

Topic briefing: Health and homelessness

July 2018

This is one of a series of topic briefings relating to housing and homelessness. This briefing focuses on a large-scale data-linkage research project by the Scottish Government to analyse the relationship between homelessness and health.

You may also be interested in our topic briefings on:

- [*Time in temporary accommodation*](#)
- [*Children experiencing homelessness*](#)

Contact: Izzy Gaughan, Campaigns and Policy Officer,
izzy_gaughan@shelter.org.uk

Key points

- For the first time, a large-scale research project by the Scottish Government has linked homelessness and health datasets to show the relationship between homelessness and health.¹
- Homelessness and poor health are inextricably linked.
- As a group, people who have experienced homelessness have many more interactions with health services than those who have no experience of homelessness. Interactions with some services, particularly those related to alcohol, drugs and mental health, increase in the lead up to a homeless application.
- People who have experienced homelessness are more likely to have a health condition relating to either drugs, alcohol or mental health – however over half do not have any such health condition.
- People who have experienced homelessness are more likely to have experienced multiple health conditions relating to drugs, alcohol and mental health. However only a small proportion, 6%, have experience of all these conditions.
- For people experiencing homelessness more than once, the health activity and problems can be even more drastic.
- All evidence indicates the value of partnership working between health and homeless services, including the importance of signposting and the colocation of services, to ensure that where homelessness can be prevented, it is, and where it cannot, that people receive the right support at the right time.

¹ Scottish Government (2018), Health and Homelessness in Scotland, <http://www.gov.scot/Publications/2018/06/7974/downloads>

Background

This study supports what we already know: **poor health and homelessness are inextricably linked. People who are homeless experience poorer mental and physical health than the rest of the population, and this is particularly pronounced for the small population who sleep rough or experience repeat periods of homelessness.**² This relationship goes both ways, for example poor mental health can be both a cause and a consequence of homelessness, as can alcohol and drug abuse.³ This is something Shelter Scotland see every day through the experiences of those who approach us for help.

Health and homelessness in Scotland

Several small-scale studies had been completed in the past showing the relationship between health and homelessness,⁴ but the recent Scottish Government research⁵ is the largest and most thorough national study completed. This study looked at the data of over 1.3 million people, including 435,853 who had been in households assessed as homeless or threatened with homelessness between June 2001 and November 2016 (the 'Ever Homeless Cohort') with two samples matched on age and sex from the 20% least and the 20% most deprived areas of Scotland (the 'Least Deprived Cohort' and the 'Most Deprived Cohort'). The study compared many health datasets including that on prescriptions, accident and emergency attendance, both in- and out-patient appointments, and data on drug misuse, mental health admissions, and deaths.

- People who have experienced homelessness have many more interactions with the health service than non-homeless households.
 - The rate of attendance at A&E was almost twice as high for households experiencing homelessness as those from the most deprived areas, and three and a half times higher than those from the least deprived areas.
 - The rate of admission to mental health services was almost five times higher for households experiencing homelessness than those from the most deprived areas, and 20 times higher than those in the least deprived areas.
- An increase in interactions with health services preceded people becoming homeless, particularly services related to mental health, drugs and alcohol which suggests these are likely risk factors for homelessness. For people who experiencing repeat homelessness, the number of

² For example, ScotPHN (2016), Restoring the Public Health response to Homelessness in Scotland, <https://www.scotphn.net/wp-content/uploads/2015/10/Restoring-the-Public-Health-response-to-Homelessness-in-Scotland-May-2015.pdf>

³ NHS Health Scotland (2016), Health and homelessness, <http://www.healthscotland.scot/publications/health-and-homelessness>

⁴ For example, several are referenced in ScotPHN (2016), Restoring the Public Health response to Homelessness in Scotland, <https://www.scotphn.net/wp-content/uploads/2015/10/Restoring-the-Public-Health-response-to-Homelessness-in-Scotland-May-2015.pdf>

⁵ Scottish Government (2018), Health and Homelessness in Scotland, <http://www.gov.scot/Publications/2018/06/7974/downloads>

interactions with health services remained high even after an application had been made.

- 51% of people who have experienced homelessness had no evidence of health conditions relating to drugs, alcohol or mental health.
 - This is important in dispelling the myth that homelessness is largely a substance abuse issue.
 - However, more people who had experienced homelessness did have health conditions relating to drugs, alcohol or mental health when compared to people from the most deprived and least deprived areas who hadn't experienced homelessness.
- There is an overrepresentation of mental health problems in the homeless sector: around 30% have evidence of a mental health problem (with no evidence of drug or alcohol-related conditions at any point) compared to 21% of people from the most deprived areas and 13% from the least deprived areas.
- 6% of people experiencing homelessness have experience of all three of the following conditions at some point – a mental health condition, a drug-related condition and an alcohol-related condition.
 - This finding is important in acknowledging that a small portion of homeless people have this combination of multiple and complex needs and will require specific support.
 - Though this was higher than people from the most and least deprived areas who hadn't experienced homelessness (1% and 0.2% respectively), it is also important to acknowledge that many people experiencing homelessness do not have this combination of multiple and complex needs.
- The research also looked at the rate and cause of deaths amongst the sample, and found that within the study period there was a higher rate of death for people who had experienced homelessness and that these individuals were more likely to have died at a younger age.

Conclusion

The relationship between making a homelessness application and more interactions with health services shows that the integration of housing advice in health is essential. Shelter Scotland provides outreach advice services in many health locations, including in GP surgeries and specialist housing advice at A&E in Victoria hospital, in Fife, as part of a two-year partnership project with Fife Health and Social Care Partnership. The right advice, at the right time, can help ensure the housing safety net is in place for anyone who falls into housing crisis, ensuring everyone gets the support they need.

We know that, in general, people who have experienced homelessness have higher health needs than those who have not been through the homelessness system – particularly in relation to mental health and addictions. We also know, from the higher rate of missed appointments for people who have experienced homelessness, that people can find it harder to engage with traditional services during the crisis of homelessness. This shows the need for an integrated response to ensure that the health needs of this group are adequately met, health and housing services to work together to tackling health inequalities and both prevent homelessness and move people into permanent accommodation as quickly as possible.

Getting this right can reap huge benefits for the health service in terms of reduced costs, for tackling homelessness, and most importantly for people experiencing the crisis of homelessness.

Shelter Scotland helps over half a million people every year struggling with bad housing or homelessness through our advice, support and legal services. And we campaign to make sure that, one day, no one will have to turn to us for help.

We're here so no one has to fight bad housing or homelessness on their own.

Please support us at shelterscotland.org

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Shelter Scotland
Scotiabank House
6 South Charlotte Street
Edinburgh EH2 4AW

shelterscotland.org

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