

REDLAC Shelter, Land and Site Coordination Meeting 10th March, 2026

The health outcomes of shelter and settlements interventions in humanitarian crises

Introduced by **Jim Kennedy**

Global Shelter Land, and Site Coordination Cluster Focal Point for Research

GLOBAL SHELTER, LAND AND SITE COORDINATION CLUSTER



STRATEGY
2030



GLOBAL
SHELTER CLUSTER

Coordinating Humanitarian Shelter and Settlements

Life Saving and Life Enabling

VISION

The Global Shelter Cluster envisions a world where all people affected by humanitarian crises have timely access to safe, dignified, and appropriate shelter and settlement solutions, in accordance with the humanitarian principles and the right to adequate housing.

EVIDENCE AND
INNOVATION

STRATEGIC
OBJECTIVE

To achieve this vision, the Global Shelter Cluster partners will lead effective, efficient and accountable humanitarian shelter and settlement action to achieve extended impact and optimal reach.

COORDINATION
AND
COLLABORATION

STRATEGIC PRIORITIES

EXTENDED IMPACT

- 1.1 *Promote integrated approaches to preparedness and response*
- 1.2 *Improve environmental impact*
- 1.3 *Enable safe, secure, accessible and protective living conditions*
- 1.4 *Plan for recovery and durable solutions from the start*

OPTIMAL REACH

- 2.1 *Prioritize and resource shelter and settlement responses*
- 2.2 *Improve targeting of the most vulnerable people*
- 2.3 *Increase coverage*

ENABLERS

ENABLERS

ACCOUNTABILITY
TO AFFECTED
PEOPLE

LOCALIZATION

ADVOCACY

IMPLEMENTATION MECHANISMS

STRENGTHENING
CAPACITY

EXTENDED IMPACT

- 1.1 *Promote integrated approaches to preparedness and response*
- 1.2 *Improve environmental impact*
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*The idea that shelter is life saving and life enabling is essential to grasp the far-reaching impacts of shelter and settlements responses. Shelter is where families find safety, children study, meals are prepared and futures are rebuilt. **By providing shelter, we not only offer protection from the elements, but we empower individuals and communities to nurture hope, promote health and restore their capacity to overcome adversity.***

GSC Strategy 2030



USAID
Habitat for Humanity
Aktion Deutschland Hilft
Global Shelter Cluster
ShelterCluster.org
Coordinating Humanitarian Shelter

Research themes were chosen through a consultation with Cluster Coordinators to represent key areas where there are gaps in the evidence needed for humanitarian assistance:

- **The Wider Impact of Shelter and Settlements**
- **Moving from Relief to Recovery**
- **Cash and Markets Approaches**

The Global Shelter Cluster Research Agenda

<https://sheltercluster.org/resource/research-initiatives>

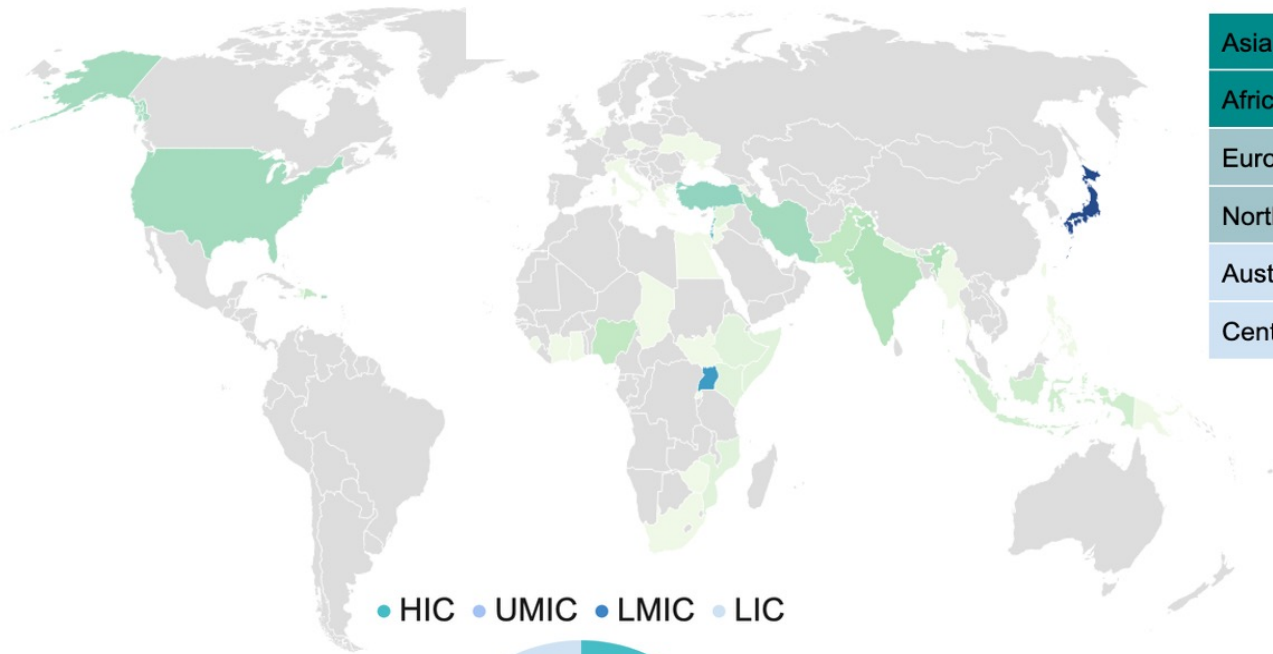
Research Questions

How does **shelter and settlement assistance** influence **health outcomes** in **humanitarian crises**, and under what conditions do these impacts occur?

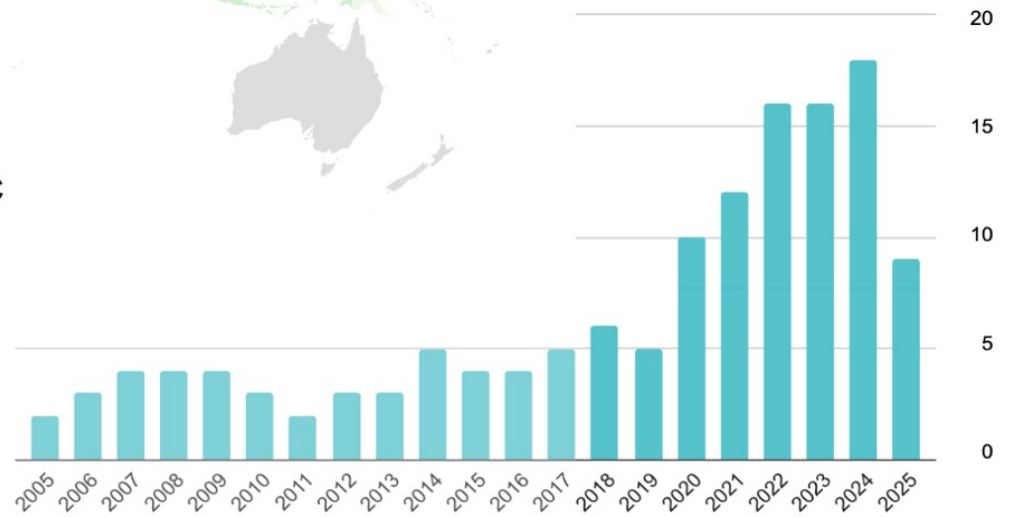
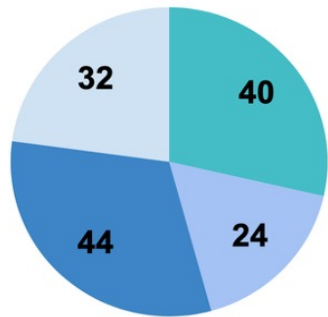
- What are the specific health outcomes influenced by shelter and settlement assistance in humanitarian crises?
- How do different types of physical structures and household items affect physical and mental health outcomes in humanitarian crises?
- What evidence is there of how shelter and settlement processes impact the health of individuals and communities in humanitarian crises?
- How do shelter and settlement interventions such as site and settlement planning, the repair of physical structures, security of tenure and transfers impact the health of affected populations?

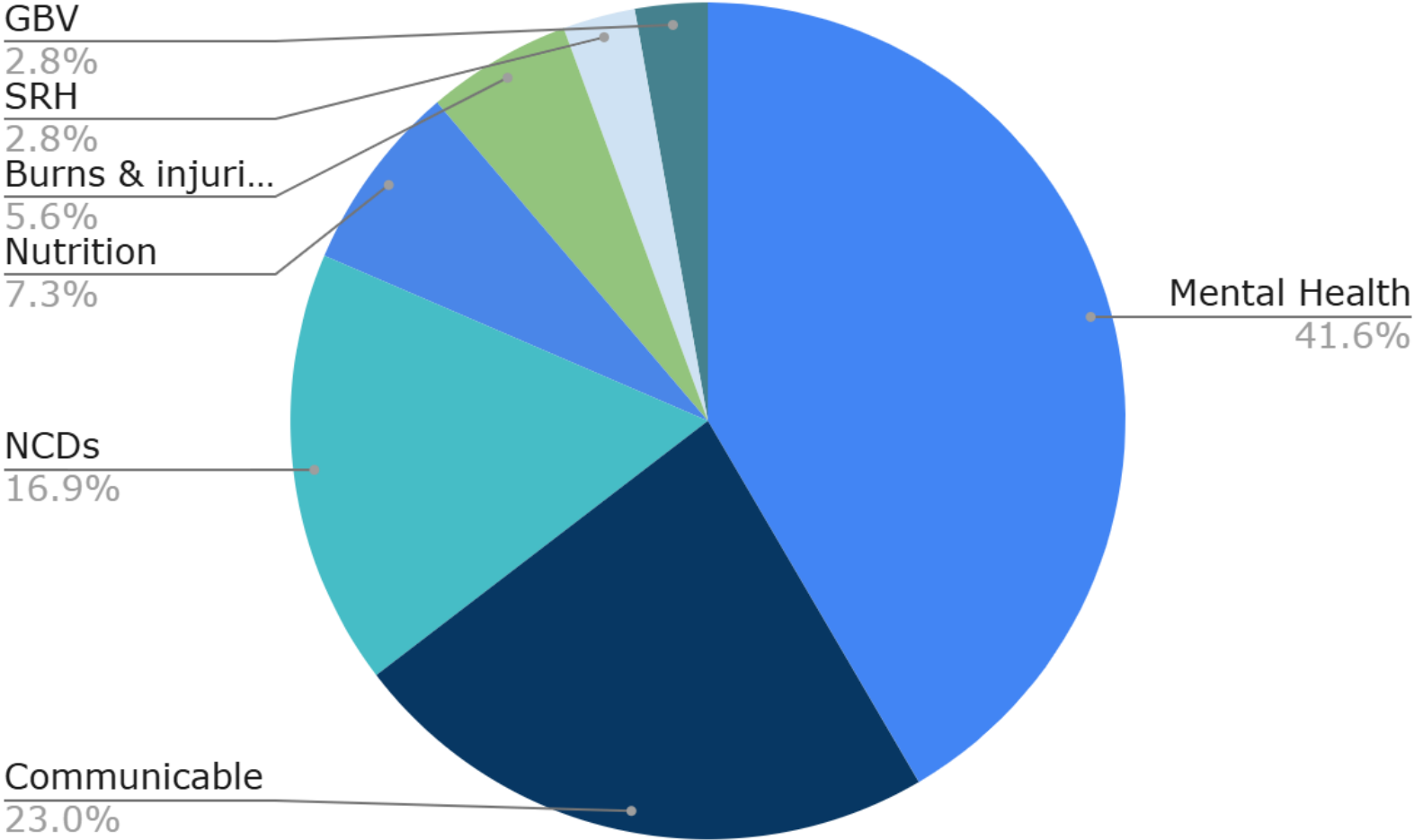
Methodology

- Study protocol was developed
 - English language
 - Preference for LMICs but not excluding HICs
 - Primary research studies
 - Peer reviewed literature & grey literature
- Peer-review of protocol by Steering Committee
- Systematic review conducted from April to July 2025
- **138 articles included**



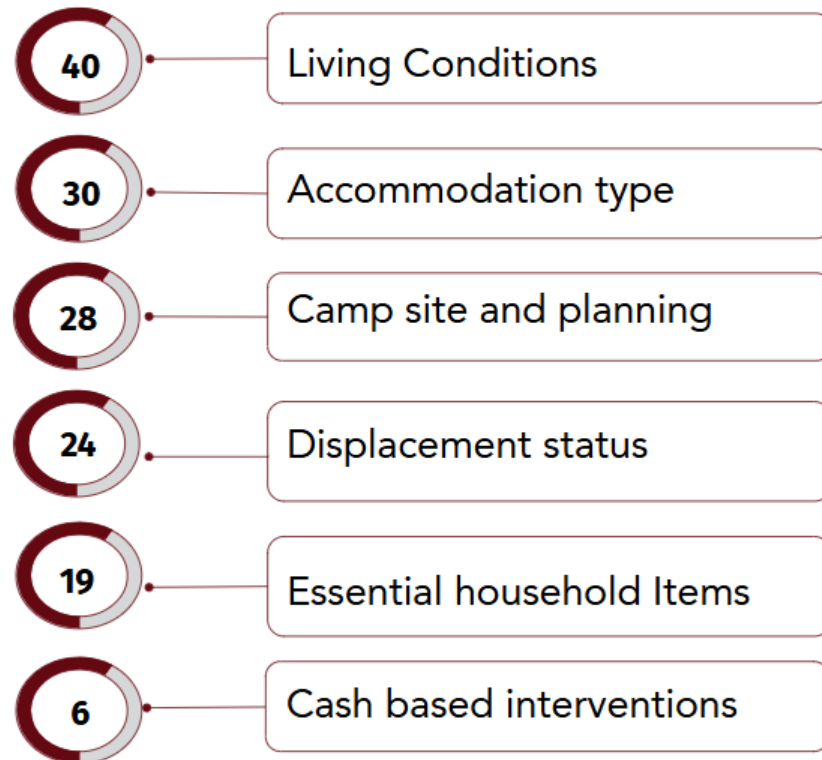
| | |
|-------------------------|----|
| Asia | 80 |
| Africa | 36 |
| Europe | 10 |
| North America | 10 |
| Australasia | 1 |
| Central & South America | 1 |





Living conditions

Thematic analysis



Short term shelters

- Strongly associated with poorer **mental health** outcomes, worst outcomes seen in those sheltering in tents
- PTSD risk varied when comparing tents, community shelter and prefabs
- Overcrowded tents and temporary shelters were associated with higher incidence of **burns and injuries**
- Emergency shelters and settlements that incorporated public health expertise during planning and setup achieved better outcomes in terms of **outbreaks**
- Children living in houses showed higher levels of **malnutrition** than those in tents or community shelters, raising questions about the targeting of aid in non-camp settings

Medium-term shelters

- Prefabricated units and disaster-recovery condominiums were associated with increased **psychological distress, depression and anxiety**
- This was less pronounced or absent in units located on school grounds, in parks , or rural locations
- Displacement to temporary shelters was associated with increased risk of **NCDs**, through prevalence of risk factors such as smoking, obesity or metabolic syndrome, and shifts in nutrition

Long term shelters

- Long term shelter arrangements had a significant impact on chronic disease management
- Individuals living in rental or rental public housing (state owned) were two to four times more likely to be non-compliant with their **chronic disease** medication than those living in their own homes
- Displacement to locations farther from home, such as outside of their original school district, was associated with worse medicine adherence

Displacement status

- The review found that **displacement**, across various contexts, countries and crises, is strongly associated with worsened mental health outcomes when compared to non-displaced populations.
- The impact intensifies with the **frequency** and, in some cases, the **duration** of displacement.
- While short- and medium- term displacement often exacerbates health (both physical and mental health) and nutrition risks, some long-term displaced populations show some signs of adaptation and improved health outcomes over time.
- The more **frequently** individuals are displaced, the worse their mental health outcomes, regardless of the specific cause of displacement.

Camp and site planning

- **Location and site planning**, particularly factors such as population density, spatial layout, and accessibility to services, have a direct impact on health outcomes.
- Two studies, in Uganda and the West Bank, oPt, found worsened mental health outcomes among those living in rural camps while three other papers, in Egypt, Gaza, oPt and Jordan reported similar challenges in urban environments
- Lack of access to livelihoods, often determined by a camp's location, has been associated with increased communicable disease risks.
- The spatial layout of camps can exacerbate vulnerabilities for certain sub-groups of **displaced and host populations**. In one camp in Chad, individuals with physical impairments reported feeling significantly less secure, depending on their location within the camp

Cross-cutting issues

- **Gender**

- Heightened vulnerability due to inadequate privacy, unsafe shelter design, and exposure to GBV in overcrowded or communal living spaces
- Injuries from unsafe cooking environments disproportionately affected women and girls

- **Climate**

- Leaking roofs, lack of insulation, and exposure to vectors in warm, humid environments were linked to increased communicable diseases, sleep disruption, and respiratory conditions
- Climate vulnerability was especially pronounced in informal settlements and temporary shelters

- **Living with chronic conditions**

- Displacement often disrupted access to medications and care
- Limited electricity affected the storage of temperature-sensitive drugs, while physical distance from services posed barriers to ongoing treatment

Conclusion

- Health outcomes are influenced by living conditions including housing quality, accommodation type, camp and site planning, displacement dynamics and by the provision of additional EHIs
- Type and duration of accommodation shapes health outcomes over time, with
 - short-term shelters linked to acute mental health issues and injury risk,
 - medium-term shelters contributing to worsening NCD risk factors,
 - long-term housing affecting chronic disease management and nutrition
- Where improvements were introduced, significant health benefits were observed

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