Single Homeless People in London: Profiles of Service Users and Perceptions of Needs

Executive summary

In June 2000, St Mungo’s, Thames Reach and Bondway Housing Associations commissioned a study of the profiles of single homeless people in London, with particular reference to sex, age, and ethnic groups, and perceptions of unmet need and priority groups. The study relied on the cooperation of the providing organisations and their staff to return the required information. High rates of participation were achieved.

Sources of information

- Combining information on various street out-reach workers’ contacts between April 1999-March 2000, 4,465 people were recorded as rough sleepers. Of these, 334 (7%) did not appear in the Outreach Directory (maintained by the Housing Services Agency). They were mainly middle-aged and older people and many were found in outer London.
- On 16th August 2000, a one-night survey was carried out in London’s direct-access and first-stage hostels. Information was gathered from 67 hostels about 3,295 residents.
- A survey was organised of day centre attenders on 11th July 2000. Information was collected from 23 London day centres about 1,187 attenders.
- Details were compiled about single homeless people who were resettled between April 1999 and March 2000. Sixty-four organisations in London forwarded information about 2,300 resettled clients.
- A core set of information on age, sex, and ethnic group was collected for each of the above settings, and on the presence of alcohol, drug and mental health problems for rough sleepers, hostel residents, and resettled clients.
- A survey was undertaken of first-line managers working in the homeless sector in London. Replies were received from 119 staff about their opinions of current services and their recommendations for future development.
- Searches were undertaken of parliamentary proceedings, specialist journals, three broadsheet newspapers and the BBC archive for the representations of and commentary about single homeless people in public debates.

Findings

Profiles of single homeless people

- In all settings where single homeless people were surveyed, men heavily outnumbered women (by around 4 to 1). Women were more numerous than men only among young teenagers who slept rough, were resident in hostels, and among those who were resettled.
- In all settings, around one-half of the men were aged 30-49 years. Among men sleeping rough and in hostels, a slightly higher proportion were aged 50 and over than under 25. The reverse was true for men who were resettled.
- Among women, one-half of hostel residents and rough sleepers, and nearly two-thirds of resettled clients were aged under 30 years. In contrast, only 27% of women sleeping rough and in hostels, and only 16% of resettled clients, were aged 40 or over.
- One-night counts of rough sleepers showed an older age distribution than the records for the year. This suggests that older people are remaining on the streets longer than younger people.
- There were marked differences across the settings in the ethnic group composition of single homeless people. Compared to hostel residents and resettled clients, only a small proportion of rough sleepers were from the minority ethnic groups.
The difference was most notable among Black Africans, who accounted for 2% of rough sleepers yet one-fifth of hostel residents and resettled clients. In contrast, 87% of rough sleepers were White British or Irish compared to one-half of hostel residents and resettled clients.

- Mental health and substance misuse problems were prevalent among single homeless people of all age groups. The problems were apparent in all settings but most pronounced among those sleeping rough, of whom 67% of the men and 71% of the women were reported to have at least one of these problems.

- Alcohol problems were most common among middle aged and older homeless men, whereas drug problems were most found among men and women aged under 40 years. Among rough sleepers aged under 25 years, 57% of the women and 46% of the men were reported to have drug problems. There was a marked increase with age in the prevalence of mental health problems among homeless women: two-thirds of women aged 50 years and over in hostels and on the streets were mentally ill.

- Among hostel residents there were notable concentrations of: (i) older Irish men with a high prevalence of alcohol problems, (ii) older women with very high rates of mental illness, and (iii) Black African women aged under 40 years.

- The durations of stay among hostel residents showed a strong polarisation, with a large percentage being just a few weeks, but substantial numbers being more than 5 years and several more than 10 years. Exceptionally long durations of stay were seen among the older age groups, Irish men and women, and both women from continental Europe and those with mental health problems.

- Long durations of hostel stay were also seen among some young age groups: several residents aged in their twenties and thirties had been resident for more than two years.

- The principal variations in the apparent rate of resettlement were by age and ethnic group. Young homeless people were more likely than older people to be resettled. Those from ethnic minority groups tended to have a high rate of resettlement, whereas Irish men have a low rate.

- Only a minority (around 27%) of single homeless people were rehoused through The Clearing House and their profiles were very different to those of rough sleepers. Compared to rough sleepers, people rehoused through The Clearing House tended to be young, from ethnic minority groups, and to have fewer mental health and substance misuse problems.

- The majority of day centre users (68%) were aged 30-59 years, and most (80%) were born in the British Isles. Nearly one-fifth used more than one centre on the survey day.

- Most young day centre attenders were homeless and on the streets or in temporary accommodation. They tended to use central London day centres and, among those aged under 20, many were from the minority ethnic groups. In comparison, many older attenders were surveyed at outer London day centres and had permanent accommodation.

**Staff opinions and public debates**

- The majority of staff expressed concern about delays in accessing (i) specialist mental health and substance misuse treatment services, (ii) input from social services and community care assessments, and (iii) suitable move-on accommodation with support. They reported inadequate provision for homeless people with mental health and substance misuse problems or a history of violence, and believed that there should be more opportunities for hostel residents to develop daily living skills and be resettled.

- The staff demonstrated a widespread awareness of the intractable problems of those with dual and multiple diagnoses, but the public discourse devoted little attention to the issues. Apart from references to people with drug problems,
there was little mention of the high prevalence of alcohol problems and mental illness among homeless people, and of the entrenched difficulties and inadequate responses to these problems.

- Accounts of homeless people in the mass media, specialist journals and parliamentary debates during the past two years concentrated on rough sleepers and young homeless people. There was a secondary concentration on those leaving foster and local authority care, the armed services, and prison. There were few references to the ethnic profiles of homeless people, and hardly any to their distinctive pathways into homelessness.

**Service development issues and recommendations**

- Homeless services are helping single homeless people who have diverse problems and needs. At one extreme are people with few problems other than that of housing need, while at the other are people with severe mental health and substance misuse problems. This raises issues about the respective responsibilities and roles of voluntary sector homeless organisations and of statutory mental health, housing and social services departments in helping various groups of homeless people. The boundaries between and responsibilities of voluntary and statutory service-providers need to be clarified and more attention given to collaboration.

- The profiles of single homeless people in the various settings differed considerably, and these strongly suggested that certain groups remained on the streets and in hostels to an unusual degree. This raises issues about: (i) the ‘gatekeeping’ role of services and the ways in which they target and select clients; (ii) the distinctive pathways into, through, and out of homelessness for different groups of homeless people; and (iii) the adequacy, appropriateness and effectiveness of current services for clients with different needs. These topics require further research.

- Hostels for homeless people are fulfilling many functions and work with diverse client groups. Consideration should be given to the role of first-stage hostels in terms of: (i) their relative attractiveness and accessibility to rough sleepers (a concern raised in the staff survey) and to other single homeless people; (ii) the services that they provide and their effectiveness in supporting, rehabilitating and resettling residents; and (iii) the obstacles that they experience in providing help to residents and referring them to services and housing.

- Day centres are working with clients in various housing situations, from rough sleeping to permanent accommodation. There is a need to clarify the role of day centres and determine, for example, the needs of former homeless people who are rehoused, and whether they are best supported at day centres or at other facilities.

**Geographical distribution**

- First-stage hostels and day centres for homeless people are concentrated in central London while some outer London boroughs have no services. Hence, single homeless people in the unserved boroughs are either excluded from services or have to access those in the city centre. This has clear implications for the statutory and voluntary providers, and may foster the street culture in central London. This indicates the importance of all London boroughs developing effective homelessness strategies.

**Improving the operational data**

- Priority should be given to improving the collection of data by the homeless service organisations. Some had well designed and accessible operational data, but others had poor quality records and so found it extremely difficult to provide basic details of resettled clients, even though resettlement is a key indicator of performance. Within organisations, comprehensive, easily accessible and retrievable records should be maintained which identify the clients’ needs, the help that they receive, and the outcomes.
• There was little pooling of information between organisations to demonstrate the turnover of single homeless people in London and the demand for services. The aggregation of day centre attenders and resettled clients for this study was unprecedented. There should be more emphasis on collecting and assembling standardised information among the organisations, as to provide yearly statistics of hostel residents and resettled clients. This requires compatible record-keeping and standardising age and ethnic groups.

• The study has demonstrated that a multi-strand enumeration and survey of single homeless people in London can be undertaken with quite modest resources given the willing participation of all the providing organisations. If all participated, the cost of repeating annually the one day/night counts would be trivial to each organisation.