



# **Mapping for Communicable Disease Inclusion Health Programme: Homelessness**

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## Who are Shelter Cymru?

Shelter Cymru are a registered charity dedicated to supporting the right to a safe home in Wales. We campaign on Welsh housing issues with a view to influencing positive change. Our vision is that a decent, secure home is a fundamental right and essential to the health and well-being of communities

We help thousands of people each year across Wales who are affected by the housing emergency by offering free, confidential and independent advice. When necessary we constructively challenge on behalf of people to ensure they are properly assisted and to improve practice and learning.

We work with people who use our services as equals. We provide information, advice and support to help people identify the best options to prevent homelessness, to find and keep a home and to help them take control of their own lives.

We exist to defend the right to a safe home and fight the devastating impact the housing emergency has on people and society.

We do this with campaigns, advice and support – and we never give up.

We believe that home is everything.

# 1. Introduction and research background

This research is part of a broader project commissioned by Public Health Wales, which aims to understand the health needs of 'inclusion health groups' as well as identifying the relevant services available across Wales, and any gaps in service provision that may exist.

The specific groups identified by Public Health Wales as being 'inclusion health groups' are sex workers and men who have sex with men (MSM), people with substance misuse issues, those in contact with the criminal justice system, people who experience homelessness, asylum seekers and refugees, and Gypsy, Roma and Traveller groups.

This report is focused specifically on the health needs of the homeless population in Wales. We begin with the knowledge that Individuals who experience homelessness are at increased risk of communicable diseases due to multiple, intersecting factors. These include increased exposure to infectious diseases and comorbid conditions including substance misuse and mental health issues.

## Research aims

The objectives of this research are to:

- Identify the causes and mitigating factors that contribute to homelessness.
- Provide data on the numbers of people experiencing homelessness across Wales.
- Understand the health needs of the homeless population in Wales.
- Consider the impact of related policy on people experiencing homelessness in Wales.
- Identify and map existing service provision for people experiencing homelessness in Wales.
- Identify gaps within the existing service provision.

We conclude by providing recommendations on areas which require further work, or opportunities for Public Health Wales to work more closely with the sector.

## **2. Methodology**

The research which informed this report was undertaken between June and September of 2023 and has been conducted by a small team of officers from Shelter Cymru's policy and campaigns team. Our methodology for this research was as follows:

### **A literature review**

This provided context for the report and explored the theoretical, policy and research background around Welsh homelessness legislation and service provision across Wales.

It also considered the impact certain health determinants, as well as the current social and economic climate, has had on homelessness within Wales.

### **Support service organisation search**

A key element of the brief for this research was to map existing support service provision for those experiencing homelessness in Wales.

Our approach to this was to conduct an extensive internet search making use of portals such as the Dewis<sup>1</sup> website and social media searches. Where further detail on the scope and delivery of the service was required we made contact with the services directly.

### **Practitioner Review**

Shelter Cymru has a team of Housing Law Caseworkers who provide a variety of support and advice to people experiencing, or at risk of homelessness across the whole of Wales. They are allocated to specific geographical areas and have developed strong working relationships with existing support services.

We have called upon their extensive local knowledge to review and contribute to the support service directory.

### **Evidence from our case work**

Last year, we helped 17,953 people in housing need – including 5,725 dependent children – through our advice and support services. We regularly draw upon our casework to provide evidence for our research and to inform our campaign work. In the case of this research we have been able to reflect upon what people have told us about the experience of being homeless and accessing support services.

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<sup>1</sup> <https://www.dewis.wales/>

### 3. Our homeless population

The purpose of this section is provide detail on the scale and characteristics of the homeless population in Wales, together with the causes and mitigating factors that can contribute to homelessness occurring. in particular We also consider their likely health and support needs.

#### Definitions of homelessness

It feels right to firstly begin by providing some definition on what we mean by the terms "homelessness" and the "homeless"

Homelessness means not having a home. A home is a place that provides security, and links to a community and support network. It needs to be decent and affordable. Under the law, even if someone has a roof over their head they can still be homeless. This is because they may not have the right to stay where they live or their home may be unsuitable to live in.

In Wales, the Housing Wales Act 2014<sup>2</sup> defines when a person is homeless or threatened with homelessness. A person is homeless if they, together with anyone who normally resides with them:

- Have no accommodation in the United Kingdom or elsewhere, which they have a legal right to occupy.
- Have accommodation but cannot secure entry to it, or the accommodation is a moveable structure, vehicle or vessel adapted for human habitation (such as a caravan or houseboat) and there is no place where it can be placed in order to provide accommodation.

The 2014 Act also specifically provides that it is not reasonable for a person to occupy accommodation if it is probable that this will lead to the person, or a member of the person's household, being subjected to abuse. Abuse is further defined to include physical violence, threatening or intimidating behaviour and any other form of abuse which, directly or indirectly, may give rise to the risk of harm.

A member of the person's household includes someone who normally resides with them as a member of his or her family, or any other person who might reasonably be expected to reside with them.

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<sup>2</sup> <https://www.legislation.gov.uk/anaw/2014/7/contents/enacted>

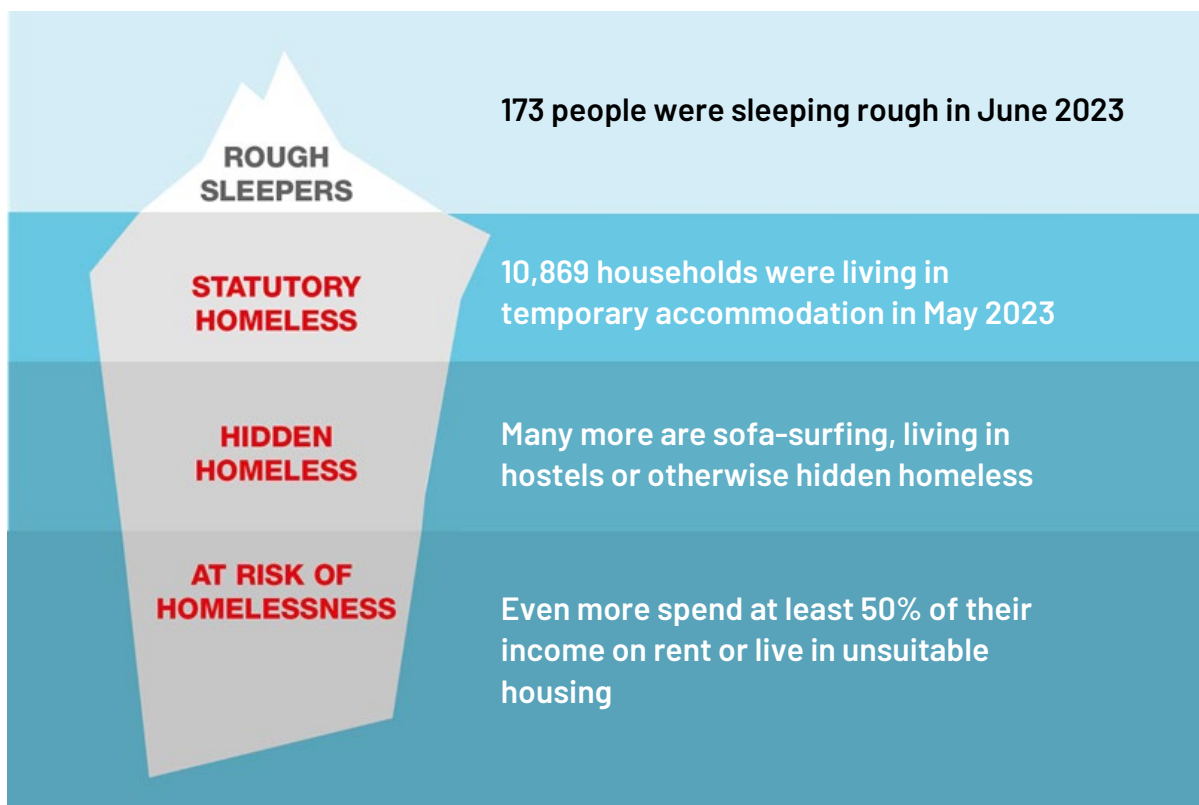


Figure 1: The homelessness iceberg in Wales – adapted from Shelter <sup>3</sup>

As the homelessness iceberg above illustrates, there are many housing situations which could be experienced by someone who is homeless.

**Rough sleeping** is the most visible form of homelessness and most likely the image that will come to mind when people picture someone who is experiencing homelessness.

For statistical purposes<sup>4</sup>, the Welsh Government closely follows the definition of rough sleeping used by the UK Government to include:

- People sleeping, about to bed down (sitting on/in or standing next to their bedding), actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments);
- People bedded down in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations of ‘bashes’).

Street homelessness is a much wider view on rough sleeping, taking into account the street lifestyles of some people who may not actually sleep on the streets. Street homeless people are those who routinely find themselves on the streets during the day with nowhere to go at night.

<sup>3</sup> <https://blog.shelter.org.uk/2016/03/the-true-scale-of-homelessness/>

<sup>4</sup> <https://www.gov.wales/sites/default/files/statistics-and-research/2020-01/rough-sleepers-2019-form.pdf>

Some will end up sleeping outside, or in a derelict or other building not designed for human habitation, perhaps for long periods. Others will sleep at a friend's for a very short time, or stay in a hostel, night-shelter or squat, or spend nights in prison or hospital.

People who find themselves sleeping rough may have limited access to basic hygiene, a safe space to store their belongings and limited access to means of communication i.e. telephone or internet.

The **statutory homeless** are those households or individuals who have presented to a local authority for assistance, many of which may have been accommodated in **temporary accommodation**. This may be a bedroom in a hotel or B&B or self-contained accommodation. Whilst their right to be accommodated will, normally, remain in place until they have secured permanent accommodation, we are aware from our casework that their accommodation may be changed on a regular or even nightly basis as local authorities struggle to meet current demand. Since the Covid pandemic, long stays in temporary accommodation or have become increasingly commonplace and we are regularly working with households who have been in this housing situation for 2 years or more.

People will have a vastly different experience of being in temporary accommodation depending on its nature and the facilities and support provided. Self-contained accommodation with full cooking and washing facilities is what people we help prefer. In our casework, we have seen cases that cause us great concern, both in terms of the quality of accommodation provided and its suitability for the needs of that particular household. We have seen evidence of appalling, unsanitary living conditions; heard from pensioners about the practical struggles of having just a kettle to prepare meals with; listened to families with young children telling us how unsafe they feel sharing facilities with strangers; and seen the anguish faced by people accommodated miles away from family and other support networks. Unsuitable temporary accommodation placements remains the one of the highest reasons for the homelessness reviews we support people to carry out and can have a detrimental effect on anyone with an ongoing health issue, such as people undergoing cancer treatment, people with mobility issues or people who have had a need regular treatment.

Many more households who may have asked for help from the local authority may be considered to be in a **hidden homeless** situation. They may be sleeping on a friend's sofa, living in a hostel or some other temporary arrangement which provides a bed for tonight but not a long term housing solution.

In 2022, 1 in 4 people in Wales fear they will become homeless within a year<sup>5</sup>, equating to over 775,000 individuals. The scale of people **at risk of homelessness** is significant and only set to get worse in the current cost of living crisis – to be discussed further in this section.

### **The causes of homelessness**

There are numerous reasons why a person can become homeless. Shelter Cymru<sup>6</sup> defines the two main reasons for homelessness as:

- Problems in the person's own life – such as physical or mental health conditions, relationship breakdown, or drug and alcohol misuse;
- Problems in the system – such as the rising cost of housing, the poverty trap, and welfare benefit cuts brought about by the Government.

People experiencing homelessness may also be dealing with a number of other issues which have contributed to, or exacerbated their circumstances. These can include:

- Sex working
- Victims of domestic violence
- Offending history/prison leavers
- Migrant workers, refugees & asylum seekers/NRPF
- Financial/legal issues
- Eviction
- Cuckooing
- PTSD
- Victims of modern slavery

People experiencing homelessness are likely to have experienced trauma that has impacted them throughout their lives and contributed to their situation. There is a clear link between adverse childhood experiences (ACES) and the potential to experience homelessness later in life.

### **The scale of homelessness in Wales**

Data is collected and published by Welsh Government to monitor the scale of homelessness in Wales, the number of individuals experiencing homelessness and being supported by local

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<sup>5</sup> <https://www.walesonline.co.uk/special-features/1-4-people-wales-fear-25747405>

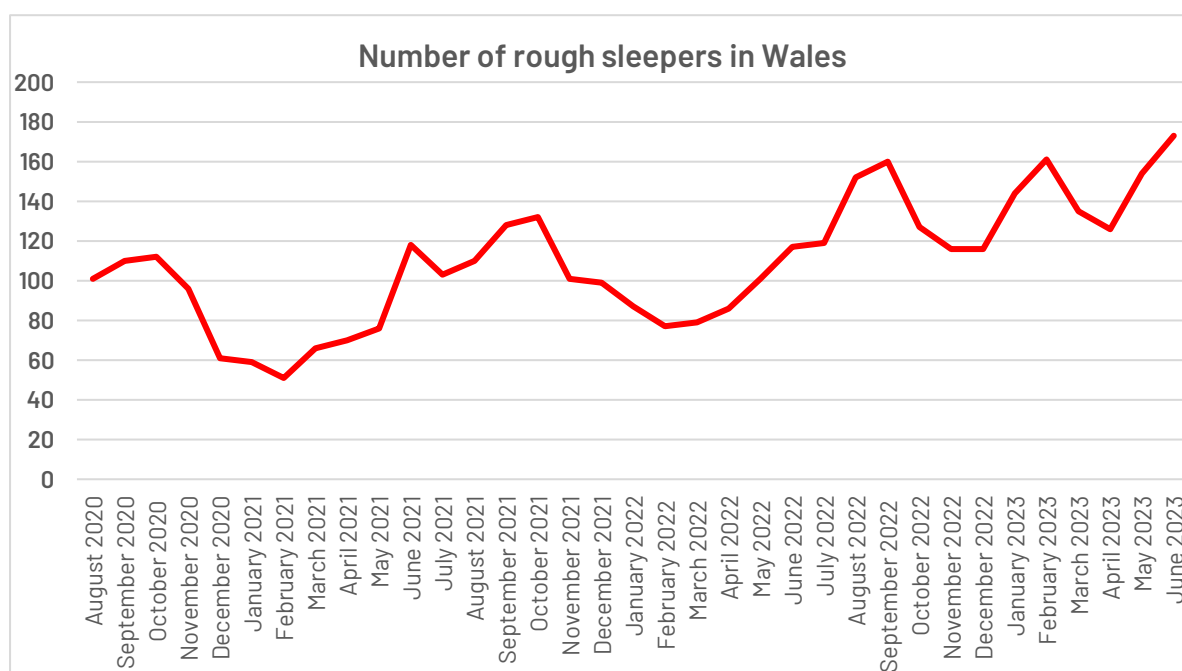
<sup>6</sup> <https://sheltercymru.org.uk/>



authorities into temporary accommodation or suitable long-term accommodation. We have drawn upon this data to provide some context to the scale of homelessness and current trends.

### Rough sleeping

As at 31 June 2023, there were an estimated 173 individuals sleeping rough throughout Wales. This is 19 more than the 154 individuals sleeping rough at 30 May 2023 and 56 more than 31 June 2022. The number has generally been on the increase since its lowest point of 51 at the height of the Covid pandemic in February 2021. This decrease being due to the “no-one left out” approach taken at the time.



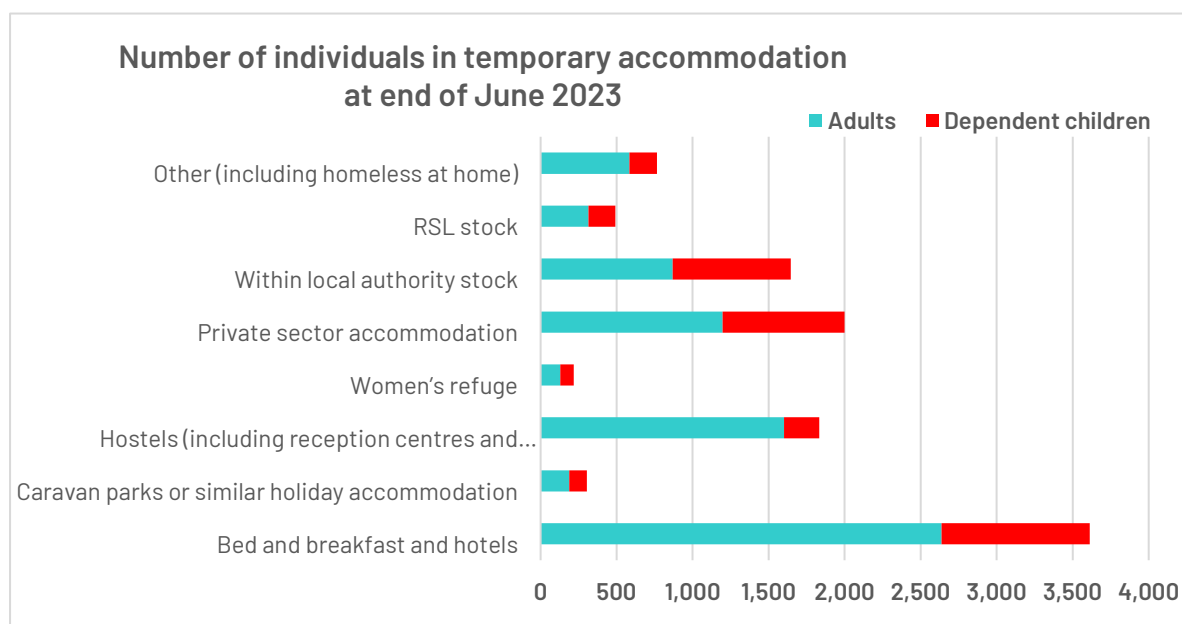
Source: Welsh Government <sup>7</sup>

As at 31 June 2023, Cardiff (34), Newport (29), Pembrokeshire (27), Swansea (16), Gwynedd (13), and Ceredigion (13) were the local authorities reporting the highest numbers of individuals sleeping rough. All other local authorities reported 9, or fewer, individuals sleeping rough, with five local authorities reporting zero.

### Temporary accommodation

<sup>7</sup> <https://www.gov.wales/homelessness-accommodation-provision-and-rough-sleeping-june-2023>

The number of people in temporary accommodation reached a record high of 10,906 in May 2023, with 3,348 of these being dependent children. This decreased slightly to 10,869 in June 2023, however the May record compared to 6,383 two years previously (May 2021) a 71% increase.



Source: Welsh Government <sup>8</sup>

Information provided on the type of accommodation being used reveals that at 33% the highest proportion of individuals living in temporary accommodation at the end of June 2023 were in a bed and breakfast or hotel (3,612). This was then followed by the private sector accommodation (18%), hostels (17%) and properties within the local authority's housing stock (15%). Unfortunately this data is not available at a local authority level.

#### Local authority service demand

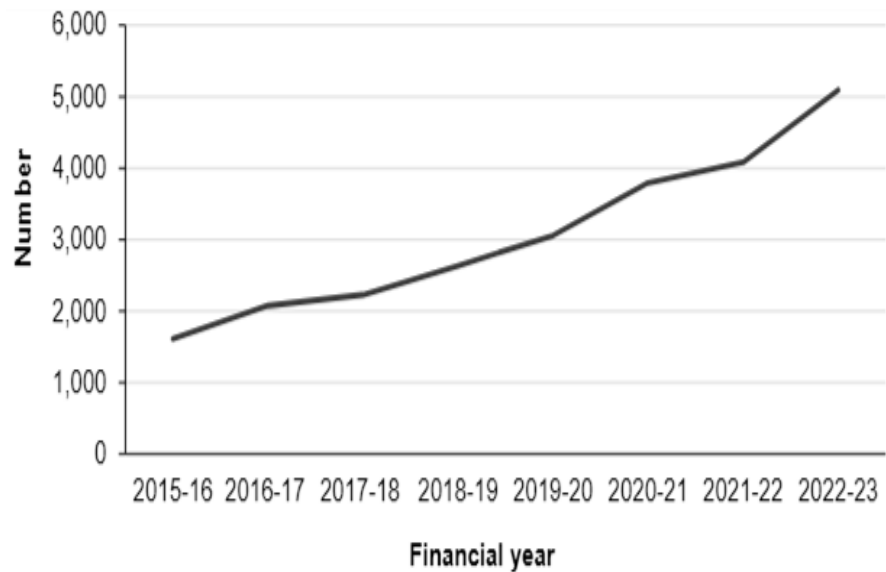
During 2022-23 5,094 households were accepted by local authorities with a full duty to secure accommodation. This figure increased 25% from 2021-22 (4086) and 34% from 2020-21 (3795).

Increased demand is consistent across all local authority areas. Although data is published at a local authority level there are known reporting inconsistencies.

<sup>8</sup> <https://www.gov.wales/homelessness-accommodation-provision-and-rough-sleeping-june-2023>

## Homeless households owed a full duty to accommodate

Source: Welsh Government<sup>9</sup>



### The influence of the wider housing system

The growth in the numbers of people rough sleeping and in temporary accommodation are indicative of the rising tide of homelessness more generally, and cause immense pressure on those individuals and on public sector services. Homelessness needs to be considered in the context of what is widely acknowledged to be a housing emergency in Wales, and in particular the difficulties being faced by households looking to secure affordable accommodation.

#### A lack of social housing

Across Wales, around 90,000 households are currently waiting for a social home with research by Shelter Cymru and the BBC<sup>10</sup> revealing that this figure is 40% higher than it was in 2022. Based on the significant increases over the last four years, and in the context of a cost of living and housing crisis, we would expect to see these figures rising.

The Welsh government has increased its spending on social housing for rent and committed to a target of 20,000 new social homes in this term of the Senedd. The Minister for Climate Change, who has housing in her portfolio, has admitted the target is unlikely to be met. In addition to the rising cost of constructions, supply chain challenges and skills shortages, social landlords also frequently cited planning delays.

#### Living in the private rented sector

<sup>9</sup> <https://www.gov.wales/homelessness-april-2022-march-2023>

<sup>10</sup> <https://www.bbc.co.uk/news/uk-wales-63373590>

The private rented sector has grown to provide homes for households who cannot find a social home or are not in a position to buy their own home. Most households are seeking a long term, secure home in their local community. Shelter Cymru regularly hear reference to the private rented sector as the tenure of last resort for those unable to afford home ownership, due to rising house prices, and for households who cannot access social housing .

Wales has seen significant rent increases<sup>11</sup> of up 10% or 11% in hotspots such as Merthyr, Rhondda Cynon Taff, Cardiff, Newport, Vale of Glamorgan and Conwy. We've seen landlords deciding to raise the rent by £200 a month in line with the increase in their mortgage payments<sup>12</sup> and have also heard of cases where tenancies have been brought to an end by a landlord so that they are able to significantly increase the rent charged to the new tenant.

The search for a new home becomes even harder when looking to find accommodation at Local Housing Allowance rates, the rates used to pay housing related benefits. Research<sup>13</sup> by the Bevan Foundation confirmed something which we have all known but feared – the scarcity of affordable accommodation options in the private rented sector for low income families. Data collected from 2,638 rental adverts across Wales in February 2023, found that, in Wales, only 32 properties advertised were available at or below LHA rates, equating to just 1.2% of the market. 16 local authorities did not have a single property available at LHA rates. LHA levels have not been increased since April 2020.

Giving advice to private sector tenants accounts for a significant proportion of Shelter Cymru's case work. During the first six months of 2023 alone our housing advice service assisted 2,362 households living in the private rented sector, accounting for 52% of our total caseload. Of these cases, 243 (10%) had issues regarding rent levels, 242 (10%) had rent arrears and 700 (30%) were facing possession proceedings. Among our casework we have seen extreme examples of rent rises of 100% and higher.

According to the Bevan Foundation's Snapshot of Poverty in summer 2023<sup>14</sup>, 48% of Welsh PRS tenants are cutting down on food or skipping meals. We need greater awareness of the cumulative impact of the cost of living crisis on household budgets and the effect on people's ability to keep a roof over their heads.

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<sup>11</sup> <https://www.bbc.co.uk/news/business-65103937>

<sup>12</sup> <https://www.bbc.co.uk/news/uk-wales-65474569>

<sup>13</sup> <https://www.bevanfoundation.org/wp-content/uploads/2023/03/Wales-Housing-Crisis-Winter-2023.pdf>

<sup>14</sup> <https://www.bevanfoundation.org/wp-content/uploads/2023/08/Snapshot-of-poverty-in-summer-2023.pdf>

## The affordability challenges of home ownership

Whilst many first time buyers and low income households struggle to imagine that they will ever own their own home, existing home owners are also facing affordability challenges. The Bank of England<sup>15</sup> has predicted<sup>1</sup> that about four million UK households will face higher mortgage payments during 2023 with the typical payment up by £250 - the average monthly mortgage bill going up from £750 to £1,000. This is expected to cause severe financial difficulty for 220,000 households in the UK.

## **The health and support needs of our homeless population**

*"Where you live obviously contributes to your general, your mental health, your physical health, and anything that goes wrong with your housing circumstances has a direct correlation to how you will survive that day, tomorrow."*

This quote is taken from the 2023 Public Health Wales briefing Homes for health and well-being<sup>16</sup>. One of the key messages in the briefing was that housing and health are strongly linked and that having a stable, warm, good quality place to live is a key building block for a healthy life. It reported that poor quality housing in Wales costs the NHS over £95m per year in first year treatment costs alone.

Stark statistics provided by Crisis<sup>17</sup> about the health of our homeless population include:

- The average age of death for people experiencing homelessness is 46 years old for men and 42 years old for women.
- People sleeping on the street are almost 17 times more likely to have been victims of violence. More than one in three people sleeping rough have been deliberately hit or kicked or experienced some other form of violence whilst homeless.
- Homeless people are over nine times more likely to take their own life than the general population.

The 2017 Local Government report, The Impact of Homelessness on Health<sup>18</sup> was written as a guide for local authorities in England. It stated that 41% of people who had experienced

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<sup>15</sup> <https://www.bankofengland.co.uk/financial-stability-report/2022/december-2022>

<sup>16</sup> [https://phwwhocc.co.uk/wp-content/uploads/2023/06/PHW-Health-and-housing-summary-briefing\\_ENGLISH.pdf](https://phwwhocc.co.uk/wp-content/uploads/2023/06/PHW-Health-and-housing-summary-briefing_ENGLISH.pdf)

<sup>17</sup> [https://www.crisis.org.uk/about-us/wales/?gclid=CjwKCAjw4P6oBhBsEiwAKYVky48JTmQIVsdY7YpeGw9BGCBD7iBuKfRWPWW3k8jR5dnM-Wn8JuwpBoC5yoQAvD\\_BwE](https://www.crisis.org.uk/about-us/wales/?gclid=CjwKCAjw4P6oBhBsEiwAKYVky48JTmQIVsdY7YpeGw9BGCBD7iBuKfRWPWW3k8jR5dnM-Wn8JuwpBoC5yoQAvD_BwE)

<sup>18</sup> [https://www.local.gov.uk/sites/default/files/documents/22.7%20HEALTH%20AND%20HOMELESSNESS\\_v08\\_WEB\\_0.PDF](https://www.local.gov.uk/sites/default/files/documents/22.7%20HEALTH%20AND%20HOMELESSNESS_v08_WEB_0.PDF)

homelessness reported a long term physical health problem, and 45% had a diagnosed mental health problem, compared with 28% and 25% respectively, in the general population. The last estimate (2010) of the healthcare cost associated with this population in England was £86 million per year, though this is likely to be much higher now due to inflation and the increased use of places like hotels and bed and breakfasts as ongoing temporary accommodation.

The following breakdown of health and population characteristics affecting people who are homeless and the related statistics are taken from The Impact of Homelessness on Health report.

### Mental Health

Mental ill health can be both a cause and a consequence of homelessness, with strong correlations between:

- financial problems and mental health
- housing insecurity and anxiety, stress, loss of confidence and worry about the future
- overcrowding and mental health, particularly for children and young people
- stress, anxiety, depression and other mental health problems and poor housing
- self-medicating with alcohol and drugs.

For people who experience mental health problems safe, secure and affordable housing is particularly important. Common mental health problems are over twice as high among people who are homeless compared with the general population, and psychosis is up to 15 times as high.

### Substance misuse problems

Homelessness can be caused or exacerbated by substance misuse, for example:

- early experiences of unstable housing circumstances are associated with drug use amongst young people
- family relationships are often put under great strain when people are addicted to either drugs or alcohol, leading to the loss of accommodation
- homelessness can be a route into addictions, either for people on the streets, or for people staying in supported accommodation, hostels or bed and breakfasts where others are using drugs or alcohol
- those who have addictions may not be able to keep accommodation because of money spent on drugs or alcohol, or because of their behaviour
- treatment providers may struggle to continue to engage with their client

The likelihood of excess mortality is higher, particularly amongst drug users who are considered to experience 'persistent homelessness'. Dual needs (mental health and substance misuse) are common amongst homeless people, particularly rough sleepers.

Substance misuse presents a challenge to responding to homelessness, and can perpetuate homelessness. For example, it may be the top priority in an individual's life, affecting the extent to which they are concerned with where they live and/or their access to housing.

### People experiencing violence or abuse

People experiencing threatening behaviour, abuse or violence often leave their home to escape the situation. Whilst both men and women can perpetrate and experience domestic violence and abuse, it is more often inflicted on women by men; particularly where it is severe and repeated violence, or sexual assault. Populations at increased risk of domestic violence are also more likely to become homeless. These include someone who:

- is aged 16–24 (women) or 16–19 (men)
- has a long-term illness or disability or mental health problem
- is a woman who is separated, and the risk is higher around the time of separation
- is pregnant or has recently given birth
- is a gay or bisexual man or is transgender.

The impact of abuse on victims is considerable and in addition to a negative effect on mental and physical health, it can isolate people from their family, friends and community, and have a negative effect on work leading to possible loss of independent income. It is important to understand that domestic violence is significantly under-reported.

### Children

Children who are born or spend periods in temporary accommodation may find that this impacts their access to immunisations, and temporary accommodation is more closely associated with greater risks of infection or accidents.

Homeless children are more likely to experience stress and anxiety, resulting in depression and behavioural issues. Children who have been in temporary accommodation for more than a year are three times more likely to experience mental health issues such as anxiety and depression.

New research from Shelter<sup>19</sup> shows at least 271,000 people are recorded as homeless in England, including 123,000 children.

### Young People

Young people experiencing homelessness are extremely vulnerable, and face complex and compounding challenges. For this population group:

- homelessness is often a consequence of relationship breakdown
- they lack relationship and independent living skills, formal support and struggle to access services
- they are more likely to have experienced trauma, abuse and other adverse experiences
- there are high levels of self-reported mental health problems, self-harm, drug and alcohol use
- there is an increased risk of exploitation, abuse and trafficking, and involvement in gang and/or criminal activity
- they are at more risk of sexually transmitted infections (STIs) and unwanted pregnancies and they can come under pressure to exchange sex for food, shelter, drugs and money.

Young people leaving care, young people who have run away, BME young people, LGBT young people and young people with experience of the criminal justice system, young refugees and asylum seekers, and young people from rural areas are at greater risk of homelessness.

A 2014 study for Crisis<sup>20</sup> involving a survey of 480 single homeless adults across the UK. The study found that nearly 50% of single homeless people first became homeless before the age of 21. Researchers at Cardiff University have recently been revisiting this data and found that the group of single homeless adults with the most adverse life experiences (e.g. substance misuse, mental ill-health, imprisonment) were particularly likely to have first experienced homelessness as a young person, nearly all had been excluded from school, and three quarters had been in local authority care.

*"It is unambiguous that most homeless adults of today were yesterday's young people at risk."*<sup>21</sup>

Dr. Peter Mackie, Cardiff University and Vice Chair of End Youth Homelessness Cymru

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[https://england.shelter.org.uk/media/press\\_release/at\\_least\\_271000\\_people\\_are\\_homeless\\_in\\_england\\_today](https://england.shelter.org.uk/media/press_release/at_least_271000_people_are_homeless_in_england_today)

<sup>20</sup> [https://www.crisis.org.uk/media/20608/crisis\\_nations\\_apart\\_2014.pdf](https://www.crisis.org.uk/media/20608/crisis_nations_apart_2014.pdf)

<sup>21</sup> <https://www.llamau.org.uk/news/we-cant-end-homelessness-without-an-end-to-youth-homelessness>



## Difficulties accessing health services

It is often reported that GP surgeries won't allow people to register if they do not have a fixed address, despite the fact that it is not a legal requirement to have a fixed address in order to become a patient. In many cases, people accessing frontline support services will use hostel addresses in order to register, but due to the temporary nature of these placements, they often move to alternative accommodation that means having to register with another surgery due to being 'out of area'. This can cause a great deal of stress and anxiety as well as disrupted care, particularly in relation to accessing regularly prescribed medication or ongoing treatment, or if someone has developed a trusting relationship with medical staff at their local practice.

BMJ Open<sup>22</sup> conducted research in England into the barriers and facilitators to accessing health and social care services for people living in homeless hostels between April and October of 2019. Hostel staff who were interviewed for the project described struggling to get support from a range of external services for the residents. Hostels that did not have regular GP in-reach described considerable barriers in accessing primary care, such as difficulty getting residents registered, inflexibility and lack of appointments.

Staff described how some residents struggled to fit in with societal norms and that this hindered their ability to access the mainstream services they required. Staff also said that they struggled to get adult social services to respond to referrals and to adequately undertake and/or act on social care assessments. Referrals for social care assessments were often made in order to obtain help for people who were self-neglecting and needing support with tasks like washing and dressing. Getting this support was said to be especially difficult for people with addictions.

A report by Healthwatch<sup>23</sup> into the key barriers to accessing healthcare among people who were homeless found that people wanted holistic support, stating they did not feel their circumstances were understood by medical professionals, so they didn't get the full level of

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<sup>22</sup> <https://bmjopen.bmj.com/content/11/10/e053185>

<sup>23</sup> [https://www.healthwatch.co.uk/news/2018-12-21/three-common-issues-homeless-people-face-when-trying-access-care#:~:text=Many%20people%20can't%20get,or%20stick%20to%20health%20advice.https://sheltercymru.org.uk/policy\\_and\\_research/reframing-anti-social-behaviour-a-review-of-homelessness-prevention-good-practice-in-wales/](https://www.healthwatch.co.uk/news/2018-12-21/three-common-issues-homeless-people-face-when-trying-access-care#:~:text=Many%20people%20can't%20get,or%20stick%20to%20health%20advice.https://sheltercymru.org.uk/policy_and_research/reframing-anti-social-behaviour-a-review-of-homelessness-prevention-good-practice-in-wales/)

support they needed. People wanted support around their health, housing and employment all in one place.

We know that homelessness or housing status is not routinely recorded in health services in Wales, with the exception of substance misuse services. There is a reliance upon charitable organisations and locally organised outreach to be a 'one stop shop' provision of support, in some areas. While the value of these services cannot be underestimated, they are limited in what they can provide and are they are generally only able to signpost to health services. However, often people experiencing homelessness will be reliant on these types of support networks and have developed trusting relationships with their staff and volunteers. More direct link up with these kind of organisations would mean health services could be taken directly to people within their communities and provide timely, holistic support based on individual need.

## 4. Policy context

The following section considers the impact of related policy on people experiencing homelessness in Wales. It first provides detail on the legislative framework that governs statutory homelessness services before exploring Welsh Government strategic thinking and potential future policy direction.

### Legislative framework

Local authorities' duties towards homeless people can be traced back to the Old Poor Law which was consolidated by the Elizabethan Poor Law Act 1601. Under this Act the parish was obliged to accommodate certain paupers who could not support themselves. The National Assistance Act 1948 was intended to herald the dawn of a more humane approach to the problems of vagrancy and homelessness. The 1948 Act placed a limited duty on local authorities to provide both residential and temporary accommodation.

The foundation of today's framework were set by the Housing (Homeless Persons) Act 1977 which placed a duty on local housing authorities to secure permanent accommodation for unintentionally homeless people who are in priority need, as defined in the Act.

Following the devolution, the Welsh Government's Housing (Wales) Act 2014<sup>24</sup> sets out the current requirements on local authorities to assist people who are homeless and provides a strong emphasis on preventative action. Part 2 requires that local authorities assist those homeless applicants who are eligible for assistance (broadly, those whose immigration status is not restricted) by:

- Assessing to determine whether they are homeless or threatened with homelessness
- Drafting a personal housing plan or similar to include reasonable steps to be taken by the local authority and the applicant to prevent homelessness or help to secure accommodation (with a 56-day time limit)
- Providing suitable temporary accommodation during the 56 days to an applicant in priority need (specified categories of people)
- If no suitable accommodation has been found at the end of the 56 days, securing suitable accommodation to those in priority need and not intentionally homeless.

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<sup>24</sup> <https://www.legislation.gov.uk/anaw/2014/7/contents/enacted>

- Local authorities may refer an applicant who has no local connection to another local authority, subject to some exceptions
- In addition, local authorities can use their discretion regarding whether a household has a local connection

Households should be considered to be in priority need if they are:

- Pregnant or responsible for dependent children
- Made homeless by flood, fire or other disaster
- A young person aged 16 or 17, or aged 18 to 20 and at risk of sexual or financial exploitation or having spent time in care
- Victims of domestic violence
- Armed forces personnel who have been homeless since leaving the forces
- Someone who is vulnerable as a result of time in prison
- Someone who is vulnerable for some other reason, e.g. old age or disability

Recent amendments to the legislation have added people who are street homeless or vulnerable due to a public health emergency into the priority need grouping.

Under Section 81 of the Housing (Wales) Act 2014, a person has a local connection with the district of a local housing authority if she or he has a connection with it because:

- they are, or were in the past, normally resident there, and that residence was of their own choice
- they are employed there or have family associations
- of other special circumstances

The Housing (Wales) Act 2014 also places a duty on housing authorities to have a strategy for preventing homelessness and ensuring that accommodation and support will be available for people - who are homeless or at risk of homelessness. Local authorities must take their strategy into account when discharging their functions.

### **Welsh Government's strategic thinking**

The 2019 Strategy for preventing and ending homelessness in Wales<sup>25</sup> sets the vision for *"homelessness to be a rarity and when it does occur, it is brief, the individual or household is supported back into accommodation quickly and sufficiently supported so that they do not fall back into homelessness; setting households up to succeed not to fail."* It is also clear that

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<sup>25</sup> <https://www.gov.wales/sites/default/files/publications/2019-10/homelessness-strategy.pdf>

*“homelessness cannot be prevented through housing alone”* and requires collaboration across the public sector.

The document provides a strategic direction to re-shape services around a rapid re-housing approach - shifting the focus of our policy, practice and resources towards long term housing led solutions, away from the provision of emergency, temporary and hostel services.

On 28 April 2020, the **no-one left out approach** saw the Minister for Housing and Local Government issue a statutory guidance note in relation to the homelessness legislation set out in the Housing (Wales) Act 2014, which expanded the definition of vulnerability to include Covid-19<sup>26</sup>.

Street homeless people were promptly accommodated in various facilities across Wales, including many of the hotels and B&Bs that were at that time unable to operate for tourists and were empty of their usual guests. The approach resulted in over 3600<sup>27</sup> people being brought into emergency accommodation by the end of April 2023<sup>28</sup>, therefore providing a much clearer picture of the scale of previously hidden homelessness in Wales<sup>29</sup>.

As the Minister later acknowledged,<sup>30</sup> *“the crisis created by the pandemic has provided us with a unique opportunity to accelerate actions and make radical changes to the systems and processes that prevent homelessness, focusing primarily on early preventative actions across public services and, in housing, making the transformational shift in approach towards rapid rehousing.”*

**Ending Homelessness in Wales** a high level action plan (2021-2026)<sup>31</sup> has subsequently sought to fundamentally reform homelessness services to focus on prevention and rapid rehousing. *“There has been a paradigm shift in Wales’ approach to addressing homelessness since the pandemic began. Existing concepts and established ways of working have been up-ended in a way that would have be unimaginable more than twenty months ago. It has been a difficult but*

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<sup>26</sup> [Post pandemic interim homelessness measures \[HTML\] | GOV.WALES](#)

<sup>27</sup> <https://www.gov.wales/homelessness-accommodation-provision-and-rough-sleeping>

<sup>28</sup> <https://www.gov.wales/homelessness-accommodation-provision-and-rough-sleeping-april-2023>

<sup>29</sup> <https://www.gov.wales/post-pandemic-interim-homelessness-measures-html>

<sup>30</sup> [https://www.gov.wales/sites/default/files/publications/2021-11/ending-homelessness-high-level-action-plan-2021-2026\\_0.pdf](https://www.gov.wales/sites/default/files/publications/2021-11/ending-homelessness-high-level-action-plan-2021-2026_0.pdf)

<sup>31</sup> [https://www.gov.wales/sites/default/files/publications/2021-11/ending-homelessness-high-level-action-plan-2021-2026\\_0.pdf](https://www.gov.wales/sites/default/files/publications/2021-11/ending-homelessness-high-level-action-plan-2021-2026_0.pdf)

*necessary change, allowing us to truly begin the transformation needed to achieve our long term goal of ending homelessness in Wales.” Julie James, Minister for Climate Change.*

Following the changes to support and accommodation provisions during the pandemic, focus has shifted to a reassessment of the systems and processes that prevent homelessness, specifically early preventative actions and joint multi-agency working across services, and a commitment to shift towards rapid rehousing. The approach set out in the Welsh Government’s action plan to end homelessness was informed by detailed work by a cross-sector Homelessness Action Group (HAG) which published three reports<sup>32</sup>, and delivery of the plan is being carried out by the various homelessness and housing support services across local authorities, RSLs and third sector organisations. In addition, a cross sector independent board, the Ending Homelessness National Advisory Board, advises the Minister and includes members drawn from the health sector.

The Welsh Government vision<sup>33</sup> of ending homelessness is that *“when it (homelessness) does occur, it is brief, the individual or household is supported back into accommodation quickly and sufficiently supported so that they do not fall back into homelessness, setting households up to succeed not to fail.”*

All local authorities have been required to produce **Rapid Rehousing Transition Plans**<sup>34</sup> to ensure that people spend as little time as possible in temporary accommodation and are able to access the right home in the right place for them. The intention is for everyone experiencing or at risk of homelessness to be helped to find a settled home as quickly as possible. It is recognised that each person will require different levels of support to maintain their tenancy and a small proportion will need higher intensity, multi-agency support, such as Housing First<sup>35</sup>. Following an internationally recognised ‘housing led’ approach, people’s access to accommodation is not dependent on a requirement to demonstrate progress or access specified services.

At present, the ongoing housing emergency and cost of living crisis, and particularly the rising numbers of people becoming homelessness means that local authorities struggle to find

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<sup>32</sup> <https://www.gov.wales/homelessness-action-group>

<sup>33</sup> [https://www.gov.wales/sites/default/files/publications/2021-11/ending-homelessness-high-level-action-plan-2021-2026\\_0.pdf](https://www.gov.wales/sites/default/files/publications/2021-11/ending-homelessness-high-level-action-plan-2021-2026_0.pdf)

<sup>34</sup> <https://www.gov.wales/rapid-rehousing-guidance-html>

<sup>35</sup> <https://www.cymorthcymru.org.uk/housing-first-stats-sep-2022/>

suitable temporary and settled accommodation options for the growing numbers needing their assistance.

It should be noted that pathways, protocols and services are in place across Wales to prevent homelessness at particular 'high risk' points: for example, on discharge from hospital (including mental health) and on release from prison. However, this often means a referral into homelessness services. It should be noted that there are a number of existing housing pathways which set out service expectations for specific groups within the homeless population. These include:

- **National housing pathway for ex-service personnel**<sup>36</sup> who will be resettling in Wales
- **Homelessness pathway for prisoners**<sup>37</sup> for meeting the needs of people leaving prison, or a secure estate, including children and young people.
- **Accommodation Pathway for 16 and 17 year olds**<sup>38</sup> who may be homeless

### **Future policy direction**

At the time of finalising this report, an **Expert Review Panel** established to consider how legal reform could end homelessness in Wales has published its recommendations<sup>39</sup>. The panel heard a clear message from frontline authority services that reform is needed to help shift the focus from firefighting the rising numbers of homelessness presentations to working more effectively to prevent homelessness upstream – sparing households the trauma of becoming homeless and helping to reduce the strain on overcrowded housing waiting lists. It recognised prevention cannot lie solely at the door of housing options services; it requires the support, expertise and collaboration of other public services such as health and social services.

The Review Panel's recommendations to simplify the homelessness assessment process – through the abolition or reframing of key components of the legislation such as priority need and intentionality – and establish a wider public sector homelessness duty are being taken forward by Welsh Government via a **white paper consultation**<sup>40</sup>. The white paper provides a vision of a future system where everyone faced with homelessness can access help.

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<sup>36</sup> <https://www.gov.wales/sites/default/files/publications/2019-10/national-housing-pathway-for-ex-service-personnel.pdf>

<sup>37</sup> [https://www.gov.wales/sites/default/files/publications/2019-03/homelessness-services-for-children-young-people-and-adults-in-the-secure-estate\\_0.pdf](https://www.gov.wales/sites/default/files/publications/2019-03/homelessness-services-for-children-young-people-and-adults-in-the-secure-estate_0.pdf)

<sup>38</sup> <https://www.gov.wales/sites/default/files/publications/2019-04/provision-of-accomodation-for-16-17-year-old-young-people-who-maybe-homeless.pdf>

<sup>39</sup> <https://www.crisis.org.uk/ending-homelessness/wales-expert-review-panel/>

<sup>40</sup> <https://www.gov.wales/ending-homelessness-white-paper>

This white paper swiftly follows a wider green paper discussion on fair rents and **securing a path towards adequate housing in Wales.**<sup>41</sup> The fair rents element responds to the affordability challenges outlined earlier in this report in respect of access to the private rented sector. Since 2019, Shelter Cymru, Tai Pawb and CIH Cymru have led the Back the Bill<sup>42</sup> campaign -- to incorporate the international human right to adequate housing into domestic law. The campaign has built the evidence base and demonstrated the investment to save case via an independent cost benefit analysis<sup>43</sup>.

Ultimately, the major challenge for future housing and homelessness policy is to establish an adequate supply of the homes that people can afford, of the size and type, and in the locations, where they are needed across Wales. And for some people, finding and keeping a home will require access to a range of statutory and third sector support services to enable them to find and keep a home – as discussed in the next section.

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<sup>41</sup> <https://www.gov.wales/written-statement-launch-green-paper-call-evidence-housing-adequacy-and-fair-rents>

<sup>42</sup> <https://www.taipawb.org/policy-influencing/backthebill/>

<sup>43</sup> [https://sheltercymru.org.uk/cy/policy\\_and\\_research/right-to-adequate-housing-report/](https://sheltercymru.org.uk/cy/policy_and_research/right-to-adequate-housing-report/)



## 5. Support Services

This section provides a narrative on the results of our service mapping work and detail on the nature of service provision across Wales and the organisations involved. We also provide some thoughts on potential challenges within existing service provision and opportunities for greater partnership working with public health.

### **The service directory**

The directory of services itself is presented as an appendix to this report due to its length. It provides service information at a local authority level, establishing whether they are statutory, commissioned, or a charity, and in some instances they will be a combination. Where possible we have detailed the referral process and the specific support being offered.

We have also sought to include all the available contact information, as well as an address. In cases where support is being provided to a specifically vulnerable group, this information was not always made available, so further contact may be required.

It should be noted that, due to the changing landscape of funding and service provision, the service directory is correct at a point in time. There will be changes to the information provided, particularly for commissioned services. The information is correct as of September 2023.

### **Types/Location of services**

There are a number of different levels of service provision for the homeless population in Wales and a wider range of organisations involved:

#### Local authority statutory services

To fulfil their legal duties to provide support and secure accommodation, each local authority has a primary contact service for people experiencing homelessness. This is usually referred to as 'Housing Options' or 'Housing Solutions.' A formal assessment process will consider the circumstances of each household and their eligibility for assistance, support and either temporary or settled accommodation.

#### Local Authority commissioned accommodation and support services

Each local authority has access to revenue funding from Welsh Government to provide housing related support to those households at threat of homelessness or experiencing homelessness. In some cases these services are provided in-house, but funding is commonly used to commission services from other third sector organisations, such as housing associations or support focused charities.

The primary funding stream for commissioned service is Housing Support Grant (HSG) <sup>44</sup> which was established in 2019 through the amalgamation of three existing funding streams. Community Housing Cymru and Cymorth Cymru estimate<sup>45</sup> that HSG helps 60,000 people each year to avoid homelessness, escape abuse and to continue to live their own homes.

The HSG is an early intervention grant programme to support activity, which prevents people from becoming homeless, stabilises their housing situation, or helps potentially homeless people to find and keep accommodation. The HSG does not fund the statutory duty on local authorities to prevent homelessness, instead HSG aims to fund services which augment, complement and support the statutory service to ensure that the overall offer authorities provide helps people into the right homes with the right support to succeed.

The purpose of the HSG is to prevent homelessness and support people to have the capability, independence, skills and confidence to access and/or maintain a stable and suitable home. Primarily it can be used to fund:

- Services that build the capacity and ability of individuals or households to maintain a home.
- Services that prevent homelessness or the need for an individual to live in an inappropriate institutional setting.
- Providing or enabling access to suitable housing for individuals or households.
- Services that mitigate the impact of homelessness on individuals or households
- Brokering access to other services for people in housing need.

Referral pathways to such services will normally be via the local authority as the primary funder.

#### Other services provision

Through our mapping we have also identified a number of other services which sit outside the statutory or commissioned framework. These include local outreach and drop-in services provided by voluntary, faith groups and community projects which are self-funded through donations and fundraising. Many will offering advice and more general, holistic support.

This is undoubtedly the area of the directory which is likely to be the least comprehensive as we were reliant on there being a presence on the internet which we have been able to pick up through our searches.

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<sup>44</sup> [https://www.gov.wales/sites/default/files/publications/2023-02/housing-support-grant-practice-guidance\\_0.pdf](https://www.gov.wales/sites/default/files/publications/2023-02/housing-support-grant-practice-guidance_0.pdf)

<sup>45</sup>

## **Geographical distribution**

Every local authority in Wales fulfils its duties by have a statutory homelessness service and we identified a range of LA commissioned and other service provision to support this.

Our mapping shows that there are a localised differences in the range and number of services being provided.

Our general observations on the geographical distribution of services are as follows:

- Although some local authorities are exploring shared or regional services across their wider duties, we found no evidence of approach being taken in regarding to statutory homelessness services and each had its own localised housing options or solutions service.
- We are aware that some accommodation and support services may be commissioned on a regional basis by a partnership of local authorities, however referral pathways operated at a local level.
- Some commissioned providers work for a number of local authorities and provide services across a broader regional area.
- Independently funded third sector services, including volunteer-based services, Outreach and drop in services are likely to be more locally focused than LA services. These services tend to be valued by clients, but provision is patchy across Wales and capacity is limited.

## **Challenges and opportunities**

From our mapping, we are able to provide the following observations on the challenges being faced by both service users and providers. We also consider the need for great partnership working with the health sector.

### Access to homelessness services

It can be difficult for people experiencing homelessness to get the help that they need, and the situation in Wales reflects this. This can be due to a variety of factors that are often complicated by the services they are trying to access. Typically recurrent issues are the lack of a stable address, suitable identification, or access to a mobile phone/credit to arrange and manage appointments.

Furthermore, the diversity of people impacted by homelessness is also a consideration. Household type (including couples and families), protected characteristics and the nature of

homelessness people are experiencing may all impact the type of services they may require and have implications for how they access those services.

Our research into services across Wales found that, increasingly, local authority services are stepping away from face to face appointments as a means to assess someone for a homelessness duty. This is likely to be in response to the managing ever increasing service demand and seeking to make services as efficient as possible.

However, many are using digital portals where people must register or complete an online form so that they can be assessed as homeless. In order to access these services, an individual requires access to the internet, and there is an assumption that they would be able to navigate and complete the required online forms without support. In many cases, the information on how to find and access these services is predominantly found online.

We are encouraged by evidence that more person-centred thinking is starting to be explored in some areas. The multi-agency approach is being adopted across Wales. For example, of a new partnership project being developed in Torfaen and funded by the local housing support grant. The service aims to offer housing advice and support alongside other support options via a local Hub. The service is designed to work with people in Torfaen who are over 16, homeless or at risk of homelessness. Anyone can access the Hub without needing a referral and it will be open as a drop-in for housing advice and support from Monday to Friday.

The aim of this new service is to support people with their housing needs while helping them to work with other relevant services. These could be health services, probation, substance misuse support, local community groups, or other appropriate options. They will also be working to build partnerships with other services in the area. Some of these other services could work closely with the Hub to make staff available, so that people using the Hub could more easily access a wider network of support.

#### Funding pressures and staffing issues

Through a freedom of information request we know that in 2020/21, the 18 local authorities who responded had spent in excess of £6.3 million net on temporary accommodation, up from £4.6 million the previous year. Whilst this information is a little out of date now, it is fair to assume that budget pressures will have only increased since this time.

HSG funded services are under extreme pressure as they did not receive an uplift in the Welsh Government 2023/24 budget; the sector has highlighted the workforce challenges, the risk of 'system failure' and consequent impacts on homelessness prevention.<sup>46</sup>

The widely shared future policy ambition is to channel resources into homelessness prevention and Rapid Rehousing. Given the pressures on public finances, opportunities to invest to save across portfolios merit fresh consideration.

### Partnership working with health

In 2023 Shelter Cymru published the report, **Reframing Anti-Social Behaviour**<sup>47</sup>, focusing on homelessness prevention in Wales. As part of our stakeholder interviews, we spoke with social landlords, many of whom were supporting tenants who had previously been through the homelessness system and had ongoing physical and mental health needs.

Stakeholders who took part expressed ongoing concerns around limited and untimely access to health services, particularly mental health care. For some, the potential to meet a person's support needs was deemed unrealistic, though it was felt that a lot of the issues being presented could be prevented sooner if support had been there at the point people were ready to engage with it. It was felt that the NHS and statutory mental health services could have greater agency in relation to housing, and more co-partnership working in relation to housing support. These findings were consistent with the views expressed by social landlords in an early report on ending homelessness from social housing<sup>48</sup>.

The Shelter Cymru research report **Trapped on the Streets**<sup>49</sup> examined the experiences of rough sleepers across Wales. There was evidence of a lack of effective partnership working with many participants having contact with numerous agencies but still having unmet support needs. A large majority of people were able to point to interventions that could have prevented their homelessness. Most people felt that they may have needed multiple interventions but that either the service was inadequate or inaccessible. Participants put particular focus on the need for

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<sup>46</sup> <https://www.cymorthcymru.org.uk/cost-of-living-crisis-pushing-critical-frontline-workers-closer-to-the-edge/>

<sup>47</sup> [https://sheltercymru.org.uk/policy\\_and\\_research/reframing-anti-social-behaviour-a-review-of-homelessness-prevention-good-practice-in-wales/](https://sheltercymru.org.uk/policy_and_research/reframing-anti-social-behaviour-a-review-of-homelessness-prevention-good-practice-in-wales/)

<sup>48</sup> [https://sheltercymru.org.uk/policy\\_and\\_research/end-homelessness-from-social-housing/](https://sheltercymru.org.uk/policy_and_research/end-homelessness-from-social-housing/)

<sup>49</sup> <https://sheltercymru.org.uk/wp-content/uploads/2023/02/Trapped-on-the-Streets-Full-Report.pdf>

support that addressed specific needs such as mental health, addictions (largely substance misuse and gambling) and domestic abuse. In most cases there were multiple needs so it is likely that numerous agencies would need to be involved, increasing the significance of strong partnership working.

The success of services like the **Cardiff Homeless Multi-Disciplinary Team (MDT)**<sup>50</sup> have shown that there is a clear benefit in aggregating services into a single access point, with the provision of an assertive, targeted and rapid response for vulnerable people who have historically found it difficult to engage with traditional services. Working with a range of partners, the Multi-disciplinary Team has been set up to target those people caught in the 'revolving door' of homelessness and prolonged periods of rough sleeping. The Team includes:

- dedicated substance misuse and mental health workers,
- a nurse,
- counselling service,
- homeless advocate, and
- peer mentors.

Based in the Housing Options Service, the team provide immediate access to assessment, advice, support and harm reduction interventions to rough sleepers.

Only Cardiff and Swansea/Neath Port Talbot currently have this kind of service. The need to work to a multi-agency, holistic approach is not one that should be defined geographically, but rather by the overall needs of the people needing support.

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<sup>50</sup> <https://www.cardiff.gov.uk/ENG/resident/Housing/rough-sleeping/what-we-are-doing/Pages/default.aspx#:~:text=The%20Multi%2Ddisciplinary%20Team%E2%80%8B&text=Based%20in%20the%20Housing%20Options,reduction%20interventions%20to%20rough%20sleepers.>

## **6. Conclusion and recommendations**

This final section of the report provides concluding remarks reflecting back to the research objectives. The section will conclude with a summary of suggested actions based on the evidence reviewed for this research.

### **Our observations**

The emergency homelessness response was put in place in Wales during the pandemic was fuelled by the recognition of the health vulnerabilities of our homeless population due to the accommodation settings which they find themselves in.

Our rough sleepers undoubtedly experience the worse living conditions and poorest health characteristics. However, they are only the visible tip of an ever growing homelessness iceberg and we have highlighted the impact of living in temporary accommodation for long periods of time on adults and children's health and wellbeing.

The Welsh Government has committed to reform homelessness provision, placing their focus on prevention and rapid rehousing; however, the numbers of people needing access to temporary accommodation and homelessness services is rising. The cost of housing and cost of living crises, instability in the housing market and the lack of social homes are all having an impact on the numbers of people who are homeless in Wales.

This report maps housing and homelessness related services across Wales. It is not exhaustive but significantly addresses the dearth of centrally collated information we found at a national level, and typically at a local level. Several statutory services have become digital or remote, removing the opportunity for vital in person contact at the point of crisis. This has the potential to increase isolation amongst people who already find themselves vulnerable and at risk. Outreach and drop in services are not widespread and often provided by charities or community initiatives that, by their very nature, are limited in capacity.

This report does not seek to map the health needs of the homeless population, and this is a potentially difficult task. This is due to a variety of factors: the co-occurring health and support needs that are common amongst people experiencing homelessness (regardless of geographical location in Wales), the widespread stigma attached to being homeless, the different cohorts of adults and children experiencing homelessness, barriers to accessing health services and a reluctance to seek support that can be created by this stigma.

People's housing status impacts their health, and vice versa. However, this is not typically reflected in national and local partnerships and the available support provision.

The pandemic showed us what can be achieved if service boundaries and constraints are removed and true collaboration takes place. As we struggle to meet greater need within tight resources, we have the opportunity to break down silos and traditional ways of working to prevent homelessness and meet the needs of people who experience homelessness.

## **Recommendations**

Based on our findings, we would like to make the following recommendations to Public Health Wales for future work:

- Longer term research to be commissioned to understand the health needs of people who are homeless, health impacts of homelessness and the ability to access health services, across the whole range of accommodation settings in which adults and children may find themselves living.
- Consideration is given to the ongoing development of the formative directory of services included in this report, and its potential benefits to promoting joined up health and homelessness working.
- Exploration of opportunities for housing and health services to collaborate in terms of professional training and development to establish a common understanding of homelessness and the diversity of who is impacted by homelessness in Wales; to reduce barriers/silos and explore opportunities for joint service provision; and increase information sharing, health promotion and signposting.
- Mapping of existing provision of specific health-related support for homeless households across Wales, and consideration of enhanced provision particularly for those who are rough sleeping or living in unsuitable/unsettled temporary accommodation. Mapping to include the protocols used when discharge from hospital/care might lead into homelessness.
- Exploration of 'invest to save' opportunities for health in relation to housing and homelessness.



