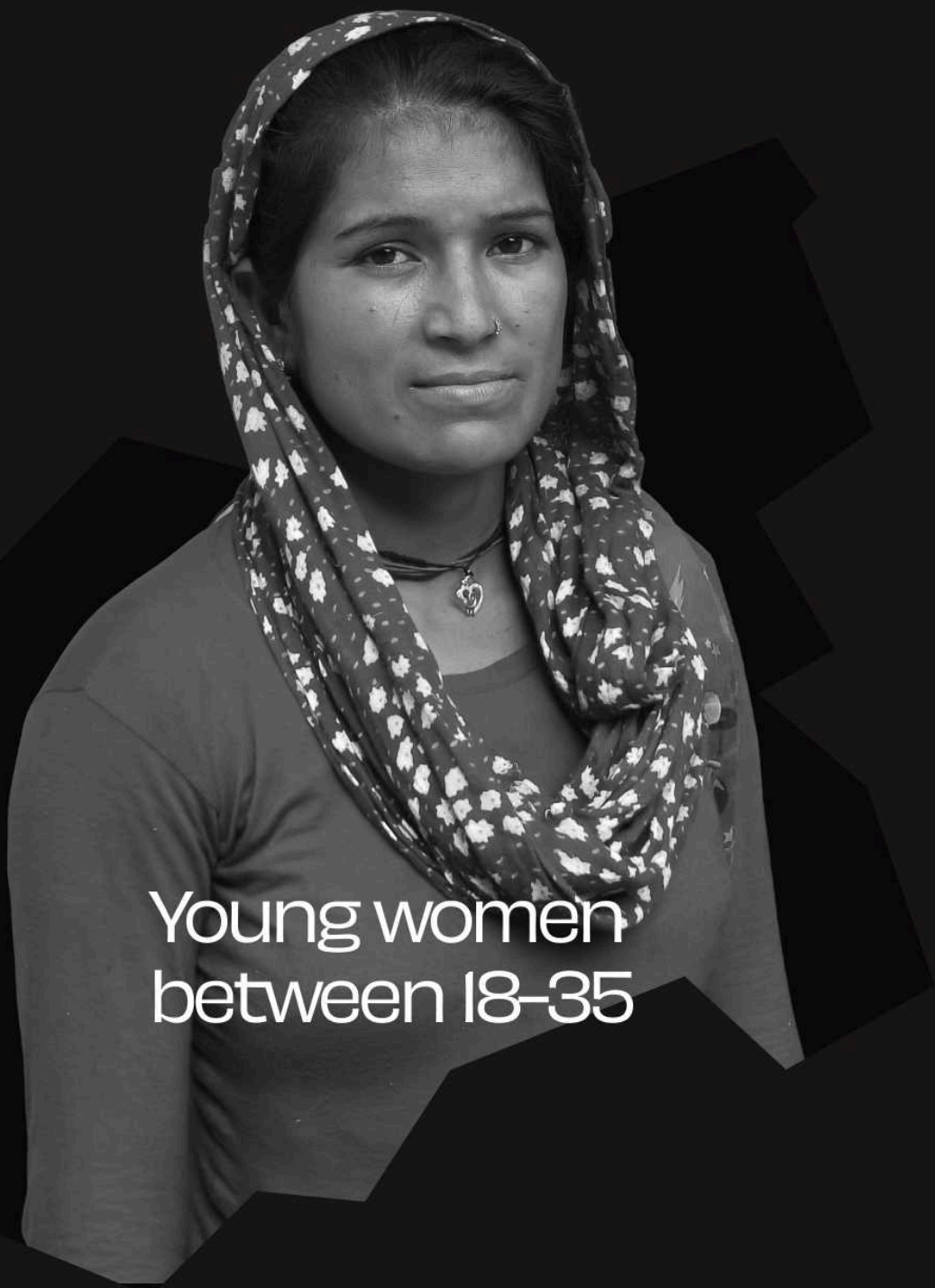


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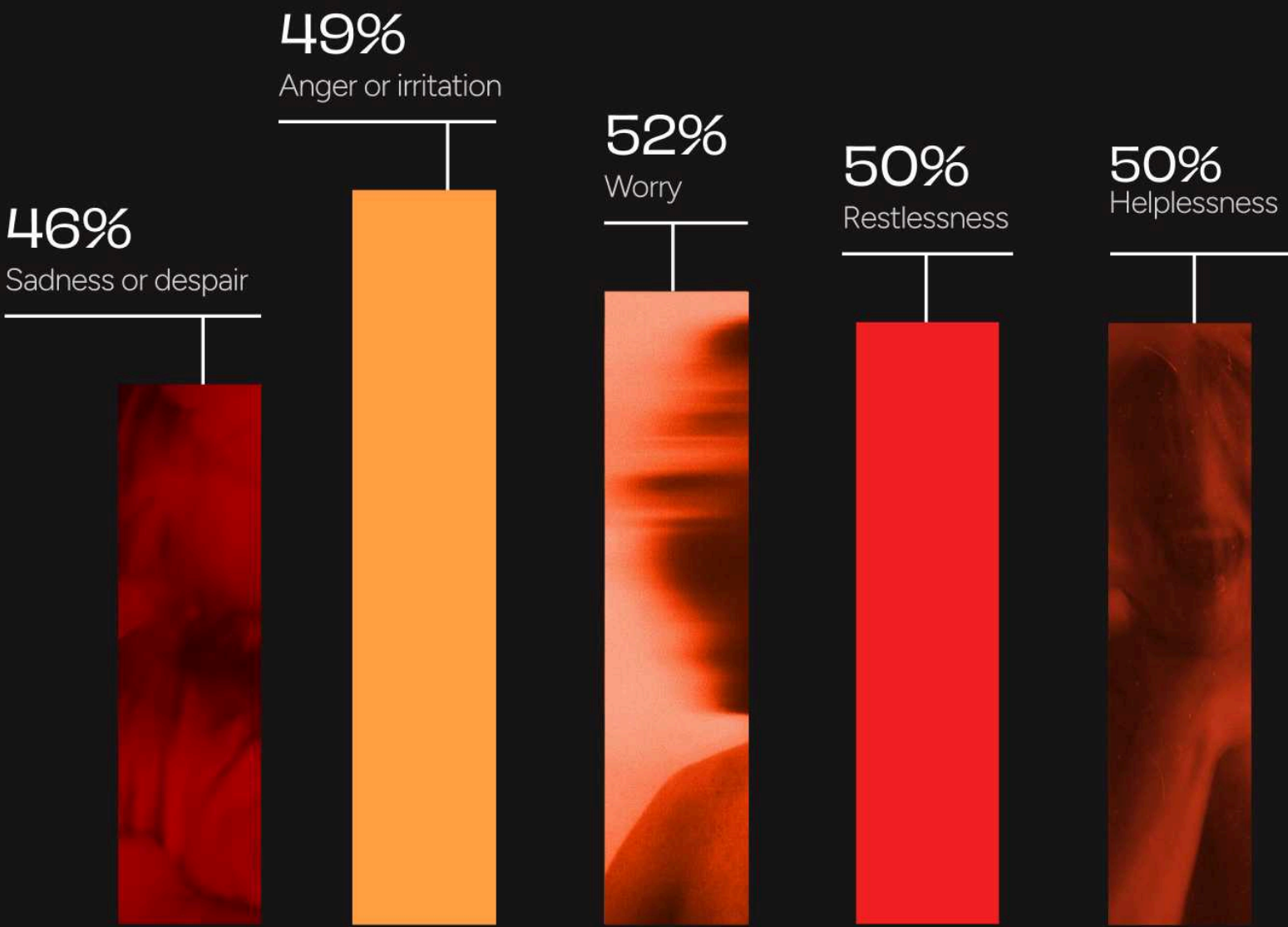
If there is no work, then how
will we manage food and
water?"

A 25-year-old man who lives on the
streets and works as a labourer and
in wedding parties

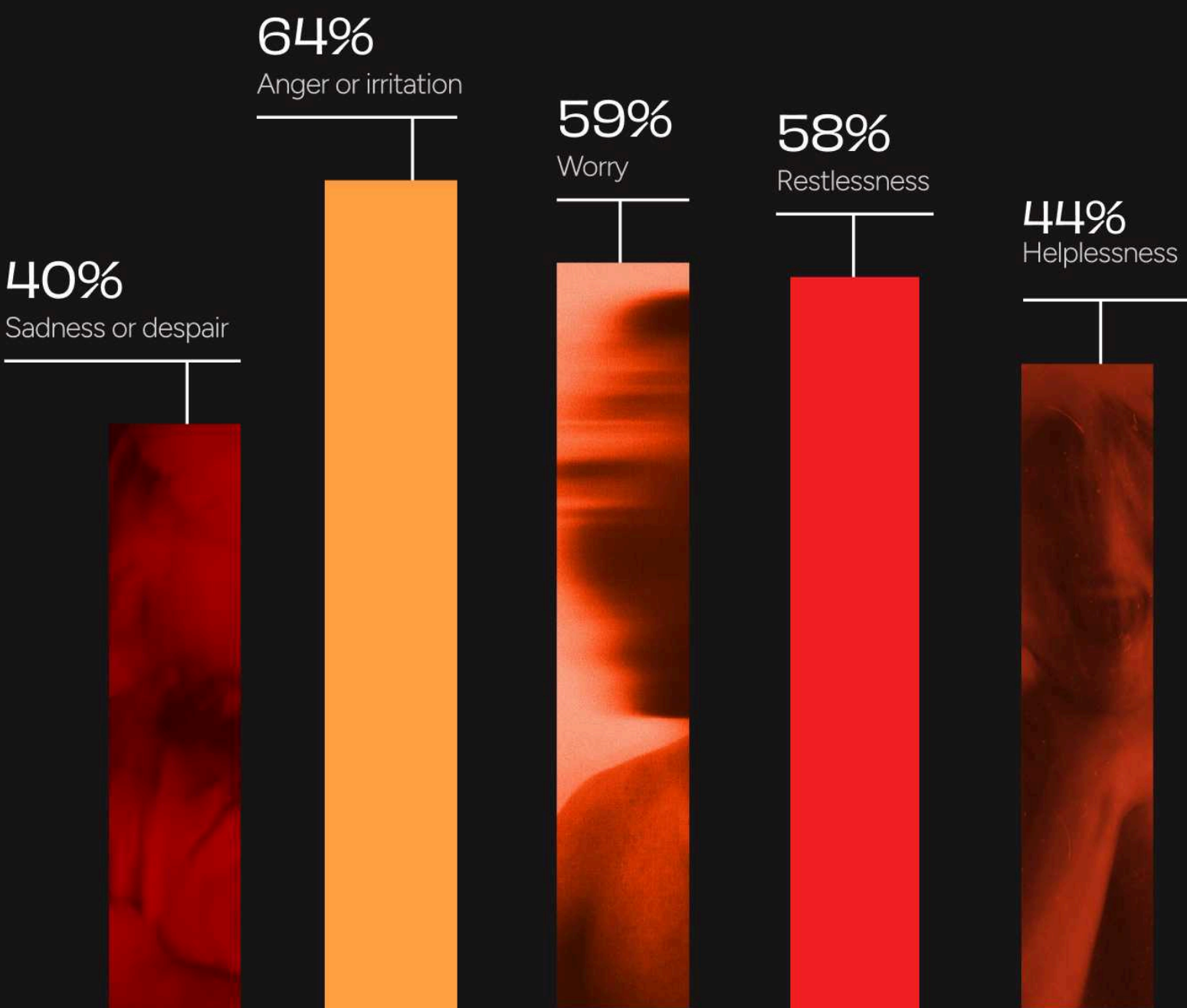
Feelings of mental distress due to various challenges distributed as gender and age⁶²



Young women
between 18-35

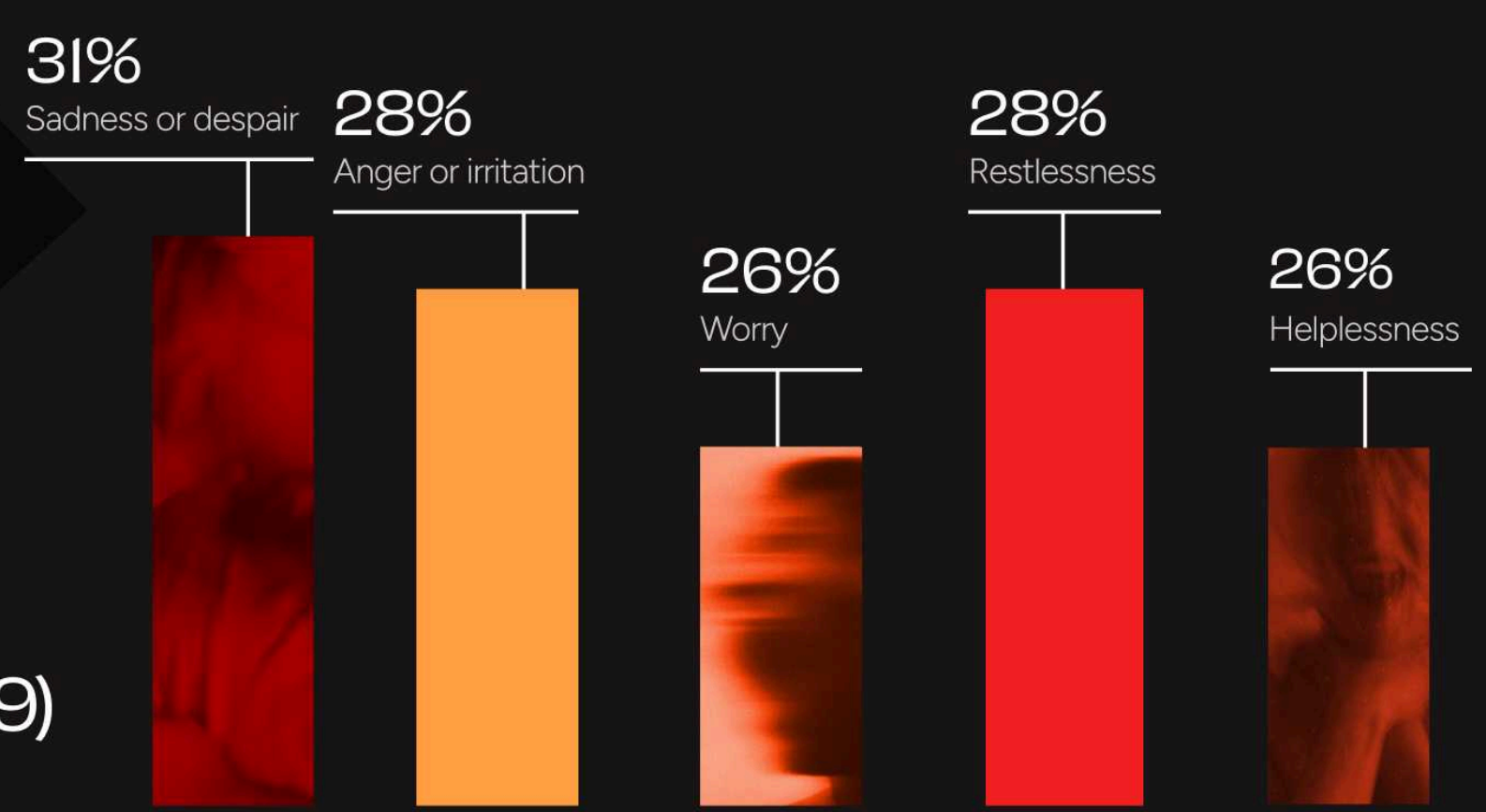


Young men
between 18-35

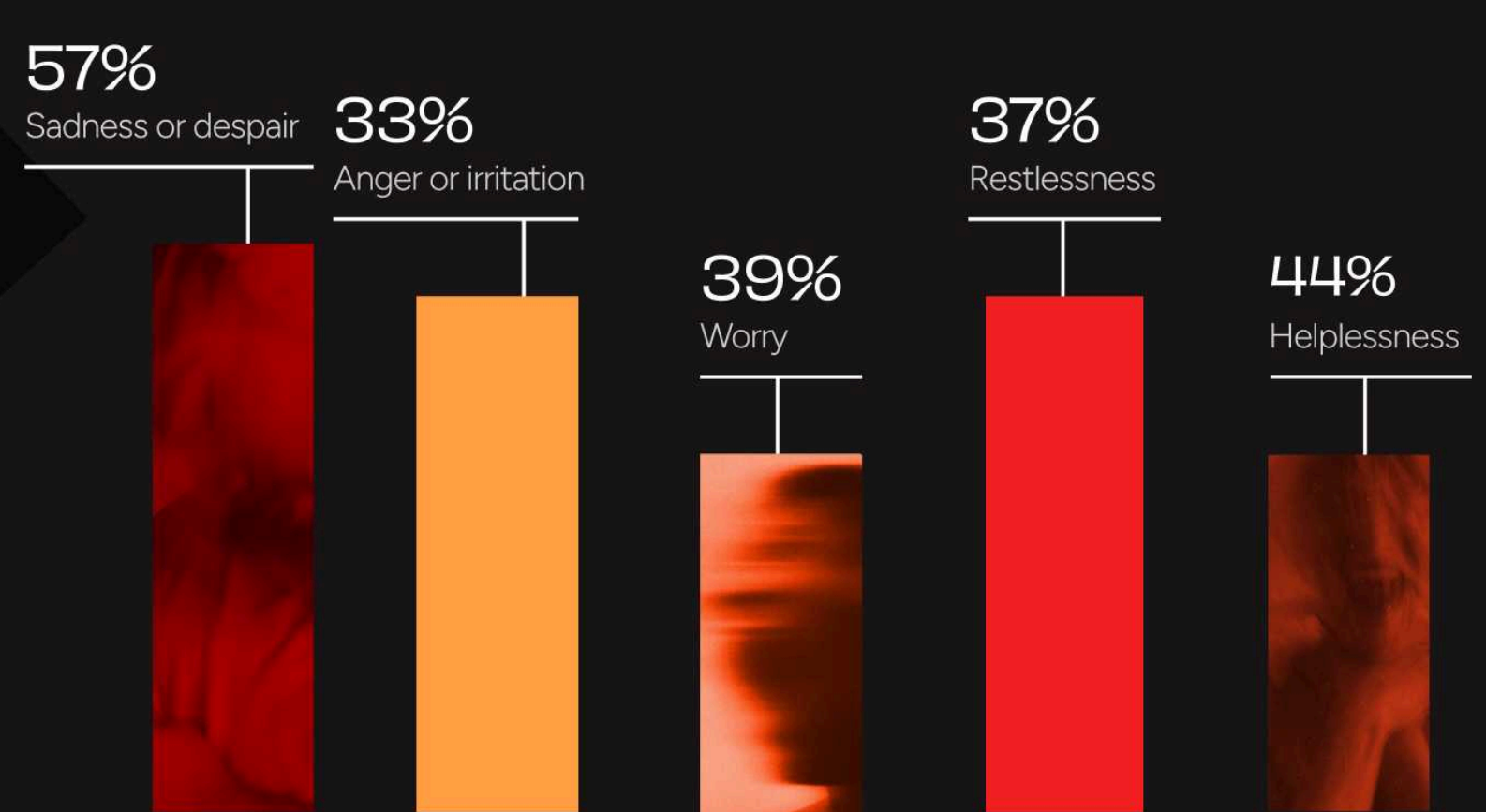


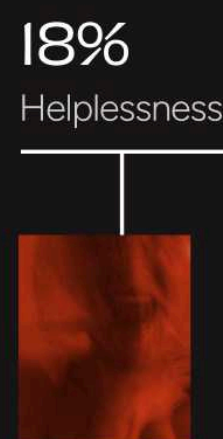
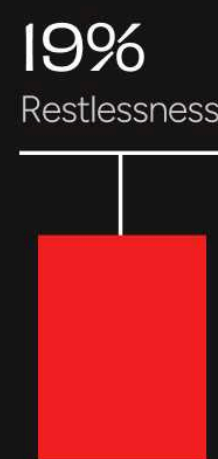
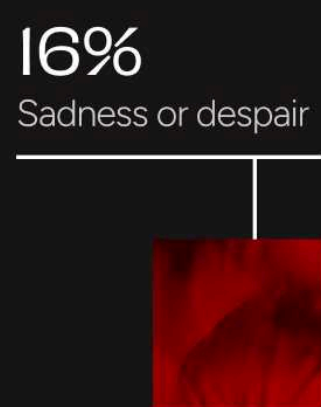


Middle-aged women (36-59)

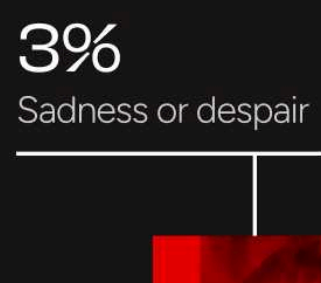


Middle-aged men (36-59)





Senior citizen (Above 60)



Senior citizen (Above 60)

Lack of Motivation, Mental Fatigue, Loneliness, and Self-Harm

Around 48 per cent of the respondents reported the lack of motivation to work or engage in other activities during summers sometimes, while 21 per cent felt it most of the time. 40 per cent experienced mental fatigue or inability to think clearly sometimes, while 34 per cent experienced it most of the time. While men were more likely to experience these effects occasionally, a higher percentage of women (41 per cent) reported experiencing mental fatigue most of the time. Over half of respondents (55 per cent) reported feeling lonely sometimes, while 18 per cent reported feeling lonely most of the time. A significant proportion of women also experienced the loss of desire to work or engage in other activities (25 per cent), mental fatigue or inability to think clearly (31 per cent), and loneliness (31 per cent) all the time.

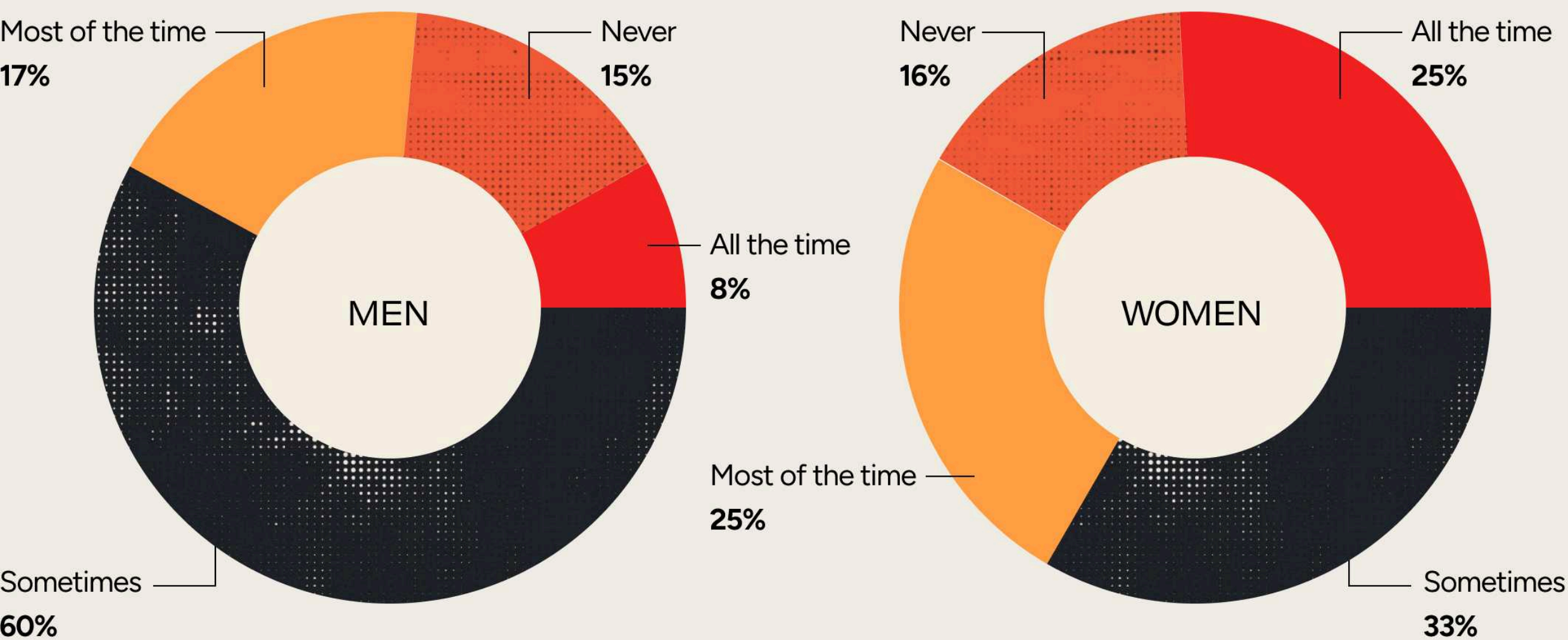
There exists is a clear association between rising temperatures and increasing suicide rates.⁶³ Alarming, 47 per cent of respondents in the survey also experienced feelings of self-harm sometimes, with a higher percentage of women (51 per cent) experiencing it than men (43 per cent). However, 29 per cent said they had never felt this way. ***I become despondent or give up, and then I feel like harming myself (A 36-year-old woman).*** Some also mentioned that while these feelings are persistent, they do not act on them thinking of their children and responsibilities.

"
I feel like dying but looking at my children's face, I cannot act upon this feeling."

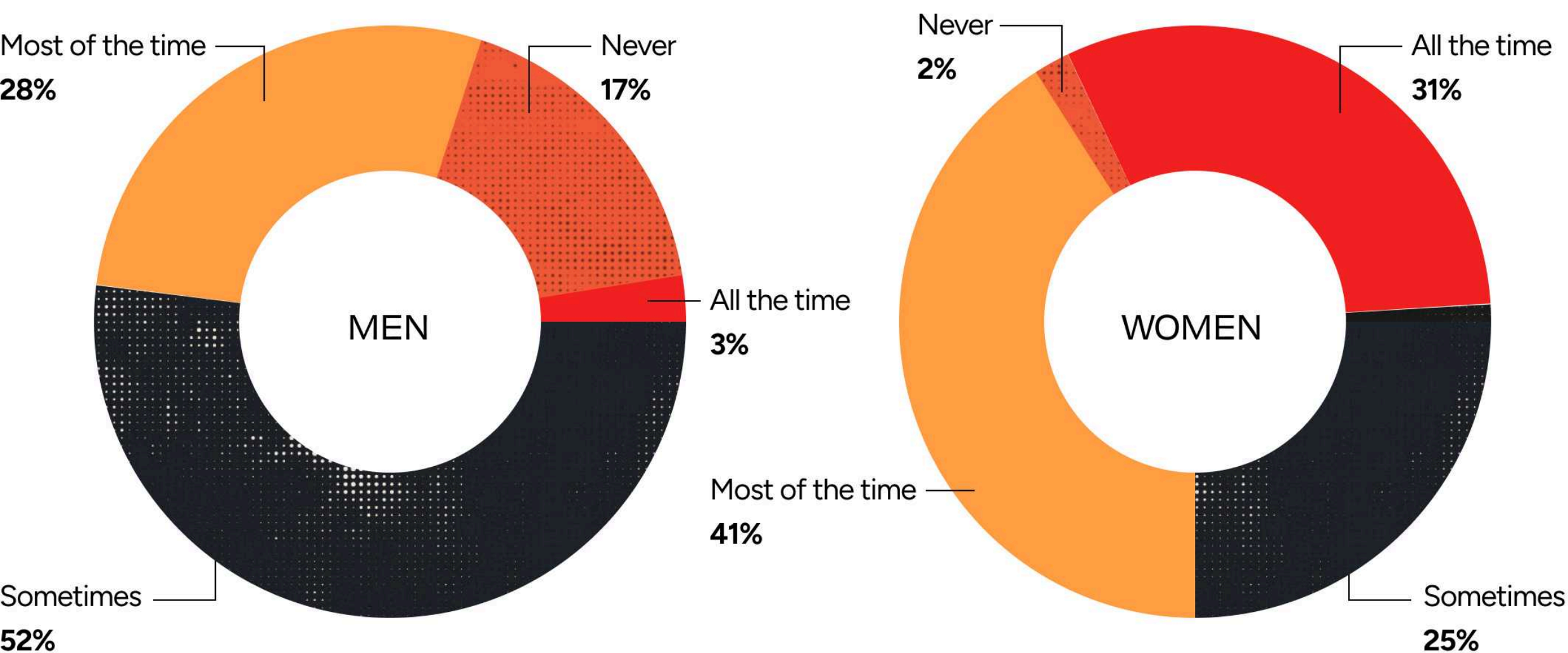
A 30-year-old woman who lives in a homeless shelter

Mental Health Impact of Heat on Men and Women

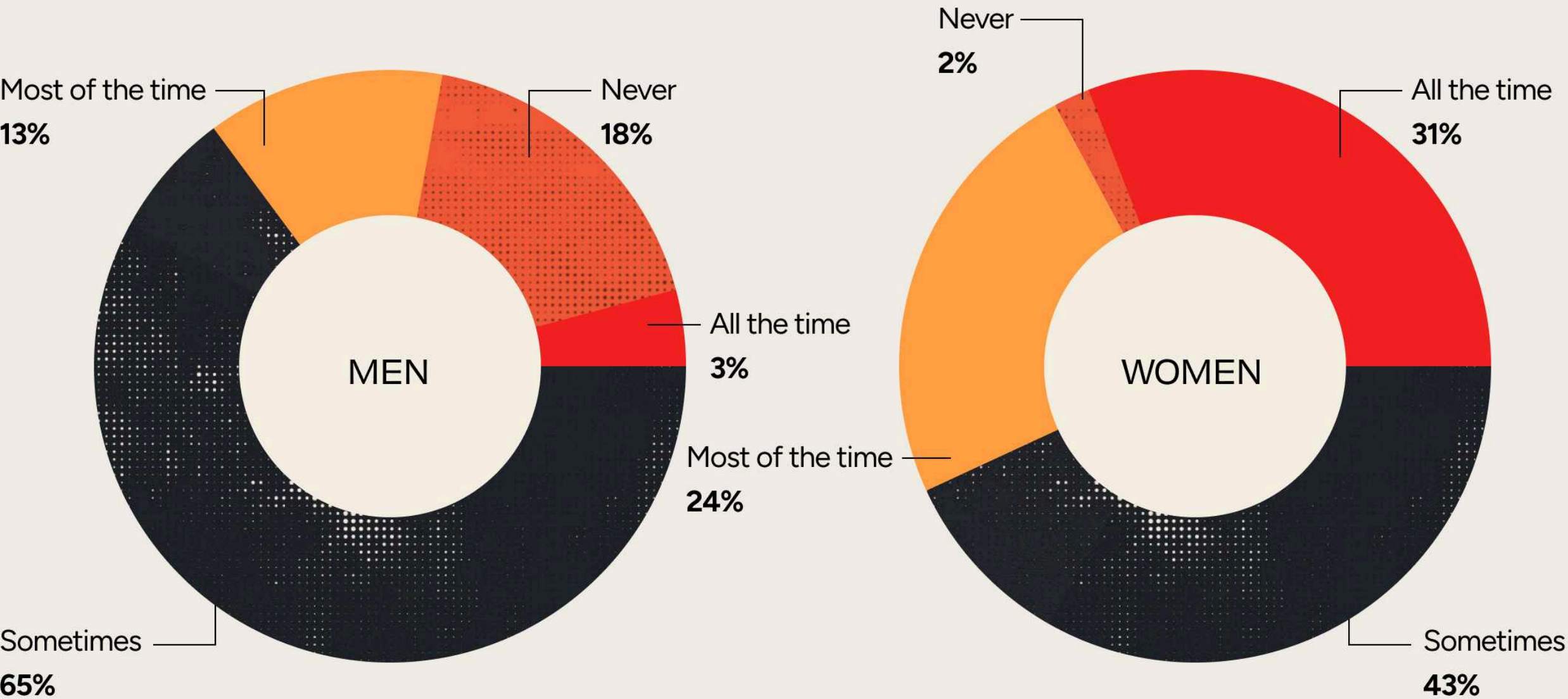
Loss of motivation to **work or engage in other activities**



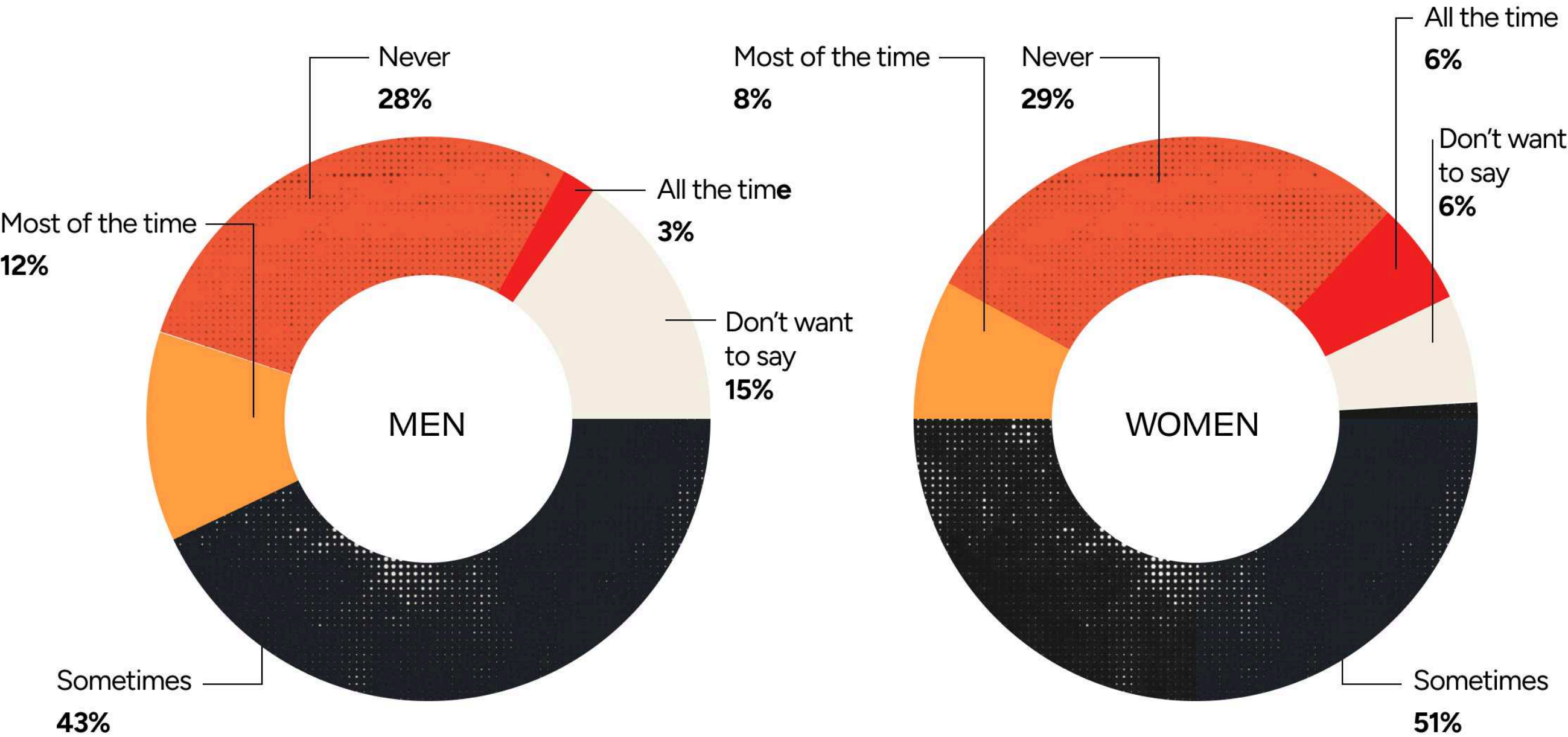
Mental fatigue or inability to **think** clearly



Feeling of **loneliness**



Feeling of **self-harm**



Behavioural Changes Due to Extreme Heat

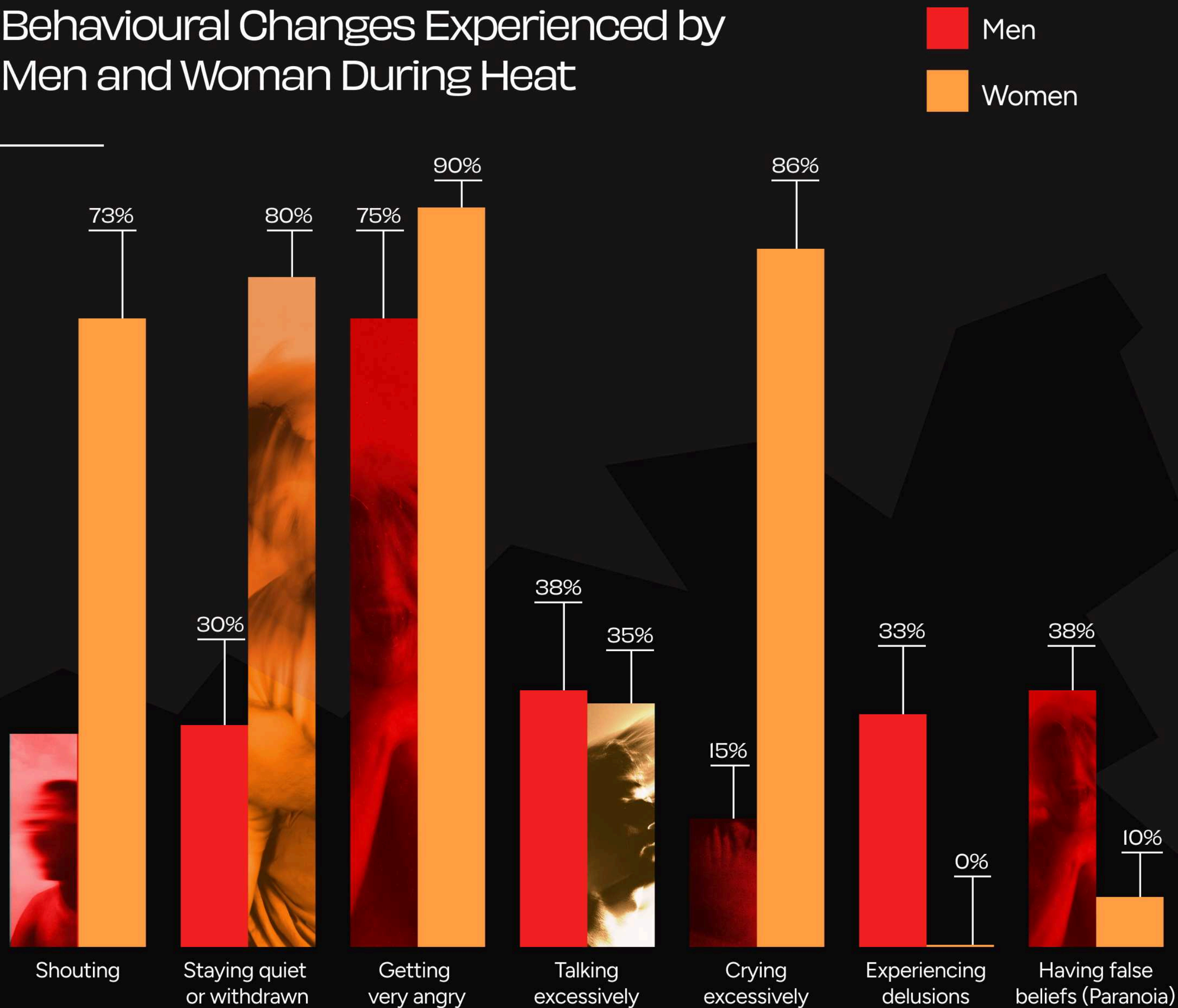
Research indicates that extreme heat heightens physical and psychological discomfort, which can fuel hostile feelings, aggressive thinking, and even violent actions. Cities with higher temperatures experience more violence, with incidents rising during exceptionally hot summers and warmer years.⁶⁴

When asked if respondents noticed behavioural changes among themselves during summers, 82 per cent stated they got very angry more frequently. This was more prominent among women, 90 per cent of whom felt this way, as

compared to 75 per cent men. Another 64 per cent of the respondents shouted more often, 53 per cent stayed quiet, and 48 per cent cried more, which can allude to crying more intensely or frequently, or both.

Due to the heat, some don't feel like talking to anyone. They are constantly restless and don't want to listen to anyone; they just want to find a way to cool themselves down. They often feel irritable and angry, and even lose their appetite (FGD-6).

Behavioural Changes Experienced by Men and Woman During Heat



Homeless Persons are More Fearful of the Summers Than Any Other Weather

The indirect effects of climate change on mental health is a recent phenomenon, often referred to as climate change anxiety. It stems from the perception—as against direct mental health impact—of climate change, and is described as heightened emotional, mental or physical distress in response to dangerous changes in the climate.⁶⁵

Climate anxiety can be understood in two distinct ways. The first relates to anticipatory fear—a chronic stress disproportionately experienced by children and young persons as a result of increasing awareness of the threats associated with changing climate.⁶⁶ The second is the fear of climate, rooted in lived experiences, arising from enduring losses and damages due to past extreme weather events. For marginalized and low-income groups, such as homeless persons, this form is particularly acute, as their vulnerability to recurring climate shocks is greater and their adaptive capacity is limited. While both perspectives imply a fear of the future, the important distinction lies in the source of the fear—anticipation versus experience.⁶⁷

The findings in this report highlight how seasonal changes directly shape the climate anxieties of homeless persons. 95 per cent of the respondents believe that heat has intensified in Delhi in the past few years. 77 per cent of the respondents of this study reported being fearful of summers due to the challenges they face. Additionally, 45 per cent of the respondents were fearful of monsoons, and 19 per cent feared the winters.

It is significant, in the context of Delhi, that homeless persons are more fearful of the summer, than the harsh winter that the city is known for.

Winters in Delhi are gradually shrinking and the city is experiencing a shift towards longer days of more extreme heat.⁶⁸

"We face difficulties in all three seasons – **summer, winter, and the rains.** If it rains too much, we cannot work and get drenched, which makes us fall sick. If the heat is too much, **we get sunstroke and fall sick again.** And in extreme cold also, we end up falling ill."

A 20 year-old-man living in a homeless shelter

The growing intensity and duration of extreme heat, followed by the heightened unpredictability of monsoons,⁶⁹ and the absence of adequate state interventions to address its impacts on homeless persons, leave them underprepared and unable to adapt to changing climate, increasing their susceptibility to climate anxiety.

“

We feel very scared when it rains, because there is lightning and we have no roof over our heads. In the open, many insects also come, and even scorpions start appearing.”

| A 14-year-old girl who lives on the streets.



“

In winters, we manage by wearing extra clothes to keep out the cold. But in summers, we neither have a place to use coolers or fans, nor do we have enough water, because of which summers feel unbearable to us.”

| A 54-year-old-man living on the streets

8. Adaptation Needs and Coping Mechanisms

To cope with the impact of homelessness and heat on their mental health, 64 per cent respondents—including 76 per cent of women respondents, and 53 per cent men—said they prefer to spend some time on their own. This helps them avoid fights with others due to the increase in anger and irritation. 56 per cent try to sleep, while 51 per cent take a walk to find relief from the heat and its associated mental health impacts. On the other hand, 45 per cent talk to their peers and 41 per cent spend time with their family or friends. Those living in recovery shelters mentioned that they often miss their family members and feel stressed. This makes them want to pick fights with those around them, however, when they feel lonely, they talk to their peers and friends, and play some games to find some comfort (FGD-6). Around 34 per cent of the respondents spend time with their children, while 30 per cent do nothing to cope with their feelings. 16 per cent pray or visit the temple, and only 12 per cent respondents—all men—reported seeking help from a doctor. **Sometimes, homeless persons, especially children watch television or**

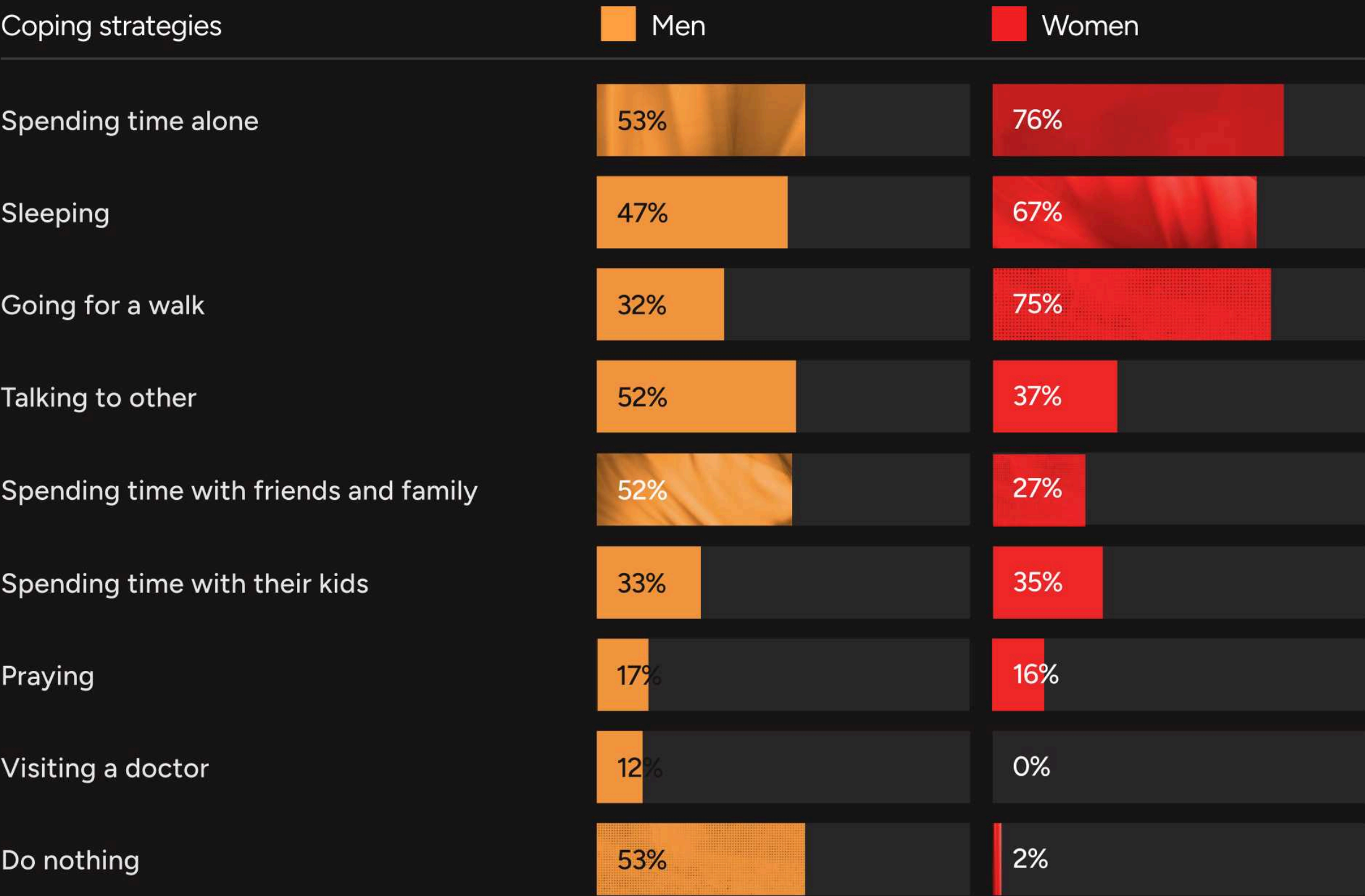
use their phones to distract themselves from these feelings (FGD-4 and FGD-3).

Nearly 32 per cent of the respondents use alcohol and other substances most of the times to cope with the heat, while 32 per cent use it sometimes. This includes 35 per cent of the women respondents and 28 per cent of men respondents who depend on it frequently, and 57 per cent of men respondents who depend on it sometimes.

" When I drink alcohol, I am able to sleep easily because the **intoxication keeps my eyes closed.** But when I don't drink, I face all the other difficulties."

A 33-year-old man living on the streets

Strategies employed by homeless persons to cope with the mental health impacts of homelessness and heat



Community Adaptation Needs

For a majority of respondents (79 per cent) in the survey, the provision of adequate housing is essential to cope with the impacts of heat. Almost 43 per cent identified the need for housing in informal settlements, and 39 per cent limited their aspiration to the provision of adequate shelters. Notably, the preference for informal settlement housing was strongest among those living on the streets, accounting for 79 per cent of those who require such housing. This indicates that even a room in an informal settlement without tenure security is seen as preferable to living on the streets. **Furthermore, among those who expressed the need for adequate shelter, 48 per cent already live in Delhi's government run shelters, indicating that these are not adequate enough to protect against extreme heat.**

For 69 per cent of the respondents, access to livelihood with regular wages was a prominent requirement to cope with heat. Respondents living in shelters highlighted that employment opportunities and skills training must be provided within the shelter, along with implementing minimum wages for informal work (FGD-5). Older persons and persons with disabilities require different, less physically straining, livelihood opportunities along with assistance to set up shops (FGD-4).⁷⁰

"If the government gives us a house, **we can arrange the rest of the facilities ourselves.**"

A 25-year-old-man living on the streets

Forty per cent respondents also reported that some financial assistance or allowance can help offset the additional costs they have to bear due to extreme heat. Older persons require higher pension amounts, up to Rs 5,000 (56.31 USD) to account for the lack of jobs accessible to them (FGD-4).⁵¹

"Our earnings are not much, so **we do not spend a lot.** We get medicines from a government hospital, and **we only spend on food.** However, even for that we face **a lot of difficulties in collecting enough money.**"

A 60-year-old-woman who works as a street vendor

Fifty-eight per cent require access to cold drinking water, 55 per cent require medical care, and 50 per cent require ration supplies, and water for bathing. Other requirements include mosquito nets, Oral Rehydration Salt solutions or glucose water, better mechanical ventilation facilities, and shaded and green infrastructure to rest.

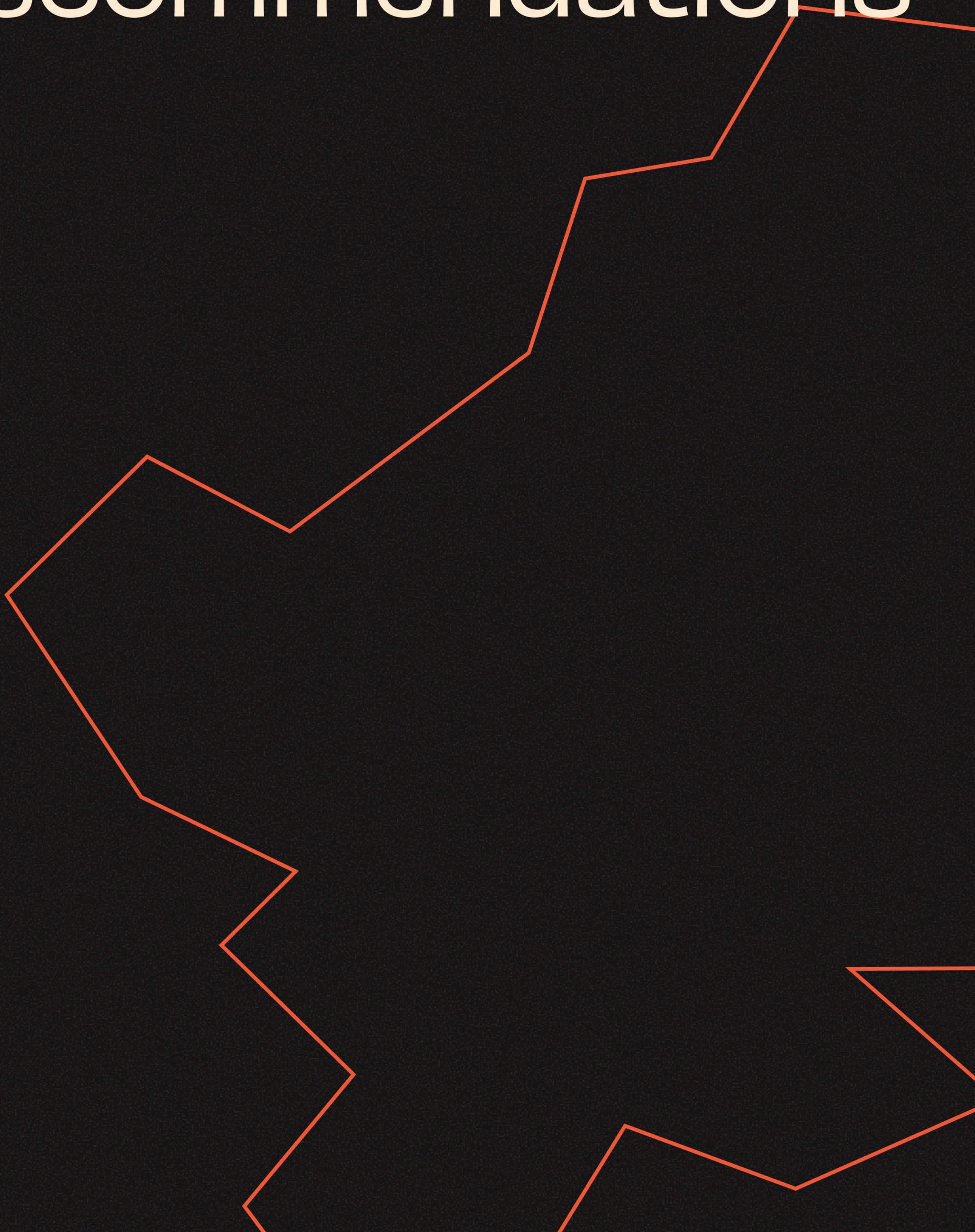
Almost 22 per cent of the respondents, primarily living on the streets, also require relief from constant police harassment.

"When the police come, they **take away our clothes and cooking utensils,** because of which we sometimes have to **sleep at night without proper clothes.**"

A 22-year-old woman who lives on the streets

VI.

Recommendations



Recommendations

The findings of this report underscore the need to address the psychosocial needs of homeless persons to mitigate the distress caused by extreme heat. In this regard, the guidelines framed by the Inter-Agency Standing Committee for situations of humanitarian emergency are useful.⁷¹ It proposes a hierarchical approach towards support and care which foremost addresses the basic physical requirements such as food, shelter, water, sanitation, and healthcare, further moving towards familial and community support for those experiencing isolation, loss, or displacement, to more specific support and emotional care provided by non-specialized community workers, to more individual and specialized care for those experiencing severe mental health distress.

Based on the insights collected from the survey and discussions with homeless persons in Delhi, Housing and Land Rights Network (HLRN) presents the following recommendations, for various government agencies:

Recommendations to Mitigate Mental Health Impacts of Extreme Heat on Homeless Persons

For Central Government Agencies

1. The Mental Healthcare Act 2017, which recognizes the mental health challenges of homeless persons and the bi-directional relationship between homelessness and mental health, must also incorporate the psychosocial impacts of homelessness and heat, and provide appropriate recommendations.
2. The National Disaster Management Guidelines on Mental Health and Psychosocial Support Services in Disasters,
3. Community-based care practices must be instituted in homeless shelters which promote active engagement of the residents. These practices must be voluntary to ensure no resident is being forced into participation. A significant proportion of the respondents in the study have pointed out the feeling of loneliness and isolation to deal with their emotions.
4. Training for shelter caretakers must be conducted to enable them to identify early signs of serious mental health illnesses and connect the individuals to the right resources. At the same time, care must be taken that the mental health support is provided to the caretakers too, as they are often the first responders in situations of emergencies within the shelters.

For State Government Agencies and Urban Local Bodies

1. State- and City-level heat action plans must incorporate homeless persons as a particularly vulnerable group and provide recommendations for their specific challenges. Heat Action Plans must also account for and incorporate the mental health of homeless persons during extreme heat.
2. Sensitization training must be conducted for all agencies and personnel who engage directly with homeless persons to address the stigma surrounding homelessness and mental health.
5. Mental health counselling for homeless persons must be provided in dedicated institutions, focusing on mental health impacts beyond disorders. Special trainings for doctors and counsellors must be conducted to include a psychosocial approach to mental health for homeless persons. Further, these services must reach homeless persons who live in shelters or streets through monthly camps and regular visits by counsellors.

For the Ministry of Housing and Urban Affairs (MoHUA)

1. Recognize homelessness as a distinct category of inadequately housed persons and formulate policies which cater to their specific housing needs. Although shelters are an important first step towards housing the urban homeless, these are not a long-term measure. It is pertinent to **implement housing solutions** along a continuum, including adequate shelters, half-way homes for those living with mental illnesses, hostels for migrant workers, collective housing arrangements, especially for trans and other queer persons experiencing homelessness, and social rental housing options.
2. Implement a 'housing first' approach—with widespread success in global north contexts—which recognizes housing as a primary psychosocial need and guarantees access to permanent housing, along with flexible individualized support as long as needed for homeless persons. It specifically focuses on homeless individuals with mental health issues or experiencing substance abuse and marks a significant move away from a 'treatment first' approach.⁷²
3. Ensure the provision of funds and set up permanent shelters in the Shelters for Urban Homeless (SUH) scheme under the Deendayal Antyodaya National Urban Livelihoods Mission (DAY NULM) for state governments and urban local bodies to increase the number of such shelters for homeless persons in urban areas. The NULM guidelines recommend one shelter (with a capacity of 100 persons) per one lakh (100,000) urban population.⁷³ This must be implemented across major cities, and must include special shelters for women and families, older persons, persons with serious illnesses, persons with disabilities, and trans persons, among others.
4. Ensure that all policies and schemes for housing for homeless persons promote climate resilient designs, equipped with appropriate infrastructure required by different groups of people and located close to areas with greater livelihood opportunities.

For the National Disaster Management Authority (NDMA)

In 2025, NDMA released a set of exemplary guidelines for State Disaster Management Authorities (SDMA) to help mainstream heat resilience within “housing and human settlements”.⁷⁴ HLRN’s sustained engagement with the NDMA, led to the inclusion of homeless persons as a specific category of vulnerable group within the advisory. However, specific measures to address the challenges associated with homelessness are required.

1. Classify heatwaves as a ‘Notified Disaster’ under the Disaster Management Act 2005.
2. Institute early warning systems for heatwaves which cater to the lived realities of homeless persons. Many lack access to broadcasting systems, mobile phones and social media, which currently form the primary mode of disseminating early warnings. Instead, communication must be done through flyers and oral announcements in local languages in areas with the highest concentration of homeless populations.
3. Issue guidelines for urban local authorities to engage with homeless communities on the ground through meetings and workshops to create awareness about precautionary measures to take during extreme heat.
4. Formulate technical guidelines for climate-resilient designs for housing schemes and homeless shelters aimed at improving thermal comfort for the residents.

For other Central and State Government Agencies

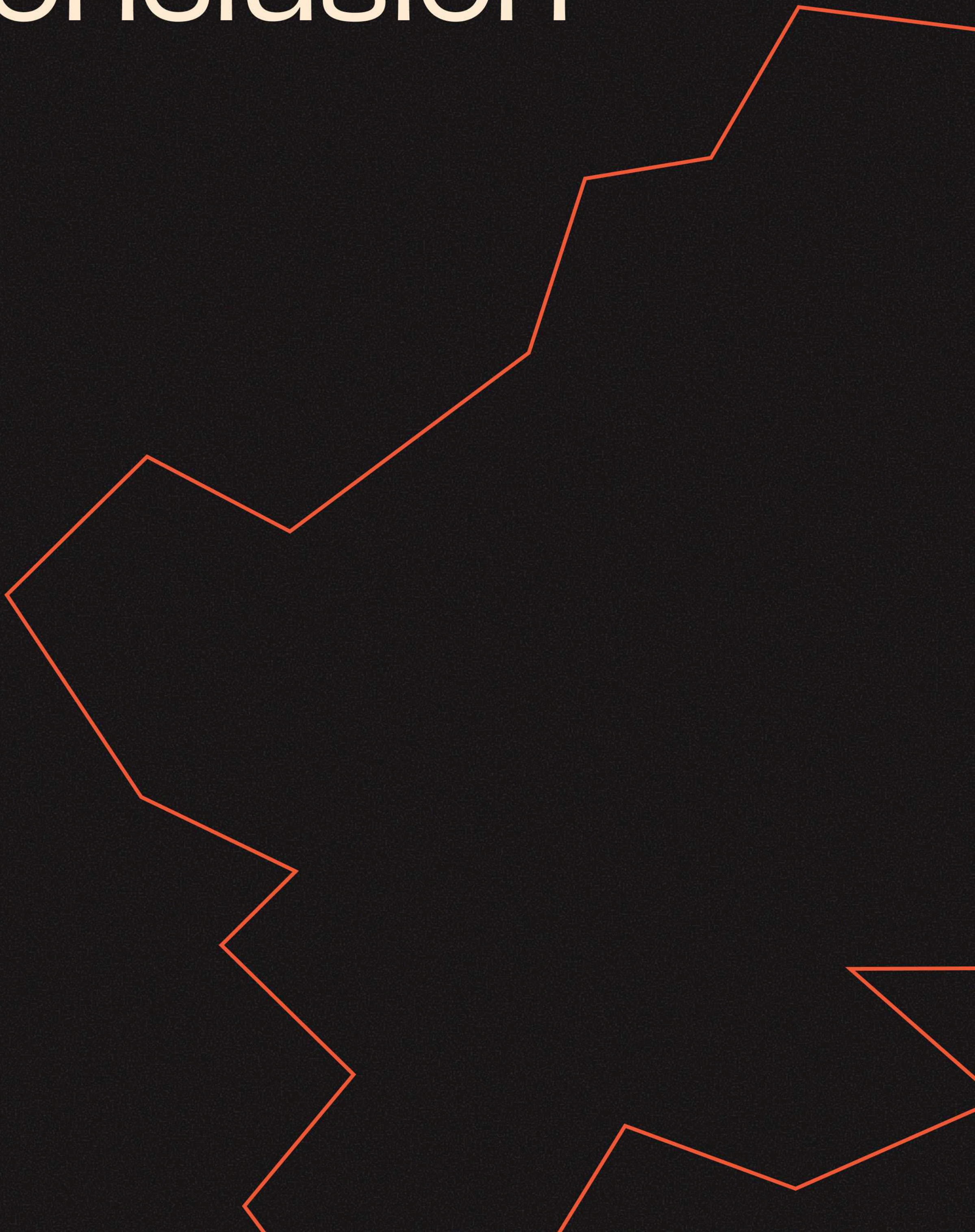
1. Ensure that all Central and State Government welfare schemes are accessible to homeless persons, irrespective of their documentation and proof of address/residence.
2. Increase pension amounts for senior citizens, widows, and persons with disabilities to help offset the additional costs incurred due to extreme heat.
3. Pilot a scheme for heat insurance for homeless persons. Parametric insurance has been experimented for informal workers by civil society organizations at subsidized premiums and must be scaled up.⁷⁵ Premiums must be further subsidized or waived off for those homeless persons who are unable to work at all, such as older persons, widows, persons with severe disabilities or health issues, and single mothers, among others.

For Urban Local Bodies

1. Identify high-risk areas where the largest concentration of homeless persons live and work and implement summer specific solutions such as setting up temporary heat-resistant shelters, spraying of mosquito repellent solutions, and setting up cooling points with potable water, food, electrolytes, toilets, and first-aid to counter the impact of heat.
2. Conduct a rapid assessment survey to identify the shortfall of existing homeless shelters for those who need and want to move into such facilities.
3. Improve access to basic facilities in existing homeless shelters, such as drinking and bathing water, functional water coolers, sanitation facilities, mechanical ventilation and lighting, mosquito repellent devices, clean and safe bedding, and access to healthy and nutritious food which caters to the different needs of working persons, children, pregnant and lactating mothers, and persons with serious illnesses.
4. Increase the number of public taps and toilets, ensuring that the facilities are functional and free to use.
5. Ensure that mobile medical health vans visit all shelters and high-risk areas regularly. Organize monthly health camps in all areas to provide medical check-ups and health-related information to people.
6. Homeless persons widely rely on public infrastructure such as metro stations, parks, shaded places in markets for relief against extreme heat. Ensure that these are made freely accessible to homeless persons through the day and night, particularly during summer months. Further ensure that public provisions such as benches or pavements are designed to be accessible for homeless persons.
7. Homeless families living on the streets often set up temporary shade, using tarpaulin sheets and sticks, as a means to protect their families and children from intense heat. Ensure that these are not removed during extreme weather conditions, without proper rehabilitation.
8. Conduct special camps to provide homeless persons with ration, election, and Aadhaar cards.
9. Improve inter-agency coordination to ensure that provision of all basic and support services is carried out in a timely manner.
10. Cease all forms of police harassment against homeless persons, including their recurring displacement from the streets.

VII.

Conclusion



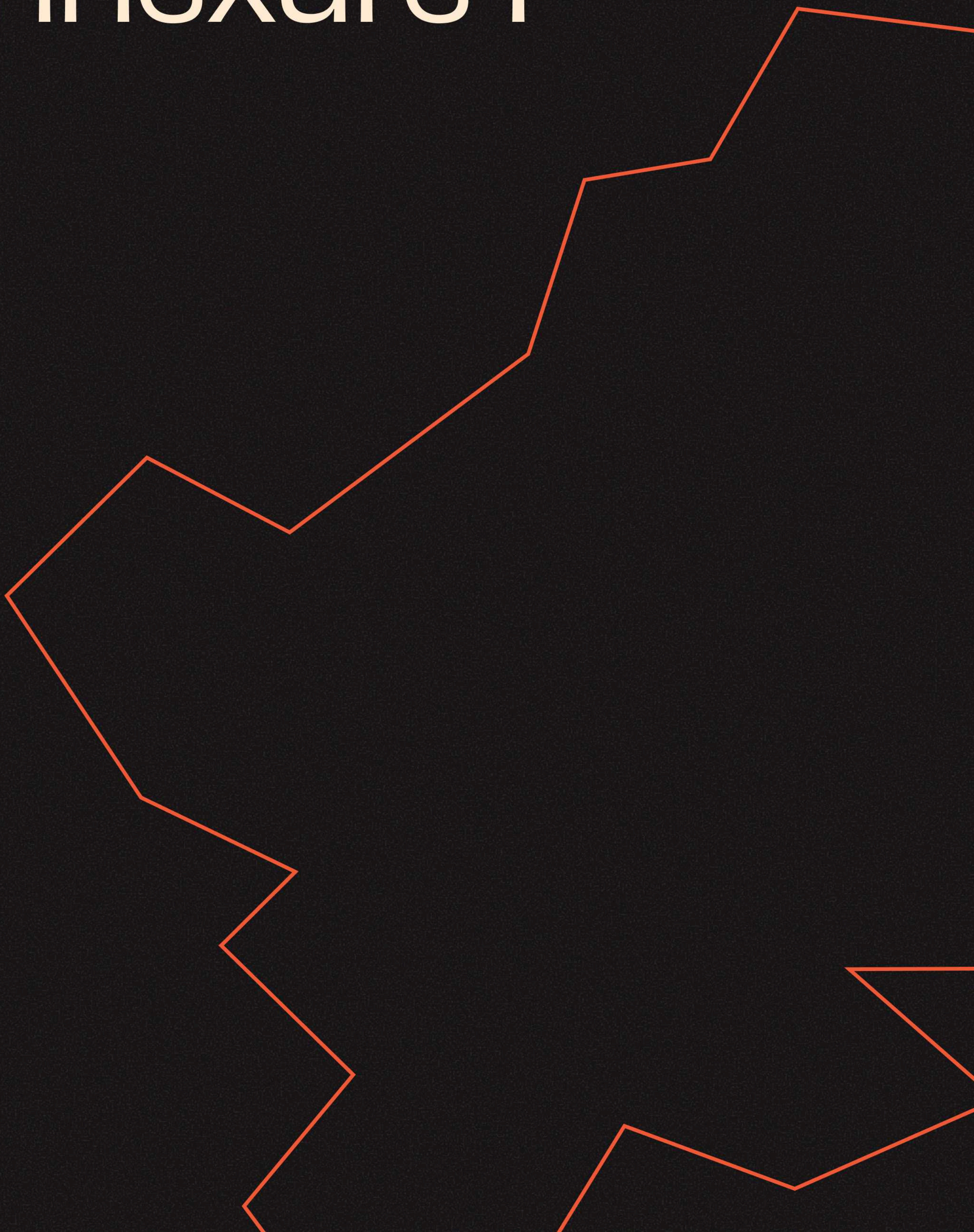
Conclusion

The lives of homeless persons are marked by structural and social inequalities, constituting gross human rights violations, especially against women, children, older persons, and other vulnerable sub-groups among the homeless. In the absence of necessities, including access to regular employment and adequate housing, homeless persons face disproportionate impact on their mental health. This is further exacerbated by climate change, particularly extreme heat, as highlighted in this report. However, their lived experiences are often excluded from policies for housing, climate change, and mental health, due to which they are left with little to no means to cope with their living conditions.

This report emphasizes the intricate, yet often complex link between homelessness, climate change and mental

health. The high levels of mental distress reported by the respondents due to the lack of adequate water and sanitation, food insecurity, livelihood challenges, housing insecurity, physical health risks, and sleep deprivation, show the necessity of understanding how these shape not only their ability to cope with extreme heat, but also its impact on their mental health. By highlighting these experiences, the report calls for greater consideration of the challenges homeless persons face, by civil society organizations, policy makers, and the government, to implement appropriate measures to alleviate them. Housing and Land Rights Network hope that these measures will recognize the centrality of adequate housing in addressing these challenges and reducing homeless persons' vulnerability against extreme heat, and include a continuum of housing solutions for homeless persons with different needs.

Annexure I



Annexure I

Provisions for Homeless Persons in State Heat Action Plans

| HEAT ACTION PLAN (AT STATE/ UTS/DISTRICTS) | PROVISION/S |
|---|--|
| <div>Andhra Pradesh Heat Wave Action Plan (2025)⁷⁶<div>Andhra Pradesh</div></div> | <p>References to Homeless Persons</p> <ul style="list-style-type: none">→ Recognizes that homeless persons constitute one of the majority of casualties due to heat waves.→ Recommends Municipal Administration and Urban Development Department/ Corporations/ Municipalities & Panchayat Raj Department / Panchayats/ RWS to map high risk areas and identify vulnerable groups particularly destitute, homeless, beggar homes and old age homes to concentrate on mitigation efforts during heat alert period.→ Includes recommendations to provide shelters, drinking water, shaded areas, for vulnerable populations including the homeless. |
| <div>Bihar Heat Action Plan (2019)⁷⁷<div>Bihar</div></div> | <p>No references to Homeless Persons</p> |
| <div>Delhi Heat Action Plan (2025)⁷⁸<div>Delhi</div></div> | <p>References to Homeless Persons, briefly mentioned</p> <ul style="list-style-type: none">→ List item 12 requires 'List of Public shelter homes where people in transit, homeless, can sleep at night' in 'Preparedness Database' table.→ Also mentions establishing additional shelters and ensuring that night shelters are open all day and night with adequate water and electricity. |
| <div>Goa Heat Wave Action Plan (2024)⁷⁹<div>Goa</div></div> | <p>No references to Homeless Persons</p> |



**Gujarat State Action Plan:
Prevention and Mitigation of
Impacts of Heatwave (2020)⁸⁰**

Gujarat

No references to Homeless Persons



**Haryana Heatwave Action
Plan (2019)⁸¹**

Haryana

References to Homeless Persons

- Recognizes homeless persons as a vulnerable group for heat related illnesses.
- Although the plan mentions identification of risk areas, setting up public water dispensers in strategic locations, creating accessible green spaces and making large parks accessible, it does not specifically mention these measures to be made accessible to homeless persons.



**Himachal Pradesh Heat Wave
Action Plan (2024)⁸²**

Himachal Pradesh

No references to Homeless Persons



**Karnataka State Heatwave
Action Plan (2024-2025)⁸³**

Karnataka

No references to Homeless Persons



**Maharashtra State Heat
Action Plan (2024)⁸⁴**

Maharashtra

No references to Homeless Persons



Heat Action Plan 2020
for Odisha⁸⁵

Odisha

No references to Homeless Persons



Rajasthan Heat Wave Action
Plan (2025)⁸⁶

Rajasthan

References to Homeless Persons

- Recognizes homeless persons as one of the vulnerable groups.
- Recommends the Urban Development Department/ Panchayati Raj Department to map high risk areas with vulnerable groups including homeless persons.
- Further recommends them to provide services such as shelters, drinking water, and shaded areas in such regions.



Tamil Nadu: Heat Mitigation
Strategy (2024)⁸⁷

Tamil Nadu

No references to Homeless Persons



The Telangana State Heat
Wave Action Plan (2024)⁸⁸

Telangana

References to Homeless Persons, briefly mentioned

- Recognizes homeless persons as one of the vulnerable groups.
- Recommends to “activate cooling centres” including state run night shelters for those living without access to water and/or electricity.



Uttar Pradesh State Heat Wave Action Plan (2025)⁸⁹

Uttar Pradesh

References to Homeless Persons

- Does not mention homeless persons as a separate vulnerable group.
- Recommends the Urban Development Department/ Panchayati Raj Department to map high risk areas with vulnerable groups including homeless persons.
- Further recommends them to provide services such as shelters, drinking water, and shaded areas in such regions.



Action Plan on Heat Wave, West Bengal (2023)⁹⁰

West Bengal

No references to Homeless Persons



Heat Wave Action Plan, District Jammu (2025-2026)⁹¹

Jammu

References to Homeless Persons, briefly mentioned

- Recognizes homeless persons as one of the vulnerable groups.

Apart from these, HAPs for various cities such as Hoshiarpur and Ferozepur, in Punjab, Churu in Rajasthan, Ahmedabad, and Rajkot in Gujarat, and Varanasi in Uttar Pradesh find no mention of the homeless at all. Only the HAPs for Patiala, Punjab, and Vadodara, Gujarat recognize the vulnerability of homeless persons, but provide no specific measures.

Endnotes

Endnotes

- ¹ See for example, 'Rough sleeping surges as homelessness crisis worsens: New report,' Homelessness Australia , 9 December 2024. Available at: <https://homelessnessaustralia.org.au/rough-sleeping-surges-as-homelessness-crisis-worsens-new-report/> and 'How Climate Change Impacts Homelessness,' National Alliance to End Homelessness , 24 April 2023. Available at: <https://endhomelessness.org/blog/how-climate-change-impacts-homelessness/>
- ² World Cities Report 2022: Envisaging the Future of Cities , United Nations Human Settlements Programme (UN-Habitat), 2022. Available at: https://unhabitat.org/sites/default/files/2022/06/wcr_2022.pdf
- ³ Report of the Special Rapporteur on adequate housing as a component of the right to an adequate standard of living , E/CN.4/2005/48, 3 March 2005. Available at: <https://docs.un.org/en/E/CN.4/2005/48>
- ⁴ See for example, *Sudama Singh v. Government of Delhi*, W.P. (C) Nos. 8904/2009, 7735/2007, 7317/2009 and 9246/2009, High Court of Delhi and *Ajay Maken v. Union of India*, W.P. (C) 11616/2015, High Court of Delhi.
- ⁵ Strategies to Combat Homelessness , United Nations Centre for Human Settlements (UN-Habitat). Available at: <https://unhabitat.org/sites/default/files/download-manager-files/Strategies%20To%20Combat%20Homelessness.pdf>
- ⁶ 'The Mental Health Impact of Climate Change: Understanding the Connection' by Raj Mariwala, Climate Asia (YouTube), 8 May 2023. Available at: <https://www.youtube.com/watch?v=j8GM2xa50nk>
- ⁷ Ibid.
- ⁸ *Climate Change and the Urban Poor: Impact of Heatwaves on Homeless Persons in Delhi*, Housing and Land Rights Network, New Delhi, 2023. Available at: https://hlrn.org.in/documents/Climate_Change_and_the_Urban_Poor.pdf
- ⁹ 'Primary Census Abstract Data for Houseless, India & States/UTs- District Level - 2011', Office of the Registrar General & Census Commissioner, Ministry of Home Affairs, Government of India. Available at: <https://censusindia.gov.in/nada/index.php/catalog/5047>
- ¹⁰ *Shelters for Homeless Women: Working Paper with a Focus on Delhi*, Housing and Land Rights Network, 2017. Available at: <https://hlrn.org.in/en-gb/d?publication=shelters-for-homeless-women-2017>
- ¹¹ *Shahri Adhikar Manch: Begharon Ke Saath* (SAM: BKS) – Urban Rights Forum: With the Homeless is a network of organizations and individuals working to address the issue of homelessness in Delhi.
- ¹² *Enumerating the Homeless in Delhi: An Exercise by Shahri Adhikar Manch: Begharon Ke Saath* (Urban Rights Forum: With the Homeless), 2024. Available at: <https://hlrn.org.in/en-gb/d?publication=enumerating-the-homeless-in-delhi-2025>
- ¹³ Dupont, Veronique, 'Mobility Patterns and Economic Strategies of Houseless People in Old Delhi', In *Delhi: Urban Space and Human Destinies*, Veronique, Dupont, Emma, Tarlo and Vidal, Denis (ed.), New Delhi: Manohar Publishers and Distributors, pp. 99-124, 2000. Available at: https://horizon.documentation.ird.fr/exl-doc/pleins_textes/divers14-11/010023834.pdf
- ¹⁴ *Enumerating the Homeless in Delhi: An Exercise by Shahri Adhikar Manch: Begharon Ke Saath* (Urban Rights Forum: With the Homeless), 2024. Available at: <https://hlrn.org.in/en-gb/d?publication=enumerating-the-homeless-in-delhi-2025>
- ¹⁵ For details on various human rights violations faced by homeless persons, see: *Shahri Adhikar Manch: Behgaron Ke Saath*. (Urban Rights Forum) – *The Trajectory of a Struggle*, SAM:BKS, 2014. Available at: <https://hlrn.org.in/en-gb/d?publication=sam-bks-the-trajectory-of-a-struggle-english-2014>
- ¹⁶ Pancholi, Soumya, *Understanding Urban Homelessness*, Social and Political Research Foundation. Available at: <https://sprf.in/wp-content/uploads/2021/01/Copy-of-Urban-Homelessness.pdf>
- ¹⁷ Chaudhry, Shivani, A. Joseph, and Indu Prakash Singh, *Violence and Violations: The Reality of Homeless Women in India*, New Delhi, 2014. Available at: https://hlrn.org.in/documents/Violence_and_Violations_Homeless_Women_in_India_2014.pdf
- ¹⁸ Shelter Homes Occupancy Report, Delhi Urban Shelter Improvement Board. Available at: <https://www.delhishelterboard.in/occupancy-report/>

- ¹⁹ These findings are consistent with the observations made by the HLRN team in their regular shelter monitoring visits. HLRN has been conducting such visits since over a decade.
- ²⁰ *Impact of the Second Wave of the Pandemic on Delhi's Homeless Population: Findings of a Rapid Assessment Survey*, Housing and Land Rights Network, New Delhi, 2021. Available at: <https://hlrn.org.in/en-gb/d?publication=impact-of-the-second-wave-of-the-pandemic-on-delhi-2021>
- ²¹ 'Govt's Low-Rent Housing Scheme Drags, Leaves Poor & Migrant Workers Homeless', *The Quint*, 27 March 2025. Available at: <https://www.thequint.com/jobs/affordable-rental-housing-scheme-arhc-awas-yojana-pmay-urban-poor-migrant-workers-latest-news#read-more>
- ²² For details on the impact of the expiration of the scheme, see: 'Bengaluru's Homeless Shelters in Dire Straits after Expiry of Central Programme', *Citizen Matters*, 7 July 2025. Available at: <https://citizenmatters.in/bengaluru-homeless-shelters-condition-post-day-nulm/>
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Housing and Land Rights Network (HLRN)—based in New Delhi—works to enhance knowledge and action towards the recognition and full implementation of the human rights to adequate housing and land in India. This involves gaining a safe and secure place for all individuals and communities, to live in peace and dignity. Our special focus remains on the most marginalized populations living in inadequate housing conditions, in informal settlements or homelessness, and those facing evictions or displacement.

Homeless persons are at the forefront of the climate crisis, as they endure every weather without the protection of a home. In addition to having serious implications on their physical health, climate change, particularly extreme heat is negatively impacting their mental wellbeing. This report, 'Surviving Heat on the Streets: An Assessment of the Psychosocial Impacts of Extreme Heat on Homeless Persons' examines the close interconnections between homelessness, extreme heat, and mental health. It offers recommendations to central, state, and city governments to recognize the specific challenges of homeless persons in relation to extreme heat.

We hope that this report will highlight the often overlooked and understudied psychosocial impacts of inadequate housing and climate change, and urge the inclusion of homeless persons in housing, climate change, and mental health policies.

