

# Homelessness

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“...Homelessness takes many forms. Rough sleeping can be shockingly visible. But many people’s experiences of homelessness are out of view... in derelict buildings, squats or sofa surfing. Then there are those living in hostels, night shelters or temporary accommodation leased by their local authority...”

Homeless Link

# Definitions of homeless

## “Statutory” homeless

Individuals and households whom the Local Authority deem under the 2003 Housing Act to be “unintentionally homeless” and in “priority need” – predominantly families with dependant children, pregnant women and a *small* number of single people deemed as “vulnerable”

## “Non-statutory” homeless

Those who do not fall into the definition of “priority need” or the statutory definition of “vulnerable” and who are deemed to be “intentionally” homeless - *the vast majority of single* people and couples without dependants

“...Homelessness is about more than rooflessness. A home is not just a physical space, it also has a legal and social dimension...A home provides roots, identity, a sense of belonging and a place of health and emotional wellbeing... Homeless is about the loss of all of these... It is an isolating and destructive experience...homeless people are some of the most vulnerable and socially excluded in our society...”

Crisis



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# **Homelessness...The impact on health**

The health of people who are homeless is among the poorest in our communities

The average life expectancy of a male rough sleeper is 47 years, compared to 77 years for the general population, for female rough sleepers it is lower at just 43 years

Homeless people are 9 times more likely to commit suicide than the general population



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# **Local need – the picture for Nottinghamshire**

- Health Needs Assessment carried out across Nottinghamshire
- Overall lifestyle, physical and mental health factors appear worse than, or at best in line with, that of the national picture
- The needs of the offending homeless population broadly mirror that of the general homeless population

# Local need – the picture for Nottinghamshire

- Smoking rates show prevalence three times higher compared to Nottinghamshire's general population
- The prevalence rate of mental health is much higher than average – 74% of respondents reported mental health problems, with 31% having a diagnosed disorder
- Drug use is reported to be considerably higher, 38% for the general homeless population, 56% for the offending homeless population
- 18% of respondents reported having or recovering from an alcohol problem
- Despite homeless people being ten times more likely to suffer from TB, only 21% of respondents had actually been tested
- A&E attendance and hospital admission is nearly double that of the general population
- 65% of respondents reported having at least one physical health need, with 3.2 being the average number of conditions per person
- Higher than average levels of GP registration

# What does this tell us?

- Systems need to be in place to identify and refer statutory and non statutory homeless people as they access various parts of the system
- CCG's and NHS England should encourage a review of primary care to make sure it is meeting the needs of its homeless populations
- Commissioners should always consider the needs of the homeless and make sure services are delivered in a way that is accessible to them
- The Local Authority should actively identify homeless individuals for referral and screening of TB
- The complex, cross cutting needs of this vulnerable population requires collaborative working



**Thank you**

**Any questions?**



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