

Homelessness Scrutiny report

1. Please describe your understanding of the nature, causes and extent of homelessness and rough sleeping and the impact that homelessness has on the health, wellbeing and safety of homeless people

Nature of Homelessness

Types of homelessness

Although the term 'homeless' is often applied in everyday language to people who sleep rough, the legal definition is much broader, encompassing anyone who has no home in the UK or anywhere else in the world available to occupy. This not only includes people without a roof over their head but people whose accommodation is insecure; those facing eviction, living in temporary accommodation, squatting, people at risk of violence, those housed in property potentially damaging to their health, and those who cannot afford their current accommodation. The range of circumstances denoting homelessness means that there are several categories of homelessness, defined and measured in different ways. These are outlined below.

Statutory homeless Households deemed to be homeless, eligible for support from their local council and in priority need.

Single homeless Those who are homeless but do not meet the priority need criteria to be housed by their local authority under homelessness legislation. They may live in supported accommodation, e.g. hostels and semi-independent housing projects, sleep rough, sofa surf or live in squats. They may also be referred to as non-statutory homeless.

Vulnerably housed People without accommodation, people in temporary, insecure or poor quality accommodation including overcrowding, or those who are threatened with homelessness.

Street homeless People sleeping rough.

Hidden homeless People not recorded in official statistics, who tend to reside in squats, on the floors or sofas of friends and families, or sleep rough in concealed locations.

People experiencing homelessness may move in and out of these categories as their circumstances change and their needs change accordingly. The only people who by law are entitled to be provided with housing are the 'statutory homeless' who meet the criteria for 'priority need'⁵. In these circumstances, local authorities have a statutory duty to find accommodation for the applicant. When homelessness applications are declined

Causes of homelessness

Shelter divide the causes of homelessness under three distinct categories these are

1. Personal causes of homelessness
2. Structural causes of homelessness
3. Reasons given by homeless people for being homeless

1. Personal causes of homelessness

A number of different personal and social factors can contribute towards people becoming homeless. These may include one or more of the following:

- individual factors including lack of qualifications, lack of social support, debts - especially mortgage or rent arrears, poor physical and mental health, relationship breakdown, and getting involved in crime at an early age
- family background including family breakdown and disputes, sexual and physical abuse in childhood or adolescence, having parents with drug or alcohol problems, and previous experience of family homelessness
- an institutional background including having been in care, the armed forces, or in prison.

Tackling these problems is a complex business and normally requires support from public bodies, friends and family, combined with a lot of hard work from the individual or family in trouble. Public support might include intervention, advice, counselling, training or provision of alternative accommodation by a local authority where appropriate.

However, in all instances Shelter believes these problems can be best resolved when the person or family in question has a decent and secure home.

2. Structural causes of homelessness

Structural causes of homelessness are social and economic in nature, and are often outside the control of the individual or family concerned.

These may include:

- unemployment
- poverty
- a lack of affordable housing
- housing policies
- the structure and administration of housing benefit
- wider policy developments, such as the closure of long-stay psychiatric hospitals.

These problems require long-term policy solutions such as changes in the housing benefit system, the building of more affordable homes, and ensuring that a wider cross-section of society benefits from the fruits of economic growth.

3. Reasons given by homeless people for being homeless

The three main reasons for having lost a last settled home, given by applicants for homelessness support from local councils are:

- parents, friends or relatives unwilling or unable to continue to accommodate them
- relationship breakdown, including domestic violence
- loss of an assured shorthold tenancy.

However, these reasons are only the catalysts that trigger people into seeking assistance, and not the underlying issues that have caused the crisis to build up in the first place.

For many people, there's no single event that results in sudden homelessness. Instead, homelessness is due to a number of unresolved problems building up over time.

[1] Statutory homelessness statistics, CLG, 2008

Structural and individual factors are often interrelated; individual issues can arise from structural disadvantages such as poverty or lack of education. While personal factors, such as family and social relationships, can also be put under pressure by structural forces such as poverty.

Extent of homelessness and rough sleeping

We currently do not have enough intelligence and insight to determine the true extent of homelessness, however plan to do so through a homelessness needs assessment.

Impact of homelessness on health, wellbeing

Using information supplied by over 2,500 people, 'The unhealthy state of homelessness' report highlights the extent to which people who are homeless experience some of the worst health problems in society. The report uncovers the barriers many individuals face accessing treatment, as well as the impact of ill health on NHS A&E, hospital, mental health and substance misuse services.

Homeless Link first published national data in it's 2010 Widespread ill-health report

The new 2014 report makes clear that we are yet to see a real improvement in reducing the scale of health problems faced by those who have experienced homelessness. Those with experience of homelessness are also more likely to have unhealthy lifestyles, which can cause long term health problems or exacerbate existing issues.

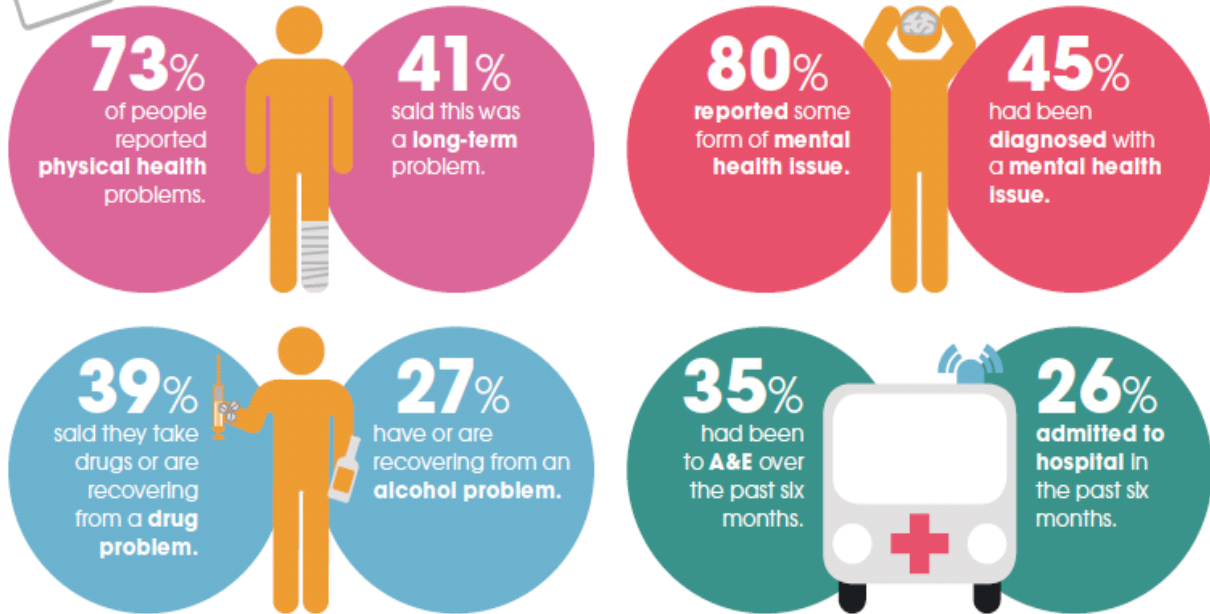
Analysis of the latest data found that 77% of homeless people smoke, 35% do not eat at least two meals a day and two-thirds consume more than the recommended amount of alcohol each time they drink.

Despite 90% of those surveyed reporting they are registered with a GP, a significant number of homeless people report they are not receiving help with their health problems.

Diagram 1 below illustrates health problems experience by those who are homeless



Homeless health check



Worse than the general public	Health issue	Homeless population	General population
Physical, mental and substance misuse issues remain prevalent among the homeless population and at levels that are much higher than those experienced by the general population.	Long term physical health problems	41%	28%
	Diagnosed mental health problem	45%	25%
	Taken drugs in the past month	36%	5%

In summary those experiencing homelessness of any sort have poorer access to health services and worse health outcomes.