Single homelessness

An overview of research in Britain

Suzanne Fitzpatrick, Peter Kemp and Susanne Klinker

Suzanne Fitzpatrick is Lecturer in Housing and Social Policy, **Peter Kemp** is Professor of Housing and Social Policy and **Susanne Klinker** is a Researcher at the Department of Urban Studies, University of Glasgow.

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Introduction

Single homelessness is most visible in London and other major cities, but it affects a wide range of urban, rural and coastal areas. A vast quantity of research on single homelessness has been conducted over the last decade. Some of this work has been carried out by national homelessness agencies and is well publicised, but much interesting research has been done by local agencies and is not widely available to others who may benefit from it. Other sources of useful material, such as articles in academic journals, are somewhat inaccessible to homelessness practitioners. In addition, the sheer volume of research and information can be daunting, particularly to those new to the homelessness field. The Joseph Rowntree Foundation and CRASH (Construction and Property Industry Charity for the Single Homeless) therefore identified the need to synthesise this material to maximise its usefulness, particularly to policy makers, practitioners and research funders.

It is crucial to establish what is already known about single homelessness for at least three reasons:

- to disseminate as widely as possible evidence on what works and what does not in addressing the needs of single homeless people;
- to minimise the duplication of research and focus research activity on areas where there remain gaps in understanding; and
- to improve the overall quality of single homelessness research.

The central aim of this review was to produce a high quality and accessible summary of recent research and information about single homelessness in Britain. 'Single homelessness' is

used as a shorthand term to cover all homeless households without responsibility for dependent children – childless couples as well as single people are included. The review covers work published from 1990 onwards, although the most recent material is generally given precedence. The appendix to this report outlines the methods by which the review was accomplished.

There are three principal outputs from this review of single homelessness research which involve varying degrees of 'comprehensiveness':

- a bibliography which includes all research material on single homelessness identified in the review (Klinker and Fitzpatrick, 2000);
- summaries of the 200 most significant pieces of research identified in the review (Klinker et al, 2000); and
- this overview report which draws together the main findings of the research review.

A key objective of the review was to ensure that these outputs were produced in formats that were easily accessible to a wide audience. Thus, all three outputs are presented in a concise and digestible way and are disseminated in two formats: in hard copy, and on a 'user-friendly' website. The idea is that all three of these resources should be readily updatable to provide an ongoing source of information for practitioners, policy makers and research funders.

This overview report aims to assess the current position regarding research and information on homelessness in Britain; to draw out key themes that emerged from the review; to identify gaps in knowledge; and to highlight inconsistencies and contradictions in the existing research evidence. It thus attempts to present the main 'story' to

emerge from the review rather than to find a 'place' for all of the research reviewed. Central emphasis is placed on single homelessness, although material on family homelessness is sometimes drawn upon to demonstrate the broader context. We concentrate on homelessness studies rather than housing research in general, although some housing studies are drawn upon, together with other broader contextual material, particularly in Chapter 5. The social exclusion strategies currently being developed across Britain attempt to address the needs of both the people and the places most likely to be affected by homelessness. However, only brief reference can be made to such wider agendas in the course of this report.

A key theme in this overview is trends in single homelessness research. The topics covered by homelessness studies have shifted over time, sometimes in response to changes in government funding or in the composition of the homeless population, and sometimes as a result of the way thinking has evolved among homelessness researchers and practitioners. Another theme that runs throughout this report is the spatial patterning of single homelessness in Britain, and how this is reflected in the geographical coverage of research. There are important differences in the legal, political and policy frameworks relevant to homelessness between England, Scotland and Wales, and we attempt to highlight these wherever particularly relevant. While the bulk of the material reviewed was English, there is also a significant research literature on homelessness in Scotland. We identified far less research and other information on homelessness in Wales.

The subsequent chapters in this overview report focus on:

- the history of single homelessness in Britain (Chapter 2);
- definitions and experiences of homelessness (Chapter 3);
- the extent of single homelessness (Chapter 4);
- causes of single homelessness (Chapter 5);
- predictors of single homelessness (Chapter 6);
- wider aspects of single homeless people's lives (Chapter 7);
- responses to single homelessness (Chapter 8);
- conclusions and recommendations (Chapter 9).

The context: a brief history of single homelessness in Britain

Introduction

Historical accounts of homelessness in Britain and the changing policy and legislative contexts affecting homeless people are provided by a number of sources (see Watson with Austerberry, 1986; Clapham et al, 1990; Greve, 1991; Robson and Poustie, 1996). We therefore summarise this earlier history briefly before concentrating on more recent developments on single homelessness in Britain, particularly trends in national policy making.

The emergence of homelessness

Historically, the response of local and central government towards homeless persons was derived from the Poor Law under which homeless vagrants were treated particularly harshly. The 1948 National Assistance Act ended the Poor Law and attempted a more humane approach to the problems of homelessness. It placed a duty on local authority welfare departments to provide temporary accommodation for persons in 'urgent need thereof' whose homelessness 'could not reasonably have been foreseen'. Although well intentioned, this legislation was an inadequate response to homelessness. Many welfare departments interpreted their obligation to apply exclusively to homeless families, or more precisely to the mothers and children of homeless families. This meant that families were often split, with homeless fathers excluded from temporary accommodation, and single homeless people were rarely given any assistance (Robson and Poustie, 1996).

The deficiencies of the 1948 Act became more apparent as homelessness began to escalate in the 1960s. Homelessness was increasingly linked to housing shortages created by slum clearance programmes and the decline of the private rented sector, and thus homeless people attracted public sympathy as victims of circumstances beyond their control (Somerville, 1999). Pressure mounted for central government intervention on homelessness following the TV drama *Cathy Come Home* (1966), and the establishment of the campaigning group Shelter around the same time. A number of official committees in the late 1960s and early 1970s recommended that primary responsibility for the homeless should be transferred from local authority social services to housing departments (Robson and Poustie, 1996). However, these debates on homelessness still focused largely on families with dependent children rather than on single people (Watson with Austerberry, 1986).

Mounting political pressure eventually resulted in the 1977 Housing (Homeless Persons) Act. This was a Private Members Bill proposed by Stephen Ross, a Liberal MP, but the then Labour government supported it. This legislation stands as a major landmark in policy responses to homeless people, and we turn to consider its achievements next.

The Homeless Persons legislation and homelessness services

The main aims of the 1977 Housing (Homeless Persons) Act were to clarify and strengthen local authority duties towards the homeless, and to transfer these responsibilities from local authority social services to housing departments. (The

1977 Act was subsequently consolidated into the 1985 Housing Act Part III in England and Wales, and the 1987 Housing (Scotland) Act Part II.)

Local authorities were now obliged to secure long-term accommodation for households that were 'unintentionally' homeless, provided that they belonged to a 'priority need' group, such as families with dependent children, pregnant women and victims of fire and flood. Single people were generally considered to have a priority need only if assessed as particularly 'vulnerable'. Homeless people who did not qualify as having a priority need were simply entitled to 'advice and assistance'. Persons who had a priority need but were homeless 'intentionally' were only entitled to temporary accommodation for a limited period and to advice and assistance. Local authorities could transfer responsibility for the long-term rehousing of priority households that had no local connection with their area to a local authority with which they did have a local connection. The 1977 Act also added statutorily homeless households to the list of persons who should be given 'reasonable preference' in the allocation of council housing. (See Robson and Poustie, 1996, for a detailed discussion of the legislation.)

The homelessness legislation was a major step forward in provision for homeless people. It granted them rights to long-term housing for the first time, and it placed responsibility for the homeless firmly on housing departments, which stopped homeless families being shuttled between housing and social services departments (Fitzpatrick and Stephens, 1999; Somerville, 1999). However, there were significant limitations to the Act's scope. For example, in practice, the majority of homeless households accepted as having a priority need were families with children or pregnant women, and most single homeless people were not entitled even to temporary accommodation. Indeed, one of the most important impacts of the 1977 Act was to reinforce the traditional division between single and family homelessness which remains central to homelessness research and practice to this day.

One legacy of this division has been that many of the services available to single homeless people are supplied by the 'voluntary' sector as they attempt to fill the gaps left by the statutory

services. Voluntary sector agencies range from traditional charities catering for single homeless people, such as the Salvation Army, to new organisations set up from the 1970s onwards to work with particular groups, such as young people or women. These organisations often provide advice, counselling and outreach services, and some agencies have a campaigning role. The major voluntary sector activity, however, has been hostel provision (Hutson and Liddiard, 1994). Some voluntary agencies rely solely on public donations, but many receive some form of government funding.

The private sector has traditionally played a far less admirable role in the provision of homelessness services, mainly providing poor-quality accommodation for homeless people in commercial hostels and Bed & Breakfast (B&B) hotels. In recent years, however, a more positive role has been developed for private businesses in addressing homelessness. CRASH was established in 1991 to convert buildings into cold-weather shelters for rough sleepers in London. Its work has since expanded to other parts of the country and to other types of homeless initiative, although it continues to fund and publish an annual survey of Rough Sleepers Initiative (RSI) winter shelter users (CRASH, 1999) (see Chapter 4). CRASH and Business in the Community have now jointly established a campaign for 'Business Action on Homelessness'. This work was underpinned by research that they jointly commissioned which suggested that support for homelessness was low down on the corporate social agenda but high for shareholders (Bain & Co, 1998). There have also been efforts made to involve the business community in the foyer initiative (Foyer Federation, 1998) (see Chapter 8).

The growth of homelessness in the 1980s and 1990s

Official statistics demonstrate the sharp escalation in statutory homelessness over the past couple of decades, and indicate that it has now stabilised at an exceptionally high level. Owing to the definition of 'priority need' discussed above, the statutory homeless figures in England and Wales relate mainly to families with children. However, a different reporting system in Scotland means that official figures there do include single people. These show that

homelessness applications to Scottish local authorities almost trebled between 1983 and 1993, and currently around 60% of these applications are from single people. Over the same period, voluntary agencies throughout Britain catering for single homeless people reported a massive increase in demands for their services (Hutson and Liddiard, 1994). Thus, there is a widespread perception that single homelessness has reached unprecedented levels, although there are no reliable trends data that can prove this. (See Chapter 4 for a fuller discussion of the extent of homelessness.)

When homelessness first re-emerged as a political issue in the UK in the 1960s and early 1970s, it was associated mainly with poor families and older single men (Smith and Gilford, 1998). However, as homelessness escalated in the 1980s the profile of homeless people began to change, and there appears to have been a significant increase in the numbers of young people, women and people from minority ethnic groups among the homeless population (Greve, 1991; Anderson et al, 1993; Kemp, 1997).

This growth in homelessness has often been attributed to housing market factors, and in particular to the shortage of affordable rented accommodation (Greve, 1991; Diaz and Colman, 1997). However, there has been growing evidence that economic factors, including unemployment and cuts in social security benefits, can be at least as important in driving up the numbers of homeless people (eg, Bramley, 1993; Fitzpatrick, forthcoming). Also, it has become clear that certain groups of people are particularly vulnerable to homelessness, such as those with mental health or substance abuse problems, or who have spent time in institutions such as children's homes or prison. (See Chapters 5 and 6 for a fuller discussion of the causes and predictors of homelessness.)

The Conservatives' approach to homelessness

There is a consensus among researchers that the economic, housing and social security policies pursued by the Conservative administrations from 1979 to 1997 had the (unintended) consequence of exacerbating homelessness (Kemp, 1992). These governments also implemented severe cuts in local authority

funding, which led to reductions in services for single homeless people. However, the increasing visibility of rough sleeping in central London in the late 1980s did prompt the Conservative government to introduce a number of initiatives aimed at tackling the problem. The best known of these is the Rough Sleepers Initiative (RSI) which was launched in London in 1990. This programme represented expenditure of £100 million over an initial three-year period, and funded outreach work, hostel places, move-on accommodation and resettlement services. The objective of the RSI was to ensure that "it should be unnecessary for people to sleep rough on the streets of London" (Randall and Brown, 1993, p v).

The RSI achieved a significant reduction in the number of people sleeping rough in central London, but it was criticised, among other things, for its restricted geographical scope and for addressing only the symptoms rather than the causes of homelessness (Anderson, 1993; Strathdee and Coster, 1996). However, the RSI did represent the first attempt by central government to coordinate a response to a particular aspect of single homelessness. It has been continued in London and was extended to other cities in England in 1996; the Scottish RSI was launched in 1997. Evaluations of the first and second phases of the RSI in England have largely been favourable, although they have suggested adjustments in the initiative's design and operation (Randall and Brown, 1993, 1996). The evaluation of the Scottish RSI has now been published (Yanetta et al, 1999) and the evaluation of the third phase of the English RSI is due to be published shortly.

Another measure taken by the Conservatives which should have provided greater protection for young homeless people under 18 was the 1989 Children's Act. Under this Act, local authority social services departments have a duty to provide accommodation to children 'in need' if no adult is providing suitable accommodation and care or if their welfare is otherwise 'likely to be seriously prejudiced'. However, the latest evidence suggests that many local authority social services departments are failing to fulfil their duties under this legislation (McCluskey, 1994; Brody, 1996). The 1995 Children (Scotland) Act places a corporate duty on the Scottish unitary local authorities to accommodate children in their area up to 18 years of age if no

adult is providing suitable accommodation and care. Again, survey evidence suggests that not all Scottish councils have as yet embraced these additional responsibilities, but it is still relatively early days (Corbett, 1998).

While these Conservative governments took some steps to address the problems of street homelessness, they were clearly uneasy about the rights given to 'priority need' groups under the Homeless Persons legislation. Several reviews of the legislation finally culminated in the 1996 Housing Act, which altered the statutory framework in England and Wales. The 1996 Act reduced local authorities' duty towards those households that qualified for maximum assistance in securing temporary accommodation for a limited period of two years. Also, English and Welsh local authorities became obliged to allocate all secure tenancies in council housing, and nominations to assured housing association tenancies, through a 'single housing register', and could not provide a separate 'homeless route' into social housing. In addition, the 1996 Act removed homeless households from the list of groups for whom a 'reasonable preference' had to be given in allocations. The homelessness legislation remained unchanged in Scotland.

The Labour government's response to homelessness

Since coming to power in 1997, the Labour government has pledged to 'rebuild a proper safety net' for households that are unintentionally homeless and in priority need (DETR, 1997). The only change it has made so far to the Conservatives' legislative framework was to reintroduce such households to the list of those entitled to 'reasonable preference' in council house allocations. However, a revised 'Code of Guidance' was issued to local authorities in March 1999 (DETR, 1999a), and the homelessness and allocations chapters of the 1996 Housing Act are currently under consideration by the DETR as part of its preparations for the forthcoming Housing Green Paper.

Rough sleeping was one of the first priorities for the Cabinet Office Social Exclusion Unit (SEU). The SEU (1998) report on rough sleeping announced a range of measures aimed at

reducing the numbers of people sleeping rough in England by two thirds by 2002. The government conceded that, partly because of a continuing shortage of direct access hostel beds in London, the RSI had not yet met its objective of ensuring that there should be no need for anyone to sleep rough in the capital (SEU, 1998). A new body, the Rough Sleepers Unit (RSU), was therefore set up to take over and coordinate all of the government programmes targeted on rough sleepers in London (including RSI, Homeless Mentally Ill Initiative, Drug and Alcohol Specific Grant and DSS Resettlement Programme) (DETR, 1999b). In September 1999, the RSU assumed responsibility for coordinating action on rough sleepers across England, and it was due to publish its national strategy on rough sleeping in December 1999. Also, the Homelessness Action Programme was launched to help voluntary organisations outside London tackle rough sleeping.

The RSI has acted as a catalyst for a general drive towards strategic, multi-agency working in the single homelessness field (London Borough Grants, 1999). This multi-agency approach is in line with the growing recognition that tackling homelessness requires action on a range of issues beyond housing, such as employment and health (see Chapter 7). Thus, the DETR has launched a 'Youth Homelessness Action Partnership' (YHAP) to bring together various departments of central government, local government and the voluntary sector. YHAP is charged with creating national and local frameworks within which the statutory and voluntary sectors can work together to tackle youth homelessness, and to agree a joint agenda of specific policy options and practical responses to youth homelessness. The Scottish Executive has recently established a Homelessness Task Force to "take a wide-ranging look at the underlying nature and causes of homelessness, and to focus on prevention".

However, underlying the Labour administration's apparently more sympathetic approach to homeless people remains the threat of punitive action if they do not take up the opportunities offered by the RSI and other programmes. For example, the SEU's report states that:

> The Government has no present plans to ... make it an offence to sleep rough. But since the explicit intention of the policy is to deliver clear streets, the Government believes that the public will feel they have a right to expect hostel places to be taken up as more become available. (SEU, 1998, para 4.23)

This approach clearly embodies New Labour's general ethic of 'tough love' in relation to disadvantaged groups. There is also considerable concern that the Labour government has continued many of the policies felt by researchers to lie at the root of the rise in homelessness, particularly in relation to social security.

Summary

Statutory responses to homelessness have traditionally focused on families with children, and the division between single and family homelessness in research and policy was reinforced by the restrictions of the Homeless Persons legislation. However, the growing visibility of rough sleeping since the late 1980s has focused attention on some particular chapters of the single homeless population, and has prompted central government to fund a series of Rough Sleepers Initiatives. The current Labour government has pushed homelessness further up the political agenda, with rough sleepers being among the first priorities for the SEU, and with the establishment of the YHAP and the Scottish Homelessness Task Force. Against this, however, there is a concern that the recent emphasis on rough sleeping has narrowed the debate around homelessness to a minimalist definition of the problem. These definitional issues are explored in the next chapter.

3

The nature of single homelessness: definitions and experiences

Introduction

This chapter attempts to introduce the nature of homelessness by exploring definitions of homelessness and by highlighting the range of homeless experiences.

What is homelessness?

There is no single, universally accepted definition of homelessness. While there is a statutory definition of homelessness in Britain, it is primarily a device for rationing council housing (through the mechanism of 'priority need' in particular) rather than for capturing the nature of homelessness (see Chapter 2). Thus, we concentrate here on what have been termed 'common sense' definitions of homelessness. The following list sets out a range of housing situations that may be defined as homelessness, ranging from the most obvious cases of homelessness, through to broader categories of people who may be defined as homeless (Robson and Poustie, 1996). All of these situations can be subsumed under the general heading of "the lack of a right or access to their own secure and minimally adequate housing space" (Bramley, 1988, p 26).

1. The narrowest definition is 'rooflessness', whereby only those without shelter of any kind should be considered homeless – for instance, people who are sleeping rough, newly arrived immigrants and victims of fire and floods.
2. 'Houselessness' is a wider term which includes those who are living in emergency and temporary accommodation provided for homeless people, such as night shelters, hostels and refuges. It also covers people who reside in long-term institutions, for example psychiatric hospitals, simply because there is no suitable accommodation for them in the community. Another group in this category comprises households staying in B&B hotels and other places that are unsuitable as long-stay accommodation.
3. A third definition of homelessness includes people who have insecure or impermanent tenures, such as those staying with friends or relatives on a temporary basis, tenants under notice to quit and squatters.
4. Those who live in 'intolerable' housing circumstances may also be considered homeless. This refers not only to severely overcrowded or substandard accommodation, but also to situations where there are threats to personal safety or psychological well-being.
5. Households that are involuntarily sharing accommodation on a long-term basis because they cannot secure separate housing may also be considered 'concealed households' and therefore homeless.

Some of the broader definitions of homelessness draw on the 'meaning of home' literature, which emphasises that home (and therefore homelessness) is not a purely housing-based concept, but has significant emotional, social and psychological dimensions (Somerville, 1992).

There have been calls for a clarification in conceptions of homelessness, so that all agencies in the field can work to a common, agreed definition (Alexander, 1999). At the same time, the politically contested nature of definitions of homelessness has been highlighted (Clapham et al, 1990; Jacobs et al, 1999), with governments generally adopting 'minimalist'

definitions to contain the size of the problem they have to tackle, and campaigning organisations often pressing for the widest possible definitions. Many research reports include all five of the above categories in their 'working definition', although the practical difficulties of contacting people in Categories 3 to 5 mean that they are seldom included in research samples. Some commentators have argued that these broad definitional approaches may present hazards to those seeking to promote the interests of homeless people:

> There is a danger that by referring to all housing need as a form of homelessness, the unique danger and distress of actual homelessness becomes lost. Overcrowding, poor housing conditions and insecurity of tenure are all very important problems affecting hundreds of thousands, if not millions, of people, but apart from their most extreme manifestations, they cannot be regarded as homelessness. Quite simply, being poorly housed is one thing, having nowhere at all to live is something else. (Pleace et al, 1997, p 8)

The range of possible definitions of homelessness is clearly one of the constraints in developing reliable estimates of the scale of the problem (further discussed in Chapter 4). One way forward may be that adopted in the research conducted for the YHAP, which offers a range of estimates of the numbers of young people involved to match the various possible definitions of homelessness (see Chapter 6).

Is 'hidden' homelessness really homelessness?

The argument about the breadth of housing need that should be considered to constitute homelessness has often been conflated with the debate over the validity of the concept of 'hidden homelessness' (see Anderson, 1994; Pleace et al, 1997). This is because concealed households and people experiencing intolerable housing circumstances are the main groups usually referred to as the 'hidden homeless'. However, the homelessness of many of those in the other categories described above can also be hidden. According to Webb (1994), people can be considered 'visibly' homeless if:

- their homelessness is recorded in official statistics, that is, they have applied to and/or have been accepted by a local housing authority as homeless; or
- they are in contact with homelessness agencies and/or staying in homeless hostels; or
- they are sleeping rough in visible areas or on known sites, for example in the city centre.

Conversely, then, the hidden homeless are those whose homelessness is not visible in these respects. So even people whose situations fall within the narrowest definition of homelessness – rooflessness – can be hidden because they are sleeping rough away from known sites and are not in contact with helping agencies (Crane with Warnes, 1997; Fitzpatrick, forthcoming). Thus, it is important to maintain a distinction between the breadth of the definition of homelessness and the notion of 'hidden' homelessness.

Homeless people's definitions

Very few studies have explored homeless people's own definitions of homelessness. Hutson and Liddiard (1994) found that young homeless people often interpreted homelessness narrowly as rough sleeping, and it was common for those staying with friends not to describe themselves as homeless. Fitzpatrick (forthcoming), however, found that young homeless people generally adopted a broader definition of homelessness as having 'no permanent house'. All of these authors agreed that the degree of security and permanence of accommodation was emphasised more often than physical conditions by young people when defining homelessness. In contrast, Watson with Austerberry (1986) found that poor material conditions were an important focus of single homeless women's definitions of homelessness. An explanation for this probably lies in the different experiences of the two groups: most of Watson and Austerberry's sample were living in institutional settings, whereas the young homeless people in the studies mentioned above were more often moving around friends' houses and few had ever had their own tenancy. Nevertheless, it is clear that we have an incomplete understanding of homeless people's own conceptions of homelessness.

Experiences of homelessness

A great deal of research explores how single people experience homelessness. These studies generally use qualitative research methods to enable homeless people's 'voices' to be heard so that their views and experiences can influence both policy debates and public perceptions of homelessness.

Some of this research focuses on particular types of homeless situation, such as living in B&B hotels (Carter, 1997); hostels (Garside et al, 1990); staying care-of friends or family (Webb, 1994); and sleeping rough (Alexander and Ruggieri, 1998). Other studies focus on particular groups of single homeless people, such as young people (Jones, 1993; Smith and Gilford, 1998; Fitzpatrick, forthcoming), women (Watson with Austerberry, 1986; Dibblin, 1991; Jones, 1999), ethnic minorities (Davies et al, 1996; Rooney and Brown, 1996) and older people (Crane with Warnes, 1997; Wilson, 1995).

In this literature there is a growing recognition that homelessness is experienced as a process rather than simply as a 'situation'. Thus, researchers have highlighted how people often move through a range of housing circumstances as part of an overall homelessness 'career' (Jones, 1993; Hutson and Liddiard, 1994; Fitzpatrick, forthcoming). This shift in perception is also reflected in the increasing emphasis among homelessness agencies on what happens before and after homeless episodes through their prevention and resettlement work (see Chapters 6 and 8). The prevalence of repeat episodes of homelessness has became a particular concern, and Scottish Homes have commissioned a research project to compare the experiences and circumstances of those who make 'one-off' and 'recurrent' homelessness applications to local authorities.

The emphasis on the dynamics of homelessness relates to the developing interest in 'longitudinal' research throughout social policy, particularly in relation to the 'social exclusion' agenda and its focus on changing disadvantaged people's 'trajectories' (Hills, 1998). Longitudinal research involves tracking the progress of a particular group (or 'cohort') of people over time. The difficulties of tracing homeless people over time has meant that longitudinal research has seldom been attempted with this group in Britain, although some studies of hostel closures (Vincent et al, 1995) and of young homeless people (Smith and Gilford, 1991; Stockley et al, 1993) have included a follow-up stage. Also, a large-scale longitudinal study has been conducted of homeless applicants to local authorities in England (O'Callaghan et al, 1996). In the United States more efforts have been made to track homeless people over time in order to evaluate the effectiveness of interventions (see Cohen et al, 1993). The Scottish Homelessness Task Force is likely to make a longitudinal study of various homeless groups its main research priority.

Conclusion

There is no 'correct' definition of homelessness, and which one of the existing range is chosen remains essentially a political decision. Controversy persists over the idea of 'hidden homelessness', partly because of the imprecise use of the term. Clearly, homeless people's experiences should inform debates about the appropriate definition of homelessness, and the fluid nature of many people's homelessness careers means that static definitions do not adequately capture the nature of their experiences.

The scale of single homelessness

Introduction

There are no readily available data on the number of people who are homeless and there are a variety of reasons for this.

- The homeless are often hard to reach or 'hidden', which makes it difficult to count or to estimate their number.
- Homelessness is not a static phenomenon. Once people have become homeless, they do not necessarily stay that way for ever or for a long time: some people move in and out of homelessness, and some homeless people do not remain in the same location but move around.
- The lack of an agreed definition of what constitutes homelessness can also be an obstacle to measurement.

For these and other reasons, it is difficult to state with precision how many homeless people there are in Britain. At best, all that can be aimed for are estimates.

Measuring homelessness

There are a number of important reasons why policy makers and practitioners need to have some reasonably accurate idea of how many homeless people there are. Estimating the number of homeless people can shed light on the scale of the problem, can highlight trends over time, and can contribute to the evaluation of policy and practice.

In counting homelessness, it is important to specify whether what is being measured is the stock, the flow or the prevalence.

- The **stock** of homelessness refers to the number of people or households who are homeless at any point in time. In the USA, some authors use the term 'point-in-time prevalence' to describe the stock of homeless people.
- The **flow** of homelessness refers to the people who have become homeless, or ceased to be homeless, during any time period – the inflow and the outflow respectively.
- The **prevalence** refers to the number of people who have been homeless at some point, either during a particular time period ('period prevalence') or during their life ('lifetime prevalence').

In Britain, most debates about the number of homeless people implicitly refer to the stock rather than to the flow or the prevalence of homelessness. The **stock** of homelessness is usually much larger than the **flow** of people becoming homeless. Measures of the **prevalence** of homelessness are almost by definition larger than measures of the **stock**. In other words, the number of people who have been homeless during, say, a one-year period, will be larger than the number of people who are homeless at any point during the year.

Recent household surveys have provided estimates of the prevalence of homelessness during the past 10 years among people who are *currently housed*. For example, according to the 1994/95 Survey of English Housing, 4.3% of heads of household said they had been homeless within the past 10 years. This includes 4.8% of heads of household in urban areas and 1.9% in rural areas. Analysis of these data by Burrows (1997) found that the prevalence of perceived

homelessness in England varied inversely with age (Table 1). Homelessness was most prevalent among people aged from 16 to 19 years, 13.7% of whom said they had been homeless in the previous 10 years.

Table 1: Experience of homelessness in England, by age

Age	% who said they were homeless in the last 10 years
16 to 29	13.7
30 to 44	6.0
45 to 54	2.5
55 to 64	2.2
65 to 74	0.9
75+	0.0
All	4.3

Source: Burrows (1997, Table 4.1)

Table 2 shows that the prevalence of perceived homelessness in England was much greater among black people than among white. Kemp (1997) argued that the proportion of single homeless people living in hostels who are from minority ethnic groups almost certainly increased during the 1970s and 1980s.

The 1995 Scottish Survey of Consumer Preference in Housing found that 5% of respondents or their partners had been homeless within the previous 10 years (Pieda, 1996). Less than 1% said they had slept rough over the same period. In the vast majority of cases (97%), people said they were homeless for less than a

Table 2: Experience of homelessness in England, by ethnic background

Ethnicity	% who said they were homeless in the last 10 years
White	4.2
Black	13.4
Indian	2.4
Pakistani/Bangladeshi	3.8
Other	4.6
All	4.3

Source: Burrows (1997, Table 4.1)

year in total; only a tiny percentage of people had therefore experienced long-term homelessness.

The Scottish Survey also shed some light on the extent of so-called 'hidden homelessness' (see Chapter 3). It found that, among those who felt they had experienced homelessness, only three out of ten had stayed in a 'visibly homeless' situation, such as a hostel, or had slept rough. Instead, most had experienced their homelessness in situations that could be regarded as in some senses 'hidden' (see Table 3). The report concluded that:

> Of the small minority who had experienced homelessness in the last 10 years, the majority had stayed care-of-another household, such as a friend or relative, either on a temporary day-to-day basis or for a longer period while wanting a home or their own. (Pieda, 1996, p 3)

Table 3: Experience of different types of homelessness in Scotland

Type of homelessness	% of those people who said they were homeless in the last 10 years
Rough sleeping	5
Hostel/B&B	23
Care of friend/relative on day–to–day basis	28
Insecure rented accommodation (could be evicted at short notice)	12
Living with friend/relative* and wanting own home	63

Notes: * excluding their parents; Total exceeds 100 due to multiple responses.

Source: Pieda (1996, Table 7.1)

The homelessness statistics

At present, there are two main sources of data on the numbers of homeless people. These are the returns that local authorities complete under the Homeless Persons legislation and the counts of rough sleepers made by voluntary groups and statutory agencies in London and elsewhere. For ease of reference, the former will be referred to here as the 'statutory homelessness statistics' and the latter as the 'rough sleeper counts'.

It is important to note that these are two very different sources of information. The rough sleeper counts are attempts to measure the number of homeless people at a point in time, usually during a particular night. As such, they are a measure of the *stock* of homeless people. The 'homeless' people in question here are people identified as sleeping rough and without a home they could go to on that night.

The statutory homelessness statistics refer to the administrative procedures associated with the implementation of local authorities' duties under the homelessness legislation. The 'homeless' people concerned here are those who have applied to the local authority for assistance on the grounds that they are homeless. The data refer to applications, or decisions taken, during a time period (each quarter of the year). As such, they are measures of the *prevalence* of statutory homelessness during that period.

The rough sleeper counts are essentially one-off (but sometimes repeated) exercises, whereas the statutory homeless statistics are collected routinely from local authorities every quarter. While the rough sleeper counts are explicit attempts to measure the scale of the problem, the statutory homelessness statistics are essentially a byproduct of an administrative process. The rough sleeper counts have taken place in central London and in a number of other local authority areas, whereas the statutory homelessness statistics cover all authorities in Britain.

The statutory homelessness statistics

Separate statutory homelessness statistics are collected for England, Wales and Scotland. There are some important differences between the statistics for England and Wales and those for Scotland. The English and Welsh data refer to 'decisions taken', whereas the Scottish figures refer to 'applications'. Unlike the Scottish data, the English and Welsh data provide no information on the number of people who have applied for assistance on the grounds of homelessness. However, there are variations between local authorities in the administrative procedures for determining what exactly counts as an 'application' and this therefore affects the number of applications recorded in the statistics (Evans et al, 1994).

The statutory homeless statistics are the product of a bureaucratic process involving applicants and local authorities. To be recorded in the statutory homelessness statistics, it is necessary for households to express a 'felt need' (Bradshaw, 1972), namely that they are homeless or are threatened with homelessness. Some households who feel themselves to be homeless may contact the local authority, some may not know they can do so, while others may not do so because they believe that they have no prospect of receiving assistance. This clearly places an important limitation on the usefulness of the statutory homeless statistics as a means of estimating the number of people who are homeless.

Once people have approached the local authority for assistance, the officers, acting under the homelessness legislation and informed by the Code of Guidance and local policy, have then to make a number of decisions that decide the fate of the application. In particular, they have to determine whether an applicant is 'homeless' under the legislation, is 'unintentionally homeless', and is in 'priority need' and therefore eligible for rehousing.

An insight into the extent to which homeless households apply to the local authority for assistance can be gleaned from the Survey of English Housing. The 1994/95 Survey found that about three quarters (76%) of heads of household who reported that they had been homeless had approached the council as homeless (Burrows, 1997). Among those who had approached the council, three quarters (76%) said they had been accepted as homeless. In other words, only half of all heads of households who had felt themselves to be homeless in the previous 10 years had been accepted as such by the council.

As with any information collected for administrative purposes, the statutory homelessness data are subject to incomplete or missing returns and other problems. Consequently, the figures are estimates rather than 'actuals'.

The English and Welsh statutory homelessness statistics record:

- the number of households about whom decisions were taken under the homelessness legislation;
- the number of households accepted as eligible for assistance on the grounds of being unintentionally homeless and in priority need;
- the number intentionally homeless but in priority need; and
- the number homeless but not in priority need, and the number deemed not to be homeless.

In England, the number of households for whom decisions were taken by local authorities fell from 300,560 in the financial year 1992/93 to 244,130 in 1997/98. In the latter year, the number of households accepted as being unintentionally homeless and in priority need was 103,580 (42% of the total). A further 56,700 were assessed as being homeless but not in priority need, 5,000 as being intentionally homeless and in priority need, and 78,850 as being not homeless (Table 4).

The rate of homelessness acceptances – that is, the number of households accepted as homeless and in priority need by local authorities per 1,000 households in the population – varies

across the different regions of England (DETR, 1998). The acceptance rate in 1997/98 was 8.4 per 1,000 households in London and 6.9 per 1,000 in the West Midlands, whereas in all other regions of England it was between 3.5 per 1,000 (Merseyside) and 4.9 per 1,000 (the North West).

In Wales, the basis on which the homeless statistics are recorded changed in 1997. Prior to that date, the statistics included information of the number of homeless **presentations**; thereafter, the information is based on 'actions taken'. As in England, the number of cases presented increased dramatically in the 1980s before declining to some extent in the 1990s. Thus, presentations rose from 5,042 in 1978 to a peak of 14,753 in 1990, before falling somewhat erratically to 12,772 in 1996.

The Scottish data record details of:

- the number of households that have applied to local authorities for assistance under the legislation;
- the number assessed as homeless or potentially homeless; and
- the number assessed as being in priority need.

The Scottish data also distinguish between homeless applicants in priority need and those not in priority need, and between those who are intentionally homeless and those who are unintentionally homeless.

The number of **applications** in Scotland increased from 24,668 in the financial year 1987/88 to 43,100 in 1997/98. The number of applications assessed by local authorities as

Table 4: Decisions taken on applications from households eligible for assistance under the homelessness provisions of housing legislation in England (1997/98)

Households found to be:	Number	%
Unintentionally homeless and in priority need	103,580	42
Intentionally homeless and in priority need	5,000	2
Homeless but not in priority need	56,700	23
Not homeless	78,850	32
Total decisions	244,130	100

Source: DETR (1998)

homeless or potentially homeless rose from 15,339 to 32,400 over the same time period. The number assessed as being in priority need (and therefore entitled to rehousing) grew from 11,375 to 17,500. In 1997/98, 75% of all applicant households were deemed to be homeless and 41% were considered to be in priority need (Scottish Executive, 1999).

In all three nations, the statutory homeless figures also record the number of households placed by authorities in local authority or housing association stock, or in other categories of accommodation such as in B&Bs, hostels (including women's refuges) and private sector leased accommodation. Again, there are some differences between the English and Scottish data. For example, the English and Welsh figures, but not the Scottish figures, include households who are 'homeless at home' and awaiting accommodation. The Scottish data refer to households placed in different forms of accommodation during the quarter (a *prevalence* figure), while the English and Welsh data refer to the position at the end of each quarter (a *stock* figure).

Although the Scottish homelessness legislation is in some respects different from that in England and Wales, there is no obvious reason why the statistics could not be produced in a consistent format across all three nations. A coordinated approach to the statistics would facilitate comparisons between the three nations.

The rough sleeper counts

The first national survey of people sleeping rough was undertaken in 1965 by the National Assistance Board (NAB, 1966). It counted 965 people in Britain sleeping rough. It is only in the last decade or so that rough sleeper counts have become commonplace.

A count of the number of rough sleepers was carried out as part of the 1991 Census. The Census enumerators counted a total of 2,703 people sleeping rough on the Census night, including 1,275 (47% of the total) in Greater London. However, critics have argued that the Census under-enumerated the number of rough sleepers. It has been pointed out, for example, that the Census enumerators found no rough sleepers in Birmingham, despite the fact that local agencies were aware of regular rough

sleepers in that city – a count undertaken in 1992 found 69 rough sleepers in Birmingham (Randall, 1998).

In Scotland, the 1991 Census enumerated 145 people sleeping rough, of whom two thirds were in Glasgow and Edinburgh. Shelter (Scotland) carried out a street count in Glasgow in 1996 and found a total of 53 people sleeping rough on the night in question (1996).

Since 1992 the Homeless Network has been conducting twice-yearly counts of the numbers of rough sleepers in central London. In May 1997, 367 people were counted sleeping on the streets in the RSI zones (as defined in 1996) in central London (Homeless Network, 1997; Randall, 1998); in January 1998 the figure was 272, and in January 1999 it had risen to 302. Despite this recent increase, these stock counts confirm that the number of rough sleepers in central London has fallen since the early 1990s. Part of this decline is likely to be due to the RSI, particularly in central London where it was initially focused.

The DETR has recently published stock-based estimates of the number of people sleeping rough in England. According to this estimate, in June 1998 there were 1,850 people sleeping rough in England, of whom 621 (34%) were in Greater London. Based on these figures, it appears that the stock of people sleeping rough has fallen.

The DETR figures indicate that the majority of rough sleepers are located in London, especially in the central London boroughs of Westminster, Camden and the City. Table 5 shows the street counts for local authority districts with 20 or more rough sleepers. As well as various London boroughs, these high street count authorities include large cities (such as Birmingham), port towns (such as Portsmouth) and seaside and tourist towns (such as Bournemouth and Oxford).

The DETR plans to publish twice-yearly estimates of the number of people sleeping rough in England, showing the position in June and December. It also proposes to monitor the number of new rough sleepers coming on to the streets over time. Thus, figures will henceforth be available for both the stock and the flow of rough sleepers.

Table 5: Local authorities in England with estimates of 20 or more people sleeping rough (June 1998)

London boroughs	Street count	Other areas	Street count
Westminster	237	Birmingham	56
Camden	59	Brighton/Hove	44
City of London	41	Bournemouth	44
Tower Hamlets	31	Bristol	42
Brent	29	Oxford	39
Croydon	25	Manchester	31
Ealing	24	Cambridge	30
Kensington/Chelsea	23	Exeter	27
Lambeth	20	Southampton	22
Hounslow	20	Portsmouth	21
		Leicester	20
		Worcester	20
		Stoke on Trent	20

Source: Hansard, written answers, 19 May 1999

As well as stock counts, the Homeless Network has produced an estimate of the *prevalence* of rough sleeping in central London during a 12-month period. (As noted above, prevalence figures are invariably higher than stock data.) Using records kept by outreach teams, the Network estimated that there were 2,381 different people sleeping on the streets during 1996/97. (These figures exclude two zones covered by the RSI. If the figures are 'grossed up' to include these two zones, the Network estimates the overall total to be in the region of 3,000 different people.) Of these 2,381 people, 1,800 were new arrivals; this is equivalent to an average *flow* of five new rough sleepers each night (Housing Services Agency, 1998).

In the mid-1990s, an attempt was made to estimate the number of rough sleepers in Scotland using the 'mark–recapture' (or, more politely, the 'contact–recontact') method. This method was originally devised by ecologists for estimating the number of species of animals or birds of different types. It was subsequently used in a number of studies to estimate the prevalence of drug misuse in particular localities, before being extended to estimate the rough sleeping population. In summary, the procedure involved a comparison of the rough sleepers who were in contact with local agencies at two different points in time and used the overlap to create a multiplier from which to estimate the total population of rough sleepers (Shaw et al, 1996).

While the mark–recapture method has proved useful for estimating the numbers of animal or bird populations, doubts have been raised about its validity for estimating the prevalence of drug misuse (Hay, 1998), and these doubts apply even more to estimates of the population of rough sleepers. As Hay points out, the procedure assumes that the population in question is closed; in other words, in the homelessness context, it assumes that, in the time period during which the data are collected, no rough sleepers cease sleeping rough and no new people start sleeping rough in the locality. The method also assumes that rough sleepers remain within the same locality during the period under study and do not move elsewhere. But, given the transient nature of at least some of the rough sleeping population, these two assumptions are unlikely to hold good.

Yanetta et al (1999) have recently attempted to estimate the prevalence of rough sleeping during one year in Scotland. They used three different methods, each of which produced a different estimate. According to one method, between 8,400 and 11,000 people were estimated to have slept rough in Scotland at some point during 1997/98; according to another 6,500 had slept rough; and according to the third 5,960 had done so. In fact, none of the three methods used was very robust, and hence only limited significance can be attached to the results. Nevertheless, the figures are useful in highlighting the fact that

different methods can produce quite different estimates of the prevalence of rough sleeping.

Hostels and night shelters

There is a third potential source of information on the scale of homelessness: hostels and night shelters. Although figures are not routinely produced, it should be possible to estimate the number of homeless people making use of hostels and night shelters. This would involve counting the number of bed spaces available to homeless people in hostels and night shelters and then either counting the number of users on any given night, or ascertaining the average occupancy rate for each establishment.

The availability of hostel directories in some cities makes it possible to develop such estimates. For example, in London the *London Hostels Directory* provides information on the number and types of hostels and night shelters providing accommodation in the capital. It also includes details of the accommodation and facilities provided by each establishment, client groups catered for, rules governing access and the number of vacant bed spaces. The number of bed spaces in hostels in London is now in the region of 17,000, and occupancy rates are very high.

Some night shelters are provided only over the Christmas period or the winter rather than all year round. This seasonality in the number of bed spaces means that attempts to estimate the stock of people living in hostels and night shelters should be undertaken at a minimum of two points during the year, at least once during the winter and once during the summer. Ideally, these stock estimates should be carried out on the same night as rough sleeper counts. This is because some of the users of winter shelters may be sleeping rough at other times in the year and there is consequently a danger of double counting.

CRASH collects and analyses statistics on the number of people using RSI winter shelters in London, Brighton, Bristol and Cambridge each year. The occupancy rates for these shelters have been very high. For example, in 1998/99 the average occupancy rates were 93% in London, 97% in Brighton, 92% in Bristol and 88% in Cambridge (CRASH, 1999). In London alone, the number of individuals staying at the winter shelters in the last three years was 1,693 in 1996/97, 1,494 in 1997/98 and 1,223 in 1998/99. Over 50% of the users in London each year have been first-time occupants. Since CRASH has used tracking codes for the past six years, it should be possible to examine the movement of individual users between shelters and one from year to another, thereby providing useful longitudinal information about winter shelter users.

Trends in homelessness

Provided the counts are carried out on the same night to avoid double counting, it is valid to add together the number of people sleeping rough and those staying in hostels and night shelters to produce an estimate of the total number of single homeless people. Of course, this estimate would not include people who may be regarded as 'hidden homeless'.

However, it is not possible to obtain a robust estimate of the total number of homeless people by adding these first two sources of data – the rough sleeper counts and estimates of the number of hostel and night shelter users – to the numbers of people recorded in the statutory homelessness statistics. The first two sources and the third are not additive for two main reasons.

In the first place, they are not mutually exclusive categories. For example, some of the people applying for, and receiving, assistance under the homelessness legislation may be sleeping rough or living in a hostel when they make that application. In some cases the local authority might place applicants in a hostel, either in full discharge of their responsibilities under the legislation or prior to permanent rehousing. Second, while the first two of the sources (the rough sleeper counts and the estimated number of hostel users) provide information on the *stock* of homelessness, the third (the number of statutory homeless applicants or acceptances each quarter year) is a measure of *period prevalence*.

Despite the limitations of the available statistics of the number of people who are homeless at any one time, they can provide important information about trends over time. Provided the data are collected on a consistent basis each

year (and hence assuming that the margin of error is the same from one year to the next), they can provide reasonably reliable information on changes over time. For example, the trend data suggest that homelessness has been increasing in Scotland, although the rate of increase has slowed down compared with the 1980s (Table 6).

Table 6: Number of households assessed as homeless or potentially homeless under the Homeless Person's legislation in Scotland (April 1987 to March 1998)

Financial year	Number of households
1987-88	15,339
1988-89	15,773
1989-90	18,277
1990-91	23,500
1991-92	27,800
1992-93	30,100
1993-94	30,900
1994-95	31,600
1995-96	30,300
1996-97	30,600
1997-98	32,400

Source: Scottish Executive (1999, Table 10.7)

This raises the important question of whether these three sources of information co-vary, that is, move in a similar pattern over time. It is certainly the case that the number of people sleeping rough, the number of statutory homelessness applicants, and the number of people on benefit living in hostels and B&Bs all increased in the 1980s. The number of rough sleepers and the number of statutory homeless households in England and Wales have both fallen to some extent in the 1990s. Alternatively, it is pertinent to enquire whether the factors that influence the numbers of homeless single people also affect the number of homeless families.

While some of the factors that influence single and family homelessness may be similar, others are likely to be very different. In so far as homelessness is the result of structural factors such as a general shortage of accommodation, unemployment and trends in relationship breakdown, it is reasonable to expect the result to have a broadly similar influence on family and single homelessness. On the other hand, some factors will be peculiar only to single people or

only to families. For example, while the RSI has helped to reduce the number of single people sleeping rough, it is unlikely to have had a significant influence on the number of families housed under the homelessness legislation. The extent of the relationship between single and family homelessness is an important question about which further research would be very helpful.

Summary

This chapter has examined the evidence about the scale of homelessness in Britain and the sources of available information on the subject. There is no readily available, comprehensive and robust source of information of the number of homeless people. The available figures on the number of statutory homeless households, rough sleepers, and hostel and night shelter users are all estimates and are subject to important limitations. Nevertheless, from a policy and practice perspective it is important to produce reliable estimates of the number of homeless people and to examine the factors that influence the scale of the problem. The partial and limited evidence that is available suggests that the scale of homelessness increased significantly during the 1980s and early 1990s. There appears to have been some decline in recent years in homelessness in England and Wales, but not in Scotland, although the available figures are still much higher than a decade ago.

5

Causes of single homelessness

Introduction

This chapter explores the underlying causes of single homelessness in Britain. It concentrates on broad societal factors, such as the labour and housing markets, and how these factors differ from place to place. Many of these structural processes can also be identified in other industrialised countries, and occasional reference is made to material from the European Union and the United States.

Structural or individual causes?

Explanations of the causes of homelessness are often divided into two broad categories: individual and structural (Johnson et al, 1991). Individualistic explanations focus on the personal characteristics and behaviours of homeless people. Structural explanations, on the other hand, locate the causes of homelessness in broader social and economic structures, such as the labour and housing markets. This individual/structural division has been criticised as overly simplistic (see Neale, 1997a), and it is clear that no sharp distinction can be made between structural and individual factors. Unemployment, for example, may lead to alcohol dependency and vice versa. However, most commentators seem to perceive this broad distinction as a useful starting point that aids our consideration of the causes of homelessness.

Researchers generally tend towards structural accounts of homelessness (Harvey, 1999). The key factors contributing to homelessness have been identified as adverse housing and labour market trends, cuts in social security benefits, rising levels of poverty and family restructuring. These are discussed below. However, it is clearly not the case that everyone affected by these factors becomes homeless, nor is the selection of who becomes homeless a random process (Burrows, 1997). Most researchers acknowledge that certain personal problems and circumstances significantly increase individuals' risk of becoming homeless (eg, Smith et al, 1998). Thus, the majority of research reports now weave together consideration of both structural and individual factors in accounting for particular aspects or groups of homeless people. The idea, however, that homelessness is a 'chosen' life-style for significant numbers of those affected is almost universally rejected. Chapter 6 focuses on 'predictors' of homelessness at the individual level.

Structural factors: the national picture

Housing trends

Most studies seeking to explain the expansion of single homelessness begin by examining changes in the housing system, although few now focus solely on this factor. Both demand and supply within the British housing market has restructured over the past couple of decades in ways that generally operate to the disadvantage of single people on low incomes (Anderson, 1994).

Housing demand

The overall demand for housing has increased in recent years, mainly as the result of a substantial

growth in the number of single-person households. This trend is attributable to rising divorce rates and an ageing population, as well as a growing tendency for unmarried people to live alone. Current forecasts suggest that there will be an additional 4.4 million households in the UK by 2016, with 3.5 million of them containing a single person (London Borough Grants, 1999). Based on this forecast, one estimate suggests that there will be a housing need for around 90,000 additional units per year in England (Holmans and Simpson, 1999).

Table 7: Dwellings by tenure in Britain (1981 and 1996) (%)

Tenure	1981	1996
Owner-occupiers	57	67
Privately rented	11	10
Housing association	2	4
Local authority	30	19

Source: Wilcox (1998)

Housing supply

Government policies over the past couple of decades have brought about a significant change in the housing tenure structure throughout Britain. Table 7 illustrates how owner-occupation grew, from 57% of the housing stock in 1981 to 67% in 1996. Over the same period the local authority sector shrunk from 30% to 19% of total housing stock. The private rented sector now contains only 10% of housing, and housing associations account for around 4% of housing stock.

Owner-occupation

Successive British governments have encouraged the expansion of owner-occupation through tax and other policies, but homeownership is not a realistic option for most single people on low incomes. (See Ford, 1997, 1999, for an analysis of the role of mortgage repossessions in contributing to homelessness.)

Public rented sector

The public rented sector has been shrinking as the result of the virtual cessation of new building by public landlords and the loss of stock through Right to Buy sales to sitting tenants and transfers to other landlords (mainly housing associations). Most sales have been of the better properties, leaving a residualised council sector containing a high proportion of poor-quality housing located in unpopular estates. Access to the public rented sector is generally on the basis of various 'housing need' factors, under which single people are generally given a low priority (see Anderson and Morgan, 1997). Thus, if they are accommodated at all by local authorities, they will often be allocated the least popular housing, particularly those who are housed through the homeless persons provisions (Fitzpatrick and Stephens, 1999).

Private rented sector

After a long period of decline, the private rented sector has recently expanded slightly. The private rented sector is expensive and insecure compared with social rented housing, and accommodation at the bottom end of the market is often of poor quality. On the other hand, the private rented sector does offer access on demand, and furnished private tenancies can enable people to set up home relatively cheaply. However, single people on low incomes face significant financial barriers in gaining access to this sector, mainly because of Housing Benefit restrictions and difficulties in gaining access to deposits and rent in advance from the Social Fund (Rugg, 1996) (see below).

Housing associations

Housing associations (now generally referred to as 'registered social landlords') occupy an expanding but still very small sector of the housing market. Like local authorities, they broadly allocate accommodation on the basis of housing need, but they have traditionally played an important role in housing single people (Anderson and Morgan, 1997). However, associations have been forced to increase rent levels in recent years as their capital subsidies have been reduced, and there have been concerns about affordability in this sector (Anderson, 1994). In any case, housing associations have too few properties to compensate for the loss of other rental stock.

Poverty and unemployment

Growing poverty

Homelessness is strongly associated with rising levels of poverty. Poverty has escalated throughout the EU since the 1970s (Harvey, 1999), and Britain has grown more unequal faster than almost every other developed country (Donnison, 1998). The proportion of the population living on less than half of the average income (the most widely accepted measure of relative poverty) rose from 6% in 1987 (roughly four million people) to 18% in 1995 (over 13 million) (Turok et al, 1998).

Labour market restructuring

This increase in poverty is largely attributable to changes in the labour market. The British labour market has fundamentally restructured over the past couple of decades, in common with that of other developed economies. Manufacturing employment has shrunk considerably, and the demand for unskilled occupations has continued to decline, while there is a growing call for managerial, professional and technical skills. There has therefore been a considerable polarisation between 'good' jobs, which are generally highly skilled and well paid, and 'poor' jobs, which are often badly paid, insecure and part-time or temporary (McGregor, 1998).

The decline of large-scale manufacturing industries has hit some groups particularly hard, such as older male manual workers who have moved out of the labour market and on to Incapacity Benefit in unprecedented numbers (Turok and Edge, 1999). These changes also disproportionately affected poorly qualified young men by cutting off their traditional route into work through apprenticeship schemes or unskilled labour. Youth unemployment has grown dramatically since the 1970s, and, despite a general fall in unemployment from the mid-1990s, very high rates of joblessness persist among young men in some deprived areas (Roberts, 1997). Even young people in work are poorer than their predecessors as the gap between adult and youth wages has widened. Those under 18 are excluded from the national minimum wage, while a lower minimum has been set for 18- to 20-year-olds.

Social security changes

There has been a significant reduction in the social security protection given to unemployed people, particularly young people, over the past two decades. Most 16- and 17-years-old lost their entitlement to Income Support in 1988, and young people aged 18 to 24 began to receive lower rates of Income Support (and now Jobseekers' Allowance) than those aged 25 or over. It is beyond doubt that these changes were key to the rapid increase in youth homelessness in the late 1980s (Oldman, 1997).

Another important social security change in 1988 was the replacement of 'exceptional needs payments' with the discretionary and budget limited Social Fund. Payments from the Social Fund usually take the form of repayable loans, and most housing costs, such as deposits, are excluded. Although rent in advance may be awarded from the Social Fund, it does not constitute a high priority.

Since 1996, the Housing Benefit entitlement for private tenants has been limited to a 'local reference rent', and for those who are single and under 25 it is restricted to the average local rent for a single room in shared accommodation. It has been argued that these changes have fuelled another escalation in youth homelessness (Foord et al, 1998).

Despite the low levels of subsistence provided by benefits like Income Support and Jobseekers' Allowance, the rapid withdrawal of benefits (particularly Housing Benefit) as income rises creates a strong disincentive to take up low-paid work. This is because people will often be little better off working once their social security entitlements are removed or significantly reduced, particularly if they have to pay full or near to full rent for their accommodation. The resulting 'unemployment trap' constitutes a particular problem in furnished or supported accommodation because of the high rents charged to cover the additional costs (see Chapter 8).

Family fragmentation

Processes of family fragmentation have played an important role in generating homelessness, particularly escalating divorce rates and the growth in lone-parent households and step-

families (Harvey, 1999). Family breakdown creates a serious risk of homelessness for those who are poor or in other ways vulnerable. Thus, relationship breakdown – either with parents or partner – has remained a key 'immediate cause' of homelessness for several decades (see Greve, 1991). Relationship breakdown is closely associated with homelessness not only among lone-parent families, but also among single people, where social isolation often constitutes a key factor in their vulnerability (Daly, 1993). There is a particularly strong relationship between conflict-ridden step-relationships and homelessness among young people (Jones, 1993).

Summary of structural trends

It is widely argued that housing market trends have combined to produce a shortage of affordable rented accommodation in Britain, and that this has directly contributed to the rise in homelessness (Greve, 1991; Hutson and Liddiard, 1994). At the same time, poverty and unemployment contribute to homelessness because they make it difficult for people to compete in the housing market (see Johnson et al, 1991). But the relationship of these economic factors to homelessness goes much deeper than this as they drive many of the social dislocations that contribute to the 'risk' factors and 'triggers', including relationship breakdown, that lead people into homelessness (see Chapter 6). While the present Labour government is taking significant steps to alleviate poverty among families with children, far less has been done to improve the position of poor single people.

The geography of homelessness

An aggregate analysis of the structural causes of homelessness conceals wide variations in the precise combination of factors driving homelessness in different places. The most important of these local contextual factors are housing and labour markets. However, even factors that appear to have a nationwide impact, such as social security provisions and trends in family structures, can have concentrated effects in particular areas because of their links to unemployment levels (Webster, forthcoming).

North and South

The most longstanding geographical division in the British economy is that between North and South. The South East has traditionally enjoyed strong economic growth that has attracted job-seeking migrants as well as high-income groups. The resulting pressure on the housing market has meant that low-income households find it difficult to compete for accommodation, with inflated house prices and acute shortages of affordable rented accommodation in the private and public sectors. Unless there is a radical change in the unbalanced development of the British economy, most of the additional housing need identified above will arise in the South.

Migration rates vary with economic conditions, so that North–South migration peaked during the late 1980s economic 'boom' when the benefits were felt mainly in the South, but slowed down during the 1990s recession which disproportionately affected the South. These migration trends have impacted upon the homeless population in the South, and Centrepoint, for example, has reported that the proportion of young homeless people in the West End of London who originate from outside the capital has decreased significantly since the late 1980s (SEU, 1998). However, migration began to pick up again with the most recent economic recovery (Holmans and Simpson, 1999), and thus might again drive up homelessness in the South.

Urban areas

With the narrowing of the North–South divide after the 1990s recession, attention has increasingly focused on another growing gap in economic prosperity in Britain: that between the major conurbations and the rest of the country.

There has been a clear urban–rural divergence in employment opportunities in the 1980s and 1990s (Turok and Edge, 1999). Not only have the conurbations fared badly relative to towns and rural areas in relation to the loss of blue-collar manual jobs, they have not benefited to the same extent from the growth in service sector employment. This has led to a 'jobs gap' – particularly for men – in Britain's major cities, with Glasgow, Manchester and Liverpool worst affected. Labour demand has picked up in large cities since the mid-1990s, but it is not yet clear

whether this represents a reversal of these long-term trends or simply a short-term upturn linked to the national economic cycle.

There has also been a movement of population from the conurbations to the rest of the country, and, within conurbations, from cities to suburbs. One result has been an overall drop in housing demand within cities, leading to areas of 'low housing demand' or even 'abandonment' (Power and Mumford, 1999). Housing quality can sometimes be an issue in these areas, but neighbourhood quality is more often the concern, reflecting underlying social and economic deprivation. Low housing demand is usually found in inner city neighbourhoods or public sector housing estates, areas where long-term unemployment and poverty have become increasingly concentrated. Council housing dominates low demand areas, although all tenures are affected. As this urban–rural shift is combined with a general North–South drift in population, low demand housing affects mainly northern cities.

There is sometimes surprise expressed that high levels of homelessness coexist with surplus housing stock in some parts of Britain. The explanation probably is that homelessness in these cities is driven by the social dislocations associated with unemployment and poverty, rather than by a shortage of accommodation. There will, of course, still be issues of housing quality, appropriateness and accessibility in these areas, particularly for single people.

London

London is a special case in many respects. While it is by far the richest conurbation in Britain, its southern and eastern inner city has some of the worst poverty in the country (Hutton, 1999). London has a massive and buoyant service industry, but many of the jobs in this sector are inaccessible to poor Londoners because of the high skills levels required (Llewelyn Davies and UCL, 1997). Despite high unemployment levels, London receives a great deal of in-migration owing to its role as a 'global city' and as a 'job escalator' (Webster, 1998). This creates heavy competition for the available housing stock, particularly during economic 'boom' periods. The apparent opportunities in the capital also 'attract' unemployed people and low-income households who are vulnerable to

homelessness. Thus, to some extent the North can be seen to 'export' its single homeless people to London, and in response, several London-based homelessness agencies have now established regional offices to focus on prevention work.

Single homelessness expanded earlier in London than elsewhere in Britain, and the sheer scale and visibility of the problem in the capital still dwarfs that of other places in the country (Greve, 1991). It was estimated in 1996 that there were 106,900 single homeless people in London (London Borough Grants, 1999). Services for single homeless people are more extensive and specialised here than anywhere else, and the bulk of the annual RSI budget for England is still spent in central London (SEU, 1998).

In the 1970s and early 1980s research on single homelessness tended to focus on London, but with the subsequent growth of homelessness in other parts of the country this London emphasis began to dilute. One important factor in the broadening geographical coverage of homelessness research has been the involvement of academics based throughout Britain, including Manchester, Birmingham, Bristol, York, Edinburgh, Glasgow and Cardiff. However, evaluations of initiatives to prevent or tackle single homelessness, particularly those related to the RSI, are still heavily concentrated in London, partly because of the concentration of homelessness services in the capital.

Rural areas

Homelessness in rural areas is driven largely by a shortage of affordable housing, with house prices often pushed up by the growing demand from affluent in-migrants and buyers of second homes (Diaz and Colman, 1997). The disproportionate impact of the Right to Buy policy in rural areas has depleted the already inadequate stocks of social rented housing in these areas, leaving single people with virtually no chance of gaining access to this accommodation. What little private rented accommodation there is in rural communities tends to be expensive (Lockwood, 1996). The Rural Development Commission has estimated that an additional 15,000 affordable homes are currently required to meet housing need in rural districts of South England alone (Diaz and

Colman, 1997), but planning restrictions and political objections make it difficult to meet that need. Other factors contributing to rural homelessness are the low wages and part-time or seasonal nature of much employment in the countryside, and the job losses associated with the decline of the farming industry.

Rural homelessness is a problem that has only relatively recently been recognised, but it has attracted a substantial amount of research since the early 1990s (Lambert et al, 1992; Ransley, 1996; Community Action, 1997). Major studies of the extent and nature of homelessness in rural areas in England and in Scotland are due to be published shortly. Although still (even proportionately) a much smaller problem than that in urban areas (Burrows, 1997), it is perceived to be growing faster. With a lack of specialist services in most rural areas, homelessness often remains 'hidden', with people forced to share with relatives, live in damp and dilapidated caravans, or stay in out-of-season lets (Simmons, 1993). Also, the shortage of housing and job opportunities, as well as homelessness services, forces many people, particularly young single people, to migrate to towns and cities, causing their homelessness to be registered as urban rather than rural (Lockwood, 1996; Centrepoint Eden Valley, 1998). Loss of tied accommodation is a particularly important 'trigger' for homelessness in rural areas.

Coastal areas

In-migration by people retiring and commuters, as well as the disproportionate impact of the Right to Buy policy, has similarly put pressure on the supply of affordable, mainstream accommodation in coastal areas. In addition, unemployment and low household incomes generated by the decline of the tourist industry mean that some local people find it difficult to compete for housing. Webster (1998) has argued that the 'pleasant environment' and availability of furnished rented accommodation in declining seaside towns may 'attract' unemployed people and other marginal groups who are vulnerable to homelessness. However, Kennedy (1993) found that the overwhelming majority of homeless people in the seaside towns he studied were local. Those without local connections (often searching for seasonal employment) were particularly vulnerable on account of their lack

of local support networks, and were more likely to end up in hostels or sleeping on the streets. He argued that high levels of disadvantaged populations (such as the mentally ill and elderly people) in seaside towns had led to levels of deprivation comparable to inner-city areas.

Preventing homelessness at the structural level

Many research reports focus on the need to address these underlying structural factors if homelessness is to be effectively tackled or prevented. Thus, attention is usually given to alleviating poverty, particularly through raising benefit levels and restoring entitlements to young people, reducing unemployment and tackling 'unemployment traps', and increasing the supply of affordable rented accommodation (see, for example, Thornton, 1990; Greve, 1991; Hutson and Liddiard, 1994; Evans, 1996).

However, it seems likely that geographical variations in the processes generating homelessness impact on the type of preventative measures required. For example, Greve (1991) suggests that family homelessness is particularly associated with housing market pressures in areas of economic growth, whereas homelessness among young single people is often particularly high in areas of economic decline and unemployment. There is some evidence for this in Glasgow, where single males are significantly over-represented in the homeless population as compared with the rest of Scotland.

Despite these debates, there is actually a dearth of research that rigorously examines the relationship between social and economic processes and patterns of homelessness in Britain. Jacobs et al claim that, for ideological reasons, much government and charity-funded research on homelessness is "administratively focused, suggesting that local authority bureaucracy and inter-agency working could remedy the plight of the homeless..." (1999, pp 22-3). They argue that it would be more appropriate to analyse and then tackle the underlying economic causation of homelessness. In this regard we could usefully draw on research experience in the USA where Burt (1991), for example, has examined the

relationship between homelessness and urban growth and decline.

However, changing these broad structural factors is a long-term process involving wide areas of economic and social policy. Some commentators have therefore argued that, at least in the short term, it is more practical and cost-effective to prevent homelessness through interventions targeted at those individuals who face the greatest risk (Lindblom, 1991; Randall and Brown, 1999a). Prevention at this 'micro level' is discussed in the next chapter.

Summary

A range of housing, economic and social processes have pushed people to the fringes of British society where they have become vulnerable to homelessness. While it is clear that the housing market is an important factor in generating homelessness, it is equally clear that homelessness is not 'simply a housing problem', although it is more of a housing problem in some places (rural areas and London) than in others (northern, metropolitan cities). However, we require more empirical research on the 'macro' processes that cause homelessness, their relative importance and their differential impact at the local level.

6

Predictors of single homelessness

Introduction

While the last chapter focused on 'why' there is single homelessness, this chapter focuses more on the 'who' questions. Who is most likely to become homeless? Which groups of single people are at particular risk? It is split into three main parts:

- **characteristics**, that is, the broad demographic profile of single homeless people;
- **risk factors**, the circumstances and experiences that render people particularly vulnerable to homelessness; and
- **triggers**, the specific events that often constitute the 'immediate causes' of homelessness.

We then consider material on the prevention of single homelessness at this individual level.

Characteristics

A considerable amount is known about the characteristics of single homeless people. This information is drawn from across a large number of studies, but the most systematic account of characteristics is offered by the 1991 DETR Survey of single homeless people in England sleeping rough or living in hostels or B&Bs (Anderson et al, 1993; Kemp, 1997). Burrows' (1997) analysis of homelessness among heads of household responding to the English House Conditions Survey 1994/95 also provides a useful source, although it is not limited to single homeless people. There are no similar large-scale studies of single homelessness in Wales or Scotland.

Household type

Data from across the EU suggest that single people have a four times greater risk of becoming homeless than couples with or without children, and that lone parents have a 17 times greater risk than couples (Daly, 1993). Similarly, Burrows (1997) found that lone parents were by far the household type most vulnerable to homelessness, with single males the next most likely group to experience it.

Age

The average age of single homeless people has been falling, and there has been a significant increase in youth homelessness in recent years (Evans, 1996; Kemp, 1997). However, while young people are significantly over-represented among the homeless population (Burrows, 1997), it seems that the majority of 'visible' single homeless people, particularly rough sleepers, are still aged between 25 and 59 (Kemp, 1997). Thus, there is concern that the focus of many newer and higher-quality homelessness services on young homeless people may mean that the needs of other (larger) groups of single homeless people are neglected (Foord et al, 1998; Quilgars and Pleace, 1999).

There is a wealth of research on youth homelessness which is drawn upon throughout this overview (for example, Bannister et al, 1993; Jones, 1993; Stockley et al, 1993; Hutson and Liddiard, 1994; Evans, 1996; Carlen, 1996; Smith et al, 1996, 1998; Blackman, 1998; Fitzpatrick, forthcoming). In addition, the YHAP has now commissioned two research projects (see Chapter 2). The first involves an audit of the

information available on youth homelessness, an investigation of the causes of youth homelessness and estimations of the numbers of young people affected. The second project aims to identify the different initiatives being adopted to tackle youth homelessness, to establish a database of the range of preventative initiatives aimed at young people and to evaluate a sample of schemes in terms of their costs and effectiveness. A major study of young people 'running away' from home or care before age 18 has just been published (Safe on the Streets Research Team, 1999). This established that running away was a widespread phenomenon in urban, suburban and rural areas of Britain, and that many runaways experienced loneliness, fear and hunger and were vulnerable to abuse by others.

A smaller body of work exists on elderly single homeless people, reflecting their lower numbers. However, this material has highlighted the particularly vulnerable and isolated nature of this group, who are often reluctant to use homelessness agencies because they feel intimidated by younger service users (Wilson, 1995; Crane with Warnes, 1997).

Gender

The available figures suggest that the vast majority of single homeless people are men, although the numbers of single women have risen significantly in recent years (Kemp, 1997; Jones, 1999). Many commentators have argued that this gender imbalance is attributable to the more 'concealed' nature of female homelessness, but there is no firm evidence on the relative incidence of 'hidden homelessness' among men and women. In fact, it is more likely that the principal reason for this disparity is the distinction made between single and family homelessness, as a high proportion of homeless women are accompanied by children, and practically all homeless lone parents are women (Daly, 1993). Thus, Smith et al (1996) found that the gender imbalance in the young homeless population disappeared when homeless families and single people were considered together.

Traditionally, most research on single homelessness has concentrated on men, but a number of studies since the mid-1980s have focused on women's experience of homelessness (Watson with Austerberry, 1986; Dibblin, 1991;

Webb, 1994; Doyle, 1999; Jones, 1999). Principal findings of this work include that homeless women are, on average, younger than homeless men; that they will take extreme measures to avoid sleeping rough; and that homelessness among women is closely related to personal relationship problems, with a very high proportion having suffered physical or sexual abuse. However, there is a dearth of research that directly compares the experiences of men and women and thus offers a rigorous analysis of gender issues within homelessness, although some recent work on youth homelessness has begun to fill that gap (Smith et al, 1996; Smith and Gilford, 1998; Smith, 1999).

Race

The DETR single homelessness study indicated that people from minority ethnic groups were under-represented among rough sleepers, and Smith and Gilford's (1998) work confirmed that young people from minority ethnic groups were less likely to sleep rough than young white people. However, the DETR study found that minority ethnic groups were over-represented among hostel and B&B residents, and this was particularly the case for women (Anderson et al, 1993). By far the largest minority ethnic groups among the single homeless population were black African or black Caribbean. Burrows (1997) also found that 'black' heads of household were three times more likely to have experienced homelessness than 'white' heads of household.

Thus, as with gender, some information on race can be gleaned from general homelessness studies, but, unlike women, there have been few studies of the particular homelessness experiences of minority ethnic groups. Those that have been conducted have focused mainly on young black people (Davies et al, 1996; Rooney and Brown, 1996; Julienne, 1998).

Place of residence

Where someone lives affects their chances of becoming homeless. Heads of household living in urban areas are over two-and-a-half times more likely to experience homelessness than those living in rural areas (Burrows, 1997). The experience of homelessness differs significantly across the regions of England, and is highest in London and the South West.

We have little information, however, about patterns of homelessness at smaller spatial scales. This is important because we know that poverty, and therefore possibly homelessness, is concentrated in particular neighbourhoods (Green, 1994). Evidence on the prevalence of homelessness at ward level would be particularly useful in helping to develop homelessness prevention strategies (see Chapter 8). The 'Safe in the City' research project concerned with young homeless people in London is the only study we have identified that has attempted this (see below).

Risk factors

A range of risk factors are associated with homelessness. Not everyone who experiences these situations will become homeless, but they work to make people significantly more vulnerable to homelessness, particularly if they are experienced in combination (Randall and Brown, 1999a).

The risk factor that unites virtually all homeless people is poverty – people who are not poor can usually avoid homelessness even if they experience personal crises. The other risk factor now common to the overwhelming majority of homeless people is unemployment. This represents a significant change over the past few decades: until well into the 1970s homelessness was associated with low-paid work; now very few homeless people are in employment (Greve, 1991).

A range of other risk factors are identified by current research (see, for example, Anderson et al, 1993; Jones, 1993; Evans, 1996; Randall and Brown, 1996, 1999a). They include:

- sexual or physical abuse in childhood or adolescence;
- family disputes and breakdown;
- a background of local authority care;
- offending behaviour and/or experience of prison;
- previous service in the armed forces;
- lack of a social support network;
- debts, especially rent or mortgage arrears;
- causing nuisance to neighbours;
- drug or alcohol misuse;
- school exclusion and lack of qualifications;
- mental health problems;
- poor physical health.

As well being 'predictors' of homelessness, many of these factors may result from, or be exacerbated by, homelessness, for example offending behaviour or alcohol and drug misuse. Particular attention has been given to the impact of involvement in 'street homelessness cultures' on people's ability to resettle into mainstream society (eg, Randall and Brown, 1999a). Thus, events both prior to and subsequent to homelessness can generate the support needs of single homeless people discussed in Chapter 8.

Triggers

A range of specific events or 'crisis points' can trigger homelessness, and particularly rooflessness (see Anderson et al, 1993; Evans, 1996; Randall and Brown, 1996; Randall, 1998; SEU, 1998; Randall and Brown, 1999a). They include:

- leaving the parental home after arguments;
- marital or relationship breakdown;
- widowhood;
- discharge from the armed forces;
- leaving care;
- leaving prison;
- a sharp deterioration in mental health or an increase in alcohol or drug misuse;
- a financial crisis of mounting debts;
- eviction from a rented or owned home.

These triggers are well understood as a result of the wealth of research on homeless people's experiences and circumstances, and through statistics on the 'immediate' causes of homelessness.

Preventing homelessness at the individual level

There is now a widespread acceptance of the need to focus on the prevention of homelessness. As mentioned in Chapter 5, prevention strategies are argued to be most effective if targeted at individuals experiencing a range of 'risk' factors, particularly at the time of the potential 'trigger' points. Randall and Brown (1999a) is currently the key report on the prevention of homelessness. It outlines a range of preventative initiatives currently in operation and makes detailed recommendations on the further development of prevention services (see

also Lindblom, 1991; Yanetta and Third, 1999). Possible preventative interventions include:

- housing advice and aid services;
- befriending and mentoring services to tackle social isolation;
- support for social rented tenants with mental health and substance misuse problems;
- support for people at risk of losing their homes through relationship breakdown rent arrears or anti-social behaviour;
- education in schools on homelessness and leaving home;
- tenancy support for young people/other groups;
- services to help people return to accommodation in their home area;
- extended support for young people leaving care;
- resettlement programmes for people leaving the armed forces;
- resettlement programmes for people leaving prison;
- family mediation services for young people in dispute with parents or step-parents;
- rent deposit guarantee schemes;
- mortgage rescue schemes;
- outreach/detached work with young people or others at risk of homelessness.

The government is currently considering measures to change the support and financial arrangements for care leavers (DoH, 1999), and is developing measures to prevent homelessness among ex-service personnel and ex-offenders through work with the Ministry of Defence and Prisons Service, respectively (DETR, 1999b). The growing emphasis on prevention of homelessness at central government level can also be seen in remits of both the YHAP and the Scottish Homelessness Task Force (see Chapter 2).

A very important preventative initiative is the 'Safe in the City' partnership programme which seeks to tackle the roots of youth homelessness in London. This programme has three aims: to help young people stay safely at home; to find alternative options for young people who cannot remain safely at home; and to develop the life skills and employability of young people. A research project commissioned by 'Safe in the City' compared the characteristics of young homeless people and young people living in deprived areas in London to develop two measures of risk for youth homelessness: by

home area, and by individual (Bruegel and Smith, 1999). Using the 1991 Ward Deprivation Index and the proportion of children in lone-parent families, they found that it was possible to identify in nine cases out of ten the wards of 'origin' of homeless young people. There were ten factors identified that increased the personal risk of young people becoming homeless, the most significant being not getting on with their mother. The authors recommended that young people at greatest risk of homelessness should be identified before the age of 14 through schools, the careers service or voluntary advice agencies.

While a focus on prevention has clearly been accepted in principle, it is unclear the extent to which preventative mechanisms are currently being put into practice at the local level, particularly outside London. While some areas of prevention work, such as housing advice (Bunnin and Paterson, 1994; Grant, 1996; Dean et al, 1997; Goodlad and Rosengard, 1998), are well researched, we have little evaluative information about many other types of preventative project, such as family mediation. That said, in the area of youth homelessness progress is now being made with the 'Safe in the City' and YHAP research projects (see above).

Summary

There is a significant amount of information available about the characteristics of single homeless people, particularly rough sleepers, although some of the data are now somewhat dated (eg, the DETR survey from 1991). A particular gap in information relates to the distribution of homelessness by small spatial scales, except with regard to youth homelessness in London, and there is a dearth of information on certain groups, such as people from minority ethnic groups. The risk factors and trigger points leading to homelessness are well understood, providing a good informational base for preventative work at the individual level. However, we have little information about the extent to which preventative work is being attempted in practice, particularly outside London and for groups other than young homeless people. Similarly, there is a lack of data on the effectiveness of many particular types of preventative project and approach. This is clearly an area where further research is needed.

7

Wider aspects of single homeless people's lives

Introduction

There is growing recognition that homelessness impacts on a whole range of aspects of the lives of the people who experience it. Many research projects have therefore begun to focus on particular dimensions of homeless people's lives, such as their health or employment experiences, and we review such material in this chapter.

Health

Health is the area of single homeless people's lives that has been best covered in research. Most general reports on single homelessness discuss health, and there have also been several substantial reports devoted to the physical and/ or mental health of single homeless people (eg, Bines, 1994; Connelly and Crown, 1994). The methods used in some early research on health and homelessness has been criticised by Connelly and Crown (1994), with, for example, some reports using bias samples or failing to provide appropriate comparisons with the general population. More recent work has attempted to counter these problems.

Physical health

It has been established that single homeless people suffer from worse health than the general population, and this is particularly true of those who sleep rough (Bines, 1994; Connelly and Crown, 1994; Pleace and Quilgars, 1997). Comparisons of the DETR survey of single homeless people with data from the British Household Panel Study showed that chronic chest or breathing problems, skin problems and musculoskeletal problems were significantly

higher among rough sleepers than among the general population. These are all health problems that are exacerbated by rough sleeping. Digestive problems, frequent headaches and fits or loss of consciousness were disproportionately common among single homeless people generally.

There has been particular concern about tuberculosis (TB) and single homelessness (Connelly and Crown, 1994). One study found that the rate of TB among the most vulnerable group of single homeless people – older rough sleepers, many of whom were alcohol misusers – was 200 times higher than that of the general population, although it was still only 2% (Citron et al, 1995).

The starkest evidence of the poor physical health of single homeless people is found in statistics on mortality. One study indicated that the life expectancy of rough sleepers was 42 years, compared with a national average of 74 years (Grenier, 1996). Rough sleepers were found to be 35 times more likely to kill themselves than the general population (Baker, 1997), and four times more likely to die from unnatural causes such as assaults, accidents, drug or alcohol poisoning (see also Connelly and Crown, 1994). Cold weather does not appear to cause a significant increase in deaths among rough sleepers, which is probably attributable to the life-saving role of cold-weather shelters. These high death rates partly account for the low numbers of elderly homeless people.

Pleace and Quilgars (1997), however, question the assumption that homelessness *causes* ill-health. While they emphasise that the stresses associated with homelessness do create an increased *risk* of ill-health, many of these risks

are shared with other socio-economically deprived chapters of the population. For single homeless people in general, they argue, the key additional threat to their health is caused by inadequate access to healthcare services (see below). People sleeping rough do, however, face unique risks to their health because of the amount of time they spend sleeping outside, exposed to the weather and in danger from assault.

Mental health

The mental health of single homeless people has been an area of particular concern. The DETR survey indicated that single homeless people staying in hostels or B&Bs were eight times more likely, and those sleeping rough were 11 times more likely, than the general population to report mental illness (defined as depression, anxiety and nerves) (Bines, 1994). Relative to the general population, younger homeless people, particularly those sleeping rough, appeared to be the most adversely affected by mental health problems. A high proportion of single homeless people who reported mental health problems also reported heavy drinking: this applied to almost a third of those in hostels and almost half of those sleeping rough. Connelly and Crown (1994) reported a particularly high prevalence of schizophrenia among single homeless people.

Homelessness is likely to have an adverse effect on a person's mental health, as are the other stressful events associated with homelessness, such as relationship breakdown (Bines, 1997). However, the effects of mental illness, in combination with social and economic problems, can also constitute possible triggers for homelessness by making it difficult to maintain accommodation and/or social support networks (Connelly and Crown, 1994). Thus, some research has indicated that the majority of those with mental health problems were ill before they became homeless (SEU, 1998).

The relationship between discharge from psychiatric hospital and homelessness has been much discussed, with de-institutionalisation policies linked with the rise in homelessness across much of the European Union (Harvey, 1999). However, the DETR survey found that very few single homeless people were discharged from psychiatric hospitals directly

into homeless situations (Bines, 1997). This suggests that the problem lies not with discharge procedures, but with the provision of adequate long-term care in the community.

The establishment of the Homeless Mentally Ill Initiative (HMII) in London in 1990 reflected a growing concern over homeless people with mental health problems. The evaluation of the HMII by Craig et al (1995) was largely positive, and found that the clinical teams funded by the initiative had been successful in targeting people with severe mental health problems who had previously been failed by the system of social and psychiatric care.

Health and alcohol

Randall and Brown (1996) found that around half of rough sleepers had a serious alcohol problem (see also Gill et al, 1996). The DETR survey put this figure somewhat lower, with around a third of people sleeping rough reporting heavy drinking or alcohol-related problems, and about one tenth of those in hostels or B&Bs. While these proportions from hostels are comparable with data for the population as a whole, this may be partly attributable to some hostels excluding people with drink problems (Bines, 1997). Only a third of people with a drink problem in hostels and B&Bs, and even fewer rough sleepers, were found to be receiving treatment. Single homeless people with alcohol problems had a particularly high risk of having other health problems.

There has been some specific research on the links between alcohol problems and homelessness, including studies that explore homelessness and street drinking (Wake, 1992); the accommodation needs and preferences of homeless street drinkers (Morrish, 1993); and the prevention of homelessness through supporting tenants with alcohol problems (see Chapter 6). Research studies have found that heavy drinking generally predates, but is often exacerbated by, homelessness. Some studies have highlighted the particular difficulties that homeless street drinkers face in gaining access to detoxification treatment (SEU, 1998). Some progress has been made in recent years in accommodating single homeless people with alcohol problems through the development of 'wet' and 'dry' hostels and day centre provision.

Health and drugs

There is surprisingly little material on drugs in the health and homelessness literature, with several major studies discussing alcohol problems but not other substance dependencies (eg, Bines, 1994; Connelly and Crown, 1994). Gill et al (1996), however, documented that almost half of night shelter residents, over one third of day centre users and a quarter of hostel residents in their study were users of drugs other than alcohol. They also found that 29% of night shelter residents and 24% of day centre users, but only 11% of hostel residents, had developed a dependency on drugs, most commonly cannabis, opiates or stimulants.

While studies of youth homelessness often mention the issue of drugs, only one has focused on this topic (Flemen, 1997). This found that 35% of street homeless young people in central London were heroin users, a level about 18 times higher than among non-homeless young people. It also revealed worryingly high levels of injecting drug use, with all the associated health risks. This was an introductory, basic piece of work and highlighted the need for further studies of drugs and youth homelessness. Surveys conducted by *The Big Issue in the North* have indicated that a majority of its vendors use non-prescribed drugs and that many vendors inject drugs and feel that they have a drugs problem (*The Big Issue in the North*, 1999). This prompted the organisation to conduct a survey of users of drugs services in Liverpool and Manchester (The Big Issue in the North Trust, 1999). They found that almost all were living in poverty and one quarter were homeless. The report called for more non-medical interventions for drug users, such as counselling, and a greater degree of joint working between primary and secondary care services.

There is a large body of literature on drugs misuse, but only a small number of British pieces focus on homeless people (Klee, 1991; Klee and Reid, 1998a) (although there is more US literature: see, for example, Forst, 1994; Johnson et al, 1997). A particularly useful paper is that by Klee and Reid (1998b), which analyses how young homeless people use drugs, particularly opiates, as a form of 'self-medication' to cope with the stress of a homeless life-style. Very high levels of mental health problems, particularly depression, were identified among

their sample of young homeless drug users in Manchester, and almost half had attempted suicide. They argued that absorption into a drug subculture was likely to be one of the most serious and long-lasting effects of homelessness on the lives of these young people.

While much information relevant to homeless people can be gleaned from general drugs material, this is a major body of literature which homelessness practitioners and policy makers are likely to find inaccessible. The dearth of information on drugs and homelessness may be partly attributable to the politically sensitive nature of the subject, particularly under Conservative administrations. However, this gap urgently needs to be addressed, as anecdotal evidence suggests that meeting the accommodation and other needs of dependent drug users, particularly those who inject, is one of the key challenges now facing homelessness services. Patterns of drug supply and use vary significantly across the country, and so different responses will be required. The perception that there is currently a severe shortage of drugs treatment and rehabilitation facilities across much of Britain seems to be widely accepted, although the government's new drugs strategy is attempting to redress this.

Access to health services

The DETR survey found that the vast majority of single homeless people in England were registered with a doctor, or knew of a doctor they could go to if they felt unwell (Anderson et al, 1993). However, North et al (1996) found that only 30% of homeless clients of Accident and Emergency (A&E) departments of hospitals were registered with GPs, as compared with 97% of the general population. In the DETR study, greater use seemed to be made of services provided specifically for single homeless people than mainstream services. However, people sleeping rough were less likely to have access to primary healthcare than those in hostels or B&Bs, and some people reported feeling discriminated against because they were homeless. Problems registering with doctors seemed particularly acute in inner London, where GPs may be afraid of being 'swamped' by homeless people (Hinton, 1994; Pleace and Quilgars, 1996). Moreover, being registered with a doctor does not necessarily mean that the service will be used: many single homeless

people who were registered were not receiving treatment for their health problems (Bines, 1997). There has been some concern that A&E departments are used inappropriately by homeless people, as a substitute for GP services (North et al, 1996), but Pleace and Quilgars (1996) cast doubt on this. Access to health services therefore remains a contentious area within the research literature. Some of these controversies may be resolved when the Department of Health announces the results of a current research project on access to primary healthcare for rough sleepers.

Access to mental health services can be particularly problematic because of the inadequate provision of these services throughout the United Kingdom (Pleace and Quilgars, 1997), and research has indicated that less than a third of single homeless people with mental health problems receive treatment (Anderson et al, 1993). Homeless people with a 'dual diagnosis' – mental health problems *and* a drug and/or alcohol dependency – are often unable to gain access to the help they require. This is because mental health services will generally not accept people with substance dependencies, and addiction services generally refuse those with severe mental illness (Pleace and Quilgars, 1997).

Employment and training

The high level of unemployment among the homeless population has already been highlighted, and the 'no home–no job' cycle for homeless people has long been recognised. Satisfying basic survival needs generally precludes employment for those sleeping rough, and they often face discrimination in recruitment, with employers alerted to their homelessness through the lack of a contact address (Metcalf and Christie, 1993). People staying in hostels live in an environment where hardly anyone works, and the high rents charged create an 'unemployment trap' which make it difficult to take up low-paid work. In addition, many single homeless people have very poor levels of education and qualifications and lack the interpersonal skills required to gain employment. Some have mental health or substance abuse problems which affect their work behaviour, and those who have criminal records face particular problems securing employment.

Attempts to tackle these problems is a developing area of interest within homelessness research and policy. The need to develop 'meaningful occupations', as well as appropriate housing options, in seeking to resettle homeless people is increasingly understood, and work and training are important aspects of this (Macdonald and Jackson, 1998; Schofield, 1999). Also, the main impetus behind the 'Foyer' movement is an attempt to combine accommodation for young people who are homeless or at risk of homelessness with a strong emphasis on work and training (see Chapter 8).

This heightened interest in work and training is driven partly by the current government's emphasis on employment as the key route out of social exclusion. Young people aged 18 to 24 who have been unemployed for more than six months were the first target group for the New Deal, the government's flagship Welfare to Work initiative. Special measures have been introduced for young rough sleepers whereby they have immediate access to the New Deal 'Gateway' (SEU, 1998), and in Scotland a 'New Futures Fund' has been established to provide intensive support to homeless people and other severely disadvantaged groups. The Employment Service is currently piloting schemes of employment support for rough sleepers over 25 (DETR, 1999b). These government initiatives generally have been cautiously welcomed, although there are concerns about the compulsory nature of the New Deal for young people and the lack of a job creation dimension in the programme (Turok and Webster, 1998).

It has been emphasised by many commentators that employment and training programmes must be flexible enough to allow for false starts and second chances among vulnerable groups such as homeless people. A recent study of employment and training schemes for homeless young people in London argued that, while training and employment support typically focused on raising skills levels and job-seeking support, initiatives should support young homeless people to sustain employment in the longer term (Randall and Brown, 1999b). Key features for effective advice and support were identified as: drop-in and outreach work, whereby young people can get immediate help without appointments in advance; individual employment action plans; identification of

support needs such as mental health or substance abuse, and referral to specialist services; and joint work with hostel keyworkers and housing resettlement services (see also Macdonald and Jackson, 1998).

Education

Single homeless people, particularly rough sleepers, generally have very low levels of educational attainment and poor schooling experiences. The DETR survey found that only 46% of single homeless people in hostels and B&Bs, and only 38% of those sleeping rough, had any educational qualifications (Anderson et al, 1993). This compares with 66% of the general population. One in five of the general population have a higher education qualification, but only one in twenty of the single homeless sample had such a qualification. One study of rough sleepers found that more than a quarter had been excluded from school (Randall and Brown, 1999a).

However, most research addressing homelessness and education is limited to children (eg, Thompson et al, 1998). The focus for single homeless people seems to be on employment and training, rather than on promoting their access to further or higher education. This may suggest that there is little expectation that underachievement at school can be compensated for afterwards. This is understandable, given the hostility to formal education felt by many single homeless and others with poor educational experiences. However, there may be a case for becoming more ambitious for those single homeless people, particularly in the youngest age groups, who may benefit from broader educational opportunities.

Social security benefits

Given the high levels of unemployment among homeless people, social security benefits are usually their main source of income. The cuts in Income Support discussed in Chapter 5 were given a high profile in reports on homelessness in the late 1980s and early 1990s, especially in relation to young homeless people (see, for example, Thornton, 1990; Bannister et al, 1993; Strathdee and Coster, 1996).

While many reports still make reference to the unsatisfactory nature of income maintenance benefits, the focus has shifted somewhat to Housing Benefit since the changes in 1996 (see Chapter 5). A number of publications have emerged recently which consider the impact of the 'single room rent' on young people's ability to gain access to the private rented sector (Griffiths, 1997; Foord et al, 1998; Kemp and Rugg, 1998). Meanwhile, the 'unemployment trap' created by dependence on Housing Benefit to pay high rent levels in hostels and supported accommodation, as well as in much housing association or private rented housing, remains a serious problem (Randall and Brown, 1999b). This is true even of Foyers, which were created partly in an attempt to transcend this problem (see Chapter 8).

Family relationships

Many research reports make some comment on the family relationships of single homeless people, and the important role played by family and marital breakdown in 'triggering' homelessness has already been discussed. The social isolation of single homeless men is often noted in reports, but seldom explored in any depth. There is more discussion of the family relationships of homeless single women, which demonstrates the domestic violence they have often suffered (eg, Jones, 1999). There is also some emphasis on family relationships within work on older homeless people, often highlighting the complexities of their relationships with grown-up children (Wilson, 1995).

The family relationships of young homeless people have been much discussed, particularly in relation to patterns of leaving home (Jones, 1995). Researchers have consistently found that most young homeless people leave the parental home because of family conflict (Bannister et al, 1993; Stockley et al, 1993; Smith et al, 1998; Fitzpatrick, forthcoming). As indicated in Chapter 6, there is a wealth of data establishing that care-leavers, young people from step-families and those who have suffered violence or sexual abuse, are disproportionately represented among the young homeless (Hendessi, 1991; Caskie, 1992; Kirby, 1994; Hutson and Liddiard, 1994; Jones, 1993). However, there is evidence that young people often do gain some informal

support from their families even when homeless, and that their relationship with their parents can improve dramatically once they have a secure home of their own (Fitzpatrick, forthcoming; Hutson, 1999).

Smith et al (1998) took the family background of young homeless people as their central focus. They argued that 'family disruption', rather than family structure, is the key issue in parental relationships. They found that young homeless people from 'non-disrupted' families (where they had lived with the same parents or parent and step-parent since they were around three years old) were most likely to have left home as a result of their own behaviour rather than that of their parents. This usually centred around young men's involvement in crime or drugs and young women's choice of boyfriends. In contrast, young people from families disrupted by parents separating and/or forming new relationships were most likely to have became homeless because of conflict with their parent or their parent's new partner, and in the majority of cases this involved physical or sexual abuse.

Friendship networks

Little research has been conducted on the friendship networks of single homeless people. However, there has been some discussion of 'street cultures', particularly in central London. Randall and Brown (1999a, p 23), for example, comment on the importance of preventing newly arrived young people from joining the 'established culture of street homelessness' in the West End of London. A 'three week rule', has been suggested as the time it takes for people sleeping rough to adapt to their circumstances in order to survive, making it more difficult for them to integrate back into mainstream society (Keyes and Kennedy, 1992). Resettlement studies also highlight the sense of isolation and loss experienced by ex-homeless people who leave their 'street friends' behind (see Alexander and Ruggieri, 1998). Some feel so lonely that they display 'continuing homelessness behaviour', for example by sleeping out with their homeless friends at weekends.

Fitzpatrick (forthcoming) makes some similar points in her detailed analysis of the friendship networks of young homeless people in Glasgow. She found that the friendship networks of those

who were sleeping rough or staying in hostels in the city centre tended to become concentrated among other homeless young people, making it more difficult for them to move on from their homeless situation. On the other hand, young homeless people who remained in their local area (a council housing estate) tended to retain long-standing friends from childhood. They often stayed temporarily with the families of these friends as part of their 'homelessness pathway', but they found it acutely 'embarrassing' to impose on these households. The strain of 'sofa surfing' around friends' and relatives' houses has also been highlighted in research on 'hidden homelessness', particularly among women (Webb, 1994; Jones, 1999).

The issue of homeless people's friendship networks remains an underdeveloped area in research, even though it is a central issue within resettlement work. The positive and negative impacts and influences that friends can bring to the lives of single homeless people need to be much better understood, with a view to facilitating constructive social contacts through 'befriending' and other similar approaches. It is crucial to promote informal rather than professional support for single homeless people – through both family and friends – as far as possible (Hutson, 1999).

Crime and the criminal justice system

Crime and the fear of crime have consistently been shown to be part of the experience of homelessness for many people, particularly those sleeping rough. Surveys have indicated that around half of rough sleepers have been in prison or a remand centre at some point (Anderson et al, 1993; Randall and Brown, 1999a). Carlen (1996), in her study of young homeless people, discussed strategies of 'survivalism' which sometimes involved young people in criminal activities such as begging, prostitution, drug taking, drug dealing, shoplifting, burglary and robbery.

Experience of prison and the criminal justice system can itself increase a person's chances of becoming homeless. One study indicated that 40% of prisoners expected to be homeless on release, with fewer than half of ex-prisoners able to return to the address at which they lived before they entered custody (Carlisle, 1996).

Not only does offending make it more likely that someone will become homeless, but homelessness makes it more likely that they will re-offend, with many rough sleepers moving between the streets, hostels and prison (Randall and Brown, 1999a). As mentioned in Chapter 6, new measures intended to prevent homelessness among prisoners are being developed by the prison and probation services.

It is also important to note that homeless people are highly vulnerable to victimisation, including verbal abuse, robbery, sexual harassment and violence (Reid et al, 1997). This is especially true of those sleeping rough or engaged in street-level economic activities associated with homelessness, such as begging or selling *The Big Issue*. The particular risk of rape and sexual harassment faced by women is one of the reasons why they are even more reluctant than men to sleep rough (Smith and Gilford, 1998).

Begging

Given its visibility in many of Britain's towns and cities, there is surprisingly little empirical research on begging. The DETR single homelessness study found that begging was far more closely associated with rough sleeping than with other forms of homelessness (Anderson et al, 1993). A study by Crisis in central London found that most people who begged were single men, and they were usually very isolated from their families (Murdoch, 1994). A recent book on begging focuses mainly on theoretical, historical or comparative contributions, and offers only limited new empirical evidence (Dean, 1999).

Current qualitative research by the University of Glasgow is exploring the links between begging, homelessness and selling *The Big Issue* in Glasgow and Edinburgh (*The Big Issue* is discussed in Chapter 8). This research suggests that the political sensitivity of begging may have inhibited research on the topic, with homelessness agencies anxious to avoid conflating homelessness with the 'street culture' of begging and street drinking. It is important to bear in mind that, unlike in England, begging is not illegal in Scotland.

Summary

There is a great deal of information available on the health of single homeless people, although this has surprisingly little to say on drug misuse. Reports on employment and training for homeless people have begun to emerge, but there is scope for more work in this area, particularly in relation to older single homeless groups. Little consideration has been given to promoting broader educational opportunities for homeless people. The family relationships of single homeless people have received some attention, particularly in relation to the young homeless, but far less is known about their friendship networks. There are clear links between homelessness, particularly rough sleeping, and experience of the criminal justice system, and the government is now developing measures to prevent ex-prisoners from becoming homeless.

Meeting single homeless people's accommodation and support needs

Introduction

Policy responses to single homelessness have already been discussed in relation to the prevention of homelessness (Chapters 5 and 6) and particular aspects of homeless people's lives (Chapter 7). This chapter therefore concentrates on responses that seek to meet the accommodation and support needs of single homeless people.

Trends in responses to single homeless people

In the 1970s and early 1980s there was widespread acceptance of the argument that most homeless households simply required adequate and affordable housing, rather than support services (Neale, 1997a; Pleace, 1997). The Homeless Persons legislation accordingly effected a shift in responsibility for homeless people from local authority welfare to housing departments. However, this consensus started to break down as research studies were published which indicated that many single homeless people did in fact have a range of support needs (Anderson et al, 1993; Pleace, 1995; Vincent et al, 1995). The move to multi-agency working discussed below signals awareness of the necessity to look beyond housing solutions to homelessness, and a recognition of the complexity of many single homeless people's needs.

The types of support that single homeless people may require seems to be fairly well understood. Pleace (1995) suggested five main categories: housing need; support needs, including healthcare and welfare rights services;

daily living skills; financial needs; and social needs (for relationships and activities) (see also Fitzpatrick, forthcoming; Franklin, 1999). Support with employment and training is another type of assistance that should be added here. There is little dispute that experiences both prior and subsequent to homelessness can generate these support needs (see Chapter 6).

However, the prevalence of these support needs within the single homeless population is a matter of some controversy. While it seems generally accepted that some homeless people need only accommodation, where others have more complex needs, the emphasis given to the role of support varies dramatically between commentators. For example, the Scottish *Code of guidance* states that "The defining characteristic of homeless people is that they need a home, and homeless people as such should not be regarded as ... in need of other types of support" (Scottish Office, 1997, para 4.1). And yet its accompanying good practice note comments that "Homelessness is rarely just a housing problem" (Yanetta and Third, 1999, p 25).

Some academics seem very sceptical about the current focus on support services. Hutson (1999), for example, comments that support is consistently a minority request when single homeless people register their own needs. She also argues that: "There is a danger that an emphasis on support will place the blame for homelessness on the individual" (p 219) (see also Jacobs et al, 1999). She further notes that support needs are much more often discussed in relation to single homeless people than homeless families, and asks "does child-bearing suddenly increase the capacity of a person no longer to need support?" (p 219).

The nature and level of support needs will, of course, vary from group to group of single homeless people. For example, older single homeless people who have slept rough for many years probably have the most intensive support needs of all (Crane with Warnes, 1997). Given the importance of geography in the underlying causes of homelessness (see Chapter 5), the levels and composition of support needs among the single homeless population are likely to differ from place to place. In addition, these needs are likely to change over time in response to differing social and economic conditions. While much information on the prevalence of support needs can be gleaned from existing evidence, we lack a clear analysis of the overall patterns and variations in support needs. Such an analysis is crucial in strategic planning for single homelessness services at both national and local level.

Access to mainstream accommodation

Research has consistently shown that the aspiration of most single homeless people is for self-contained, mainstream accommodation (Gilchrist and Jeffs, 1995; Hutson, 1999). Indeed, official documents now emphasise the desirability of housing homeless people as far as possible in ordinary housing (Scottish Homes, 1999; Scottish Office, 1997), although researchers often highlight the difficulties that homeless people with support needs may face with independent living (see below).

The problems faced by single people on low incomes in gaining access to the main housing tenures were outlined in Chapter 5. While many single homeless people would like a local authority or housing association tenancy, this option is often not available to those living in areas where there is a shortage of social housing (Anderson and Morgan, 1997).

Considerable efforts have therefore been made to overcome the barriers to the private rented sector faced by single homeless people (described in Chapter 5), most notably through rent deposit schemes. Randall and Brown (1994) evaluated a pilot rent deposit fund established under the RSI in London. The scheme was successful in providing access to private renting for those single homeless people without special support needs. However, guarantee schemes – which provide indemnities rather than lump sums to landlords – offered better value for money with much reduced scope for abuse. Rugg (1996) provides a more wide-ranging analysis of the plethora of private rented sector 'access schemes' developed in the 1990s for single homeless people, including accommodation registers and rent in advance schemes. While a private tenancy may meet the needs of many single homeless or potentially homeless people, it should be borne in mind that the 'single room rent' restriction under Housing Benefit regulations pushes the under-25s into shared living arrangements which can be problematic (see below). Incidentally, the Scottish Executive has recently announced that it is to encourage the expansion of rent deposit schemes as part of its measures to combat homelessness.

Temporary accommodation

Local authorities are obliged by the Homeless Persons legislation to secure temporary accommodation for homeless households in priority need pending the allocation of long-term rehousing. Single people without priority need are not even entitled to temporary accommodation, but some authorities do secure temporary accommodation for single people, often in B&B hotels or hostels. (Hostels are discussed below, as they often provide support as well as accommodation.)

The inappropriateness and poor standards of B&B accommodation have long been acknowledged, and there is clear indication in official guidance that they should be used only as a last resort. While local authorities' use of B&B accommodation for statutory homeless households has significantly reduced in recent years, Carter (1997) estimated that almost 77,000 non-priority homeless people were living 'self-placed' in B&Bs in England and Wales in 1996. She highlighted the dilemma regarding B&Bs: such accommodation is unsatisfactory and expensive, but may be the only option for some people at the very bottom of the housing market. She therefore called for policies to protect those already reliant on B&Bs, as well as for the development of suitable alternatives to reduce the use of B&Bs.

Currie and Pawson's (1996) report on the use of temporary accommodation by local authorities in Scotland is currently the key source on this topic. They provide policy and practice recommendations on a range of alternatives to B&Bs, including furnished flats, hostels, supported accommodation projects for young people, mobile homes and chalets, short-term local authority lets and private sector leasing arrangements.

Combining accommodation and support

Various projects and approaches have sought to combine homeless people's housing and support needs. While there is considerable overlap between supported accommodation and temporary accommodation, they are considered separately, as some temporary accommodation offers no support and some supported accommodation can be permanent.

Hostels

For many years large hostels in the public, voluntary and private sectors have provided institutionalised accommodation for a range of homeless groups. The poor physical and social conditions prevailing in many of these traditional hostels, together with a general trend towards de-institutionalisation, provoked widespread calls for them to be replaced with more suitable alternatives. Thus, since the mid-1980s many large hostels have closed down under a central government 'Hostels Initiative'. This initiative envisaged that housing associations would offer a range of alternative accommodation, which to a limited extent they have done (Vincent et al, 1995). The DSS-funded 'resettlement units', which offered direct-access dormitory accommodation to homeless single men, were also closed down and were replaced by a variety of smaller schemes. However, some disagreement remains regarding the role of hostels in providing for single homeless people. Neale (1997b), for example, has argued that hostels can provide an appropriate form of accommodation for a minority of single homeless individuals, particularly older people who have lived in institutions for a long time. Research in Glasgow also found that hostels have advantages for some single people who do not wish to live alone and require a low degree

of support (Scottish Council for Single Homeless, 1998; see also Dix, 1995). Thus, the need to improve as well as replace hostels has emerged as an important theme.

There is a substantial literature on hostels which offers good practice advice on many aspects of their operation, including funding, physical design and standards, the provision of support services, and management and staffing (Garside et al, 1990; Evans, 1991; Smith et al, 1992; Vincent et al, 1995; Bacon et al, 1996). This literature generally recommends that hostels should move towards smaller units with higher physical standards, offer residents greater levels of privacy, and provide professional support workers for those with high support needs (Scottish Council for Single Homeless, 1998). Neale (1997b) also highlights the importance of the more qualitative aspects of hostel life, such as the social atmosphere and opportunities for resident participation and choice.

Many of the smaller, highly supportive, hostels that have been developed in recent years are aimed at the 'new' homeless groups, such as young people or women, and have precise referral criteria with carefully planned access procedures. There is some concern that the 'traditional' homeless groups, such as older men with high support needs, have lost out in the move away from large hostels (Foord et al, 1998). Vincent et al (1995), in their study of the closure of the Alvaston Resettlement Unit, found that the replacement accommodation did not meet the needs of people who used the Unit as emergency accommodation, nor of those who treated Alvaston as their permanent home and appreciated its liberal regime and opportunities for purposive activity. These authors emphasised the continuing need for direct access accommodation, and challenged the assumption that self-contained accommodation or smaller hostel settings should always be seen as more appropriate than large hostels. There has been a growing concern in recent years about exclusions from hostels, particularly direct access hostels, often linked to rent arrears, alcohol or drug use and mental health problems (Carter, 1999).

In recent years emergency shelters have been established with more 'relaxed' regimes to meet the needs of long-term rough sleepers who cannot cope with more structured hostel

environments, particularly those who wish to drink or have pets (SEU, 1998; Pleace, 1998; CRASH, 1999). Cold-weather shelters in particular are acknowledged as very valuable, and in fact life-saving, interventions (Grenier, 1996). However, there is a continuing shortage of direct access accommodation, in London at least, partly because of the 'silt-up' of bed spaces whereby existing residents are not moving on to other accommodation (Foord et al, 1998).

Thus, the key feature of hostels nowadays is their diversity, with wide variations in both the quality of accommodation and the level of support offered, and ever more precise targeting to different chapters of the homeless population. While the dominant trend is towards the provision of self-contained accommodation, there is acknowledgement of the continuing role of hostels in providing accommodation for some groups.

Foyers

It may seem inappropriate to give foyers separate attention here, given their relatively small numbers compared with hostels in general. However, the foyer movement has expanded very rapidly in the 1990s, attracting a considerable amount of research attention.

Foyers aim to integrate accommodation for young people with training/employment and social support. The concept is based on a French network of hostels for young workers which was established in the 1950s to mobilise labour in the postwar period. The foyer concept was introduced into Britain in by Shelter in 1991, and the Foyer Federation was established in 1992 to promote their development. The first set of foyers in Britain took the form of large hostels which provided employment and training services but were otherwise only lightly supported. Some new foyers are adopting a more flexible structure, and the levels of support they offer vary considerably. There has always been some ambiguity about whether foyers should cater for young homeless people, given the low levels of support often provided. However, in practice foyers have accommodated many young people with experiences of rooflessness (Anderson and Quilgars, 1995).

Supporters of foyers argue that their principal advantage lies in their 'holistic' approach to

addressing young people's housing and employment needs (Ward, 1997). The evaluations of foyers carried out so far have generally been positive, finding them to be successful in assisting more disadvantaged young people to compete for existing employment and housing opportunities (Anderson and Quilgars, 1995; Anderson and Douglas, 1998).

However, significant concerns remain about the institutional form of accommodation often provided by foyers, as this runs counter to the general trend towards self-contained ordinary housing highlighted above (Fitzpatrick, forthcoming). Concerns have also been raised about foyers becoming 'tied' accommodation which young people could lose if they fail in their job or training (Gilchrist and Jeffs, 1995). A potentially important advantage of foyers in overcoming the unemployment trap has not been realised because funding structures have meant that charges are often too high to be met by young people in employment or training (Chatrik, 1994).

The continued expansion of foyers therefore carries far from unanimous support, and there is a widespread view that their value is yet to be established. A major evaluation of the development of foyers in England is due to be published shortly by DETR and the Department for Education and Employment (DfEE) and is likely to significantly shape the future of this initiative in Britain.

Shared housing projects

Supported accommodation for homeless people has sometimes been provided in shared houses or flats, and supervised shared flats are often used as move-on accommodation from residential projects. Dix (1995) suggests that there may be a role for shared housing for recovering alcoholics and street drinkers, and Deacon et al (1995) suggest that 'group homes' and other 'less than ordinary housing' can provide for some single homeless people. Shared housing is seen to help overcome problems of loneliness, and enables people to share living expenses.

We identified no specific research on shared housing projects. However, the difficulties of shared living arrangements have been

highlighted by several authors (Jones, 1995; Randall and Brown, 1996; Fitzpatrick, forthcoming; Hutson, 1999), and there is evidence that the vast majority of single homeless people do not want to share accommodation (Dix, 1995). Problems have been noted with some of the shared accommodation provided under phase one of the RSI (Randall and Brown, 1996). This is hardly surprising. Homeless people in shared houses supplied by voluntary or statutory services on the basis of housing need are unlikely to have much choice about whom they share with, and this has been identified as the crucial factor affecting satisfaction with shared accommodation in the private rented sector (Kemp and Rugg, 1998). Also, given the personal problems and difficult behaviour of some homeless people, one can well understand why they are reluctant to share with each other, with concerns often focusing on sharing with intravenous drug users. Hutson (1999) notes that, while shared houses can sometimes work well, particularly if adequately supported, difficulties with shared arrangements have led to a further shift to self-containment.

Furnished flats/houses

Furnished accommodation is often identified as an important option for homeless or potentially homeless people as many, particularly rough sleepers, do not have the possessions required to set up home (Randall and Brown, 1993; Dix, 1995). Given the difficulties faced by many single people in gaining access to furnished accommodation in the private rented sector, Rooney (1997) argued that both local authorities and housing associations should expand their supply of furnished tenancies. Anderson and Morgan (1997) reported that very few British local authorities provided furnished tenancies, although Currie and Pawson (1996) found that councils in Scotland frequently used temporary furnished flats for statutory homeless households. Furnished accommodation in the social rented sector is sometimes organised on a 'cluster' model, but is more often 'dispersed' in order to avoid stigmatisation.

There is limited evidence available about the effectiveness of furnished accommodation in meeting the needs of homeless people. However, there is some discussion of the furniture needs of ex-rough sleepers in the

resettlement literature (see below), and a local study in Oldham provides useful information about the furniture needs of young people (Key to the Door, 1997). Where the additional costs of furnished accommodation are met through high rents charged to Housing Benefit, this risks creating an 'unemployment trap' (see Chapter 5).

Floating support in independent tenancies

With the movement towards self-contained accommodation for single homeless people, 'floating support' schemes have become increasingly popular. The key feature of this type of support is that it is tied to the individual and not the property. The idea is that a person can move into ordinary housing and receive support for as long as is necessary, with the level of support being adjusted as their needs change. While floating support can in principle address a wide range of support needs, because of relevant funding mechanisms it is sometimes more narrowly defined as 'housing support' to encourage independent living skills (Morris, 1995; Douglas et al, 1998; Quilgars and Pleace, 1999).

Douglas et al (1998) explored the experiences of users of a range of floating support schemes in Scotland, including vulnerable young people, people with mental health problems and people with physical impairments. They found that, at a practical level, floating support could be judged very successful in providing a flexible response to individuals' needs. However, its success in meeting emotional needs was more varied, and the need for moral support to help people overcome the isolation and loneliness of independent living was not always met by the range of services provided. Fitzpatrick (forthcoming) explored the use of dispersed furnished flats with floating support by Glasgow City Council. This form of provision was very popular among the young homeless people she interviewed. However, such 'scatter flats' did not help young people overcome problems of loneliness and boredom, and high rents worked to create an 'unemployment trap' (see above). England (forthcoming) evaluated Capital Youth Link, a voluntary sector project offering floating post-resettlement support to young people in London. She found that the service contributed a great deal to helping young people settle into their homes and maintain their tenancies.

While Quilgars and Pleace (1999) have pointed out that floating support services are much cheaper to run than hostels and other residential types of provision, evidence on their long-term effectiveness remains limited. More research evaluating the effectiveness of 'floating support' aimed specifically at single homeless people is required, including a consideration of what types of agencies or workers are best suited to providing this support. At the same time, individualised living arrangements, even with flexible support, will not meet the needs of all homeless people (Vincent et al, 1995; Neale, 1996; Franklin, 1999). Some people appreciate a degree of communal living, and where very intense levels of support are required it probably does have to be supplied on a residential basis.

Support services

Day centres

Day centres represent an important yet often neglected area of homelessness provision. There are over 250 day centres working with homeless people across the UK, and around 10,000 people use these services each day (Cooper, 1997). The structure and organisation of day centres varies a great deal, but they have in common an 'open door' building-based facility, offering a variety of services such as support, advice, practical help, food and somewhere warm to shelter and socialise. Waters (1992) found that day centre users sought satisfaction of four main needs: cheap or free practical facilities; opportunities to socialise; stimulating, enjoyable or useful ways to spend time; and advice and information services. This report identified an overall shift in day centres towards more proactive approaches beyond basic provision of food and shelter – to, for example, providing medical services and advice work. A key issue for day centres is maintaining a balance between 'open door' approaches and targeted work for particular vulnerable groups, such as women and ethnic minorities.

The National Day Centre Project was set up by CHAR (now National Homeless Alliance) in 1994 to support day centres for homeless and vulnerable people. They published a guide to good practice in day centres covering matters such as safety, user participation, volunteers, equal opportunities, healthcare, developing links

with mainstream services and resettlement (Cooper, 1997). They have also published a guide to day centre funding in England and Wales (Gordon, 1997); a guide to safety in day centres (National Homeless Alliance, 1997); a directory of day centres in the UK (Palframan, 1998); and a guide to day centre design (National Homeless Alliance, 1999). There is, however, little other research or published material available on day centres.

Street outreach services

Street outreach services seek to contact rough sleepers and other vulnerable homeless people on the streets in an effort to help in crisis situations and to connect them to appropriate longer-term services. The RSI invested significant funds in outreach services, and street outreach work is still concentrated in inner London and city centres with RSI funding. Outreach workers are also funded under the Homeless Mentally Ill Initiative and the Drug and Alcohol Specific Grant programme. In a number of cities detached youth work teams specifically target young homeless people.

The key role played by outreach workers has been highlighted in a number of studies, particularly in relation to the resettlement of long-term rough sleepers (Randall and Brown, 1995; Crane and Warnes, 1999). However, some controversy remains over the appropriate role of outreach services, that is, the extent to which they should focus on 'persuading' homeless people to change their life-styles. For example, the SEU (1998) noted that:

> Outreach workers vary in the degree of assertiveness they use to persuade rough sleepers into shelter and challenge attachment to life on the streets. (SEU, 1998, p 9)

Resettlement services

A developing focus of work in recent years has been 'resettlement' services, which seek to help vulnerable homeless people move on to, and sustain, settled accommodation. While some commentators focus on resettling people into permanent, mainstream accommodation, others emphasise that the 'end-point' of a resettlement process may still be some form of 'less than ordinary housing'. Resettlement services

typically offer a mix of practical and emotional support, which should be tailored to meet the needs of individual homeless people. The provision of 'floating support' (see above) is an important aspect of most resettlement services (Quilgars and Pleace, 1999).

Resettlement services first emerged following the hostel closure programmes described above, although evaluation studies showed that rehousing schemes were not always successful in meeting the needs of ex-residents (Vincent et al, 1995; Foord et al, 1998). The need for resettlement work was also highlighted by the high rates of abandonment and other housing management problems experienced by local authorities and housing associations who had let properties to vulnerable and/or young single homeless people (Quilgars and Pleace, 1999; Hutson, 1999). In addition, the growing awareness of high levels of homelessness affecting people leaving a variety of institutional settings – particularly local authority care, prison and the armed forces – led to the establishment of specific resettlement services for these groups (see Chapter 6).

The rapid development of resettlement services started from a low base. Reporting in 1990, Garside et al (1990) noted that most hostels provided limited or no resettlement support. Randall and Brown (1993) found that in the first phase of RSI funding there was wide variation in the effectiveness of resettlement in moving people on to other accommodation. However, the increased emphasis placed on resettlement support in the second phase of the RSI resulted in 89% of rehoused rough sleepers saying they had received sufficient resettlement help, compared with only 60% in phase one (Randall and Brown, 1996).

There is now much evidence available on the experience of resettlement work, and some good practice guidance (eg, Schofield, 1999). Randall and Brown (1995) concluded that resettlement workers could find their clients' problems open-ended, and specialist agencies should be engaged to deal with alcohol or drug problems. They recommended that resettlement workers focus on tackling financial difficulties, reducing social isolation and helping clients back into the job market. They noted that some traditional resettlement work had paid a lot of attention to cooking and cleaning skills, but there was little

demand for this from tenants and it seemed to have little impact on the success of resettlement.

Dane (1998) found that loneliness was the most important factor precipitating tenancy breakdown among former rough sleepers. She highlighted the need for clients to move towards resettlement at their own pace, and the importance of adequate organisation of tenancy agreements and furnishings, flexible support and choice over area (or possibility of transfers) in facilitating successful tenancies. Research by Crisis emphasised that the move-in period was crucial, as rough sleepers faced practical problems in settling into their new home, anxieties about their new responsibilities and sadness at leaving their friends on the streets behind (Alexander and Ruggieri, 1998). Settled life often brought problems of isolation; nevertheless, self-contained, dispersed accommodation remained more popular than shared living arrangements or RSI schemes which housed former rough sleepers in close proximity to each other. The importance of having something to do – be it employment, voluntary work or education – was repeatedly highlighted.

The experience of the Lancefield Street Centre, carefully documented by Crane and Warnes (1999), provides a model of resettlement services for older rough sleepers which could be adapted to the needs of other homeless groups. The Centre was found successful in providing a 'complete pathway' from streets to long-term rehousing through a composite of services, including outreach work, a drop-in centre, an on-site temporary hostel and a resettlement programme.

Local homelessness strategies

There has been increasing interest in recent years in developing local homelessness strategies, with a clear emphasis on inter-agency working to meet the range of needs. This resulted partly from increasing recognition that multiple needs may best be addressed by a complementary range of support services, but pressure for greater effectiveness also originated from financial constraints, with funding mechanisms requiring agencies to work in partnership (London Borough Grants, 1999). Government initiatives like RSI require local authorities to produce rough sleeping strategies,

especially in London and increasingly elsewhere. In Scotland the Homelessness Task Force is considering requiring local authorities to produce local homelessness strategies. This is part of an overall drive towards 'joined-up' thinking on the part of government which it is hoping will permeate all aspects of public policy. Other government initiatives, like the Homeless Mentally Ill Initiative and community care policies, have also encouraged shifts towards joint agency working.

Strategies are typically led by local authority housing departments, but aim to involve as many agencies as possible. While strategies vary considerably, basic components include identification of needs and gaps in provision, listing of priorities and the development of an action plan (McCluskey, 1997). Numerous examples of local homelessness strategies do now exist, although it was beyond the remit of this review to consider these strategies in detail.

Although the benefits of multi-agency working are widely accepted, evaluations have highlighted problems of lack of resources and difficulties in establishing cooperation between agencies (London Borough Grants, 1999; McCluskey, 1997). Also, proposed models of strategic working usually centre on highly specialised but closely connected agencies, which can effectively work only in large cities with a complex network of agencies (Bunnin and Paterson, 1994). Despite these difficulties, the benefits of effective, strategic working are considered so important that there is a clear consensus in the literature that this is the most sensible way forward.

Self–help initiatives

The best known self-help initiative for homeless people is **The Big Issue**. This is a street paper established in 1991 to offer homeless people an opportunity to earn an income, and thus help to build their self-esteem and confidence. Given the high profile of *The Big Issue*, it is surprising that there has been so little research on it. Only one independent study of *The Big Issue* has so far been carried out, and this provides some evidence that selling *The Big Issue* has a positive effect on the mental health of homeless people (Stitt et al, 1996). *The Big Issue in the North* has conducted several pieces of research with its

vendors in Liverpool, Manchester and Leeds. The first of these reports concluded that the great majority of vendors wanted more out of life than selling *The Big Issue*, and most felt optimistic that they still had a good future ahead of them (Turner et al, 1997). *The Big Issue in the North* plans to carry out biannual surveys which will enable changes over time in the characteristics of its vendors to be tracked (*The Big Issue in the North*, 1999). The ongoing University of Glasgow study is examining the impact of *The Big Issue* on begging in Glasgow and Edinburgh (see Chapter 7).

Emmaus Communities aim to offer homeless people "a practical way in which they can move from homelessness and dependency on state benefit to taking responsibility for their own lives, through living and working in self-supporting communities" (Emmaus UK, 1998, p 12). This idea originated in France, and there is now an international network of more than 400 Emmaus Communities of homeless people in 44 countries (Rickford, 1999). There are seven such communities in Britain, with two more due to open in 2000. They typically accommodate 15 to 30 'companions' in what is intended to be a supportive 'family environment'. Every community has its own revenue generating business in which all 'companions' are expected to work a full 40-hour week, mainly collecting, refurbishing and reselling second-hand furniture and electrical goods.

There are a number of other self-help initiatives in the homelessness field, for example **self-build schemes**, whereby homeless people are assisted to build their own houses, the intention being that they will acquire skills in the process which will enable them to gain work in the construction industry.

Summary

Responses to single homeless people have been the subject of much research, but systematic, independent evaluations are generally limited to high-profile initiatives, such as the RSI or foyers. More rigorous research is needed on non-institutional approaches to meeting homeless people's accommodation and support needs, such as furnished, shared or supported independent tenancies. The understanding of overall patterns of support needs in the single homeless population remains incomplete.

Conclusions and recommendations

Introduction

This chapter summarises the most significant themes and findings to emerge from this report. We begin by discussing the trends in homelessness research that have been identified in the process of the review. We then summarise the quality and coverage of single homelessness research, including the gaps and duplications in current research and the issues that remain unresolved by the literature. We conclude with a series of recommendations targeted at practitioners, policy makers and research funders.

Trends in single homelessness research

Increasing specialisation is the key trend in single homelessness research as the volume of research has expanded and researchers have defined more precisely the areas they seek to cover. Researchers have often identified 'new' or 'hidden' groups of homeless people, as they have sought to uncover the heterogeneity of the homeless population and the diversity of causes and solutions. The focus has sometimes shifted on to a particular group as it became obvious that their numbers were expanding rapidly, such as young people in the late 1980s. At the same time, certain homeless groups remain relatively neglected (eg, minority ethnic groups). In recent years there has been a clear shift in the focus of homelessness research towards rough sleepers, driven largely by the agenda of central government and the RSI.

There has been a growing awareness of the multi-faceted nature of many homeless people's problems, and a shift from viewing homelessness as purely a 'housing problem' to more complex social and economic analyses. This has prompted an increasing emphasis both in research and policy on holistic solutions and in inter-agency working to meet the range of homeless people's needs. This trend has been reinforced by funding structures that require strategic partnership working. In addition, specialist services dealing with particular aspects of homeless people's lives, such as employment or health, have been developed.

At the same time, there has been a move away from institutionalised provision for homeless people towards accommodating them in 'ordinary' housing or as near an approximation to it as possible. Small, highly supported projects have been developed, and there is increasing research interest in resettlement work and floating support which enables ex-homeless people with support needs to stay in mainstream, self-contained accommodation. However, foyers are interpreted by some as representing a partial return to institutionalising homeless people, and thus have been the subject of intense debate.

In both research and policy, there has been a developing emphasis on the prevention of homelessness, although it is unclear how widespread preventive approaches are in practice. This is part of a growing awareness of the importance of the dynamics of homelessness, so that research and services focus not just on crisis intervention but also on prevention (at one end of a homeless career) and resettlement (at the other). There is now a particular research interest in recurrent homelessness.

Generally speaking, only government-sponsored research attempts a genuinely national coverage (usually meaning England, England and Wales, or Scotland). Non-governmental academic or voluntary sector studies usually focus on particular localities, although this work is sometimes national in that it includes case studies from around the country. As discussed in Chapter 5, early research on single homelessness tended to concentrate on London, but with the subsequent growth of homelessness in other parts of the country this London emphasis began to dilute. However, the thinking of national organisations based in the capital can still sometimes seem London-dominated. For example, the model often proposed for strategic working is one of highly specialised but well connected agencies, but this can really work only in big-city settings with large concentrations of homeless people, such as London. Also, the decentralisation of homelessness research has to some extent been countered by the significant volume of research conducted the RSI, which has focused largely on London.

In recent years there has been increasing recognition of the importance of producing reliable estimates of the scale of single homelessness. However, there is no readily available, comprehensive and robust source of information on the number of homeless people. This is due in part to the lack of an agreed definition of homelessness, and to the 'hidden' and 'mobile' nature of many people's homelessness. The task is further complicated by the need to distinguish between stock, flow and period prevalence statistics in any attempt to quantify homelessness. The available figures on the number of statutory homeless households, rough sleepers, and hostel and night shelter users are all estimates and subject to important limitations. However, ways round some of these difficulties in 'counting' homeless people can be identified. For example, if the statutory homelessness statistics were produced in a consistent format across Scotland, England and Wales this would facilitate comparisons of trends across all three nations. Research conducted for the YHAP will get around the definitional problem by offering a range of estimates of the numbers of young people involved to match the various possible definitions. Also, non-homelessness sources of data, such as the Survey of English Housing and other household surveys, have been shown to be useful means of estimating the prevalence of homelessness.

The quality and coverage of single homelessness research

Quality

There are numerous high-quality studies of single homelessness which provide a wealth of robust evidence. This includes both large-scale, well-funded research projects, such as the 1991 DETR study of single homelessness in England (Anderson et al, 1993) and the various RSI evaluations, and also smaller-scale but rigorous studies, such as Crane and Warnes' (1999) sustained ethnographic account of a particular project for older homeless people.

However, there is also a significant volume of quite weak research on single homelessness. For example, some studies are based on fairly superficial information gathered through questionnaires from relatively small numbers of people. Also, there is sometimes a failure to give proper details of the research methods used, particularly sampling techniques, which makes it difficult to assess the weight that should be attached to the findings of studies.

Many of these weaker studies are conducted by small, local agencies, and the limitations of their research reflect the constraints they face with regards to time, money and research expertise. Moreover, this type of research, while not perhaps having much scientific merit, is often of value in shedding some light on neglected issues and/or making useful practical suggestions. Even where a study has limited generalisability, it can have an important impact at the local level. We should not, therefore, discourage local agencies from carrying out this more informal research; instead, advice could usefully be offered to them about how best to go about it (see below).

Some poorer-quality homelessness studies have also, however, been funded by large, national agencies. These studies clearly had restricted funding, which meant that either the scope of the study or the rigour of the analysis was disappointing. While it is understandable that agencies will want to cover as much ground as

possible within the research resources available to them, it may be that these resources are sometimes spread too thinly.

The importance of including the 'voices' of homeless people is often emphasised in discussions about the quality of research evidence, and we would fully support this. Evaluations of the effectiveness of homelessness projects, for example, are clearly unsatisfactory if they do not take full account of the perspectives of users. However, the fact that a research report includes quotes from homeless people is by no means a guarantee of its quality or usefulness. There are some qualitative reports on single homelessness which use large chunks of verbatim quotes, or offer a great deal of detail about homeless people's biographies, without properly analysing or contextualising this material.

Duplications

Single homelessness is without doubt one of the most thoroughly researched areas of social policy in Britain, and one of the purposes of this review was to identify duplication among these studies. We found little complete duplication, with most research projects highlighting new perspectives even on very well covered topics. If there had been scope in the review to delve deeper into the most informal types of research and information-gathering occurring at ground level, more duplication would perhaps have come to light. However, on the basis of the published material we have reviewed, it is clear that some areas of single homelessness are particularly heavily researched. These include:

- the development of the Homeless Persons legislation;
- debates over definitions of homelessness;
- rough sleepers;
- youth homelessness;
- the characteristics of single homeless people (in England at least);
- personal experiences of homelessness, particularly rough sleeping;
- the 'risk factors' and 'triggers' associated with homelessness;
- the RSI;
- foyers;
- hostels;
- health (particularly mental health);
- resettlement work.

Gaps

Despite the wealth of research on single homelessness, gaps in understanding do remain. The most important relate to:

- the experience and scale of hidden homelessness;
- some particular groups, for example, minority ethnic groups;
- the structural processes underlying homelessness and their differential impact at the local level;
- the evaluation of preventative work (although this is beginning for young homeless people with the 'Safe in the City' project and the work of the YHAP);
- longitudinal research to trace the experiences of homeless people over time, particularly to test the effectiveness of interventions;
- drugs and homelessness;
- the friendship networks of single homeless people;
- material specific to Wales;
- large-scale surveys of single homelessness in Scotland or Wales;
- the effectiveness of *The Big Issue* in helping single homeless people;
- evaluations of furnished and/or shared flats and other non-institutional responses to single homelessness;
- the cost-effectiveness of most types of initiative.

Unresolved issues

There are areas of single homelessness where we have had a considerable amount of research and debate but controversies remain unresolved.

One of the most important is the lack of consensus over the appropriate breadth of the definition of homelessness. However, this is not a question that further research could answer. It is essentially a political rather than empirical issue, requiring a value judgement rather than further evidence.

Another outstanding 'moral' rather than empirical issue relates to the legitimacy of the government's goal to eliminate rough sleeping (see SEU, 1998). The extent to which it is appropriate to attempt to 'persuade' homeless people, particularly rough sleepers or travellers, to adopt a more 'ordinary' or 'settled' life has

long been an uncomfortable issue for homelessness researchers and practitioners (Franklin, 1999). The government's enthusiasm for 'reintegrating' socially excluded people into mainstream society has given this debate new impetus. Attempts to resettle the very small proportion of homeless people who say that they want to sleep rough in the longer term clearly raises difficult political issues.

A further area where there seems to be no real agreement relates to the support needs of single homeless people. While there is a reasonable consensus about the types of support that single homeless people might need, the prevalence of these support needs within the single homeless population is the subject of some debate. Surveys have provided evidence that a large proportion of single homeless groups have support needs, but some commentators maintain the position that the majority of homeless people 'only need a home'. While this is a highly politicised issue, it is one that could largely be resolved by empirical evidence. Although the necessary research data probably already exist in various sources, some kind of mapping of the overall pattern of support needs within the single homeless population would be helpful. Lack of clarity over this point is reflected in the continuing controversy over the appropriate balance between self-contained and hostel provision in meeting the needs of homeless people.

Recommendations

These recommendations focus mainly on research issues, but they also pull out some of the key messages on homelessness policy and practice to emerge from the review.

To practitioners

When conducting research, our recommendations are to:

- first check what research already exists, using this review, the National Homeless Alliance bibliography, and any local or national contacts with research knowledge;
- try to fill in those gaps in knowledge where meaningful small-scale work can be done;
- take advice on research methods, particularly the advantages and disadvantages of

qualitative and quantitative methods;
- consider whether your study or information gathering may have broader significance, and if it does then publicise it so that others can benefit from it.

On homelessness practice, the main themes emerging from the review are:

- the need to consider the relevant research on 'what works' and what does not;
- the importance of flexible responses, tailored to meet the needs of individual homeless people;
- the need to develop holistic solutions to single homeless people's problems, through multi-agency and strategic working;
- a growing emphasis on prevention and early intervention;
- the importance of long-term resettlement, and not just crisis intervention;
- the fact that most homeless people's preference is for non-institutionalised accommodation as far as possible;
- the need to think carefully before setting up 'trendy' schemes such as foyers;
- the importance of continual improvement in the quality of services, and involving users in service development and evaluation.

To policy makers

There is a wealth of research-based material and recommendations on single homelessness that should be used to inform 'evidence-based policy'. This and other overview reports should help policy makers to find their way through this material (such as that currently being conducted by Yanetta and Third [forthcoming] for Scottish Homes). Further research evidence is no doubt required in particular areas, and policy makers should communicate their priorities to research funders and commissioners. However, policy makers cannot look to researchers to provide all of the answers, as some decisions come down to essentially political or moral judgements, which empirical evidence alone cannot answer.

The main themes with regard to policy on single homelessness to emerge from the review are:

- the need to address the structural causes of homelessness, not just the symptoms;
- the importance of preventative work and early intervention, particularly aimed at those

groups facing particular risks of homelessness or life crises which act as triggers for homelessness;

- the need to make mainstream services take responsibility for homeless people, rather than expecting specialist agencies to meet all of their needs;
- the importance of facilitating inter-agency collaboration;
- the need for intensive support for some single homeless people, with an appropriate commitment of resources;
- the importance of focusing on the long-term outcomes of homelessness interventions, and developing appropriate resettlement services;
- the importance of encouraging evaluation and improvement in homelessness services, and ensuring that homeless people's views are taken into account in the development of services. Evaluation exercises should be as constructive and meaningful as possible, emphasising outcomes rather than outputs.

To research commissioners

Research topics

It clearly makes sense to direct research as far as possible to those areas where least is known. All those requesting funding for research into single homelessness should be required to demonstrate their awareness of the existing material, using this review and other sources, and to explain how their proposed study would add to this substantial knowledge base. Research proposals on topics that are already well covered should be considered particularly carefully, although it must be borne in mind that gaps remain even in these areas, and studies do require updating.

One important point to emerge from the review is that the (limited) statutory rights to accommodation given to homeless families with children has, ironically, meant that recent research has more often focused on single people, as have many of the more innovative responses to homelessness. Bringing together research on homeless families and single people may add value to both (currently divided) fields of study. As discussed earlier, it would be particularly interesting to examine the relationship between trends in the scale of family and single homelessness.

Research quality

This review makes two main recommendations regarding research quality. First, with regard to national agencies, there is a case for consolidating resources to fund a smaller number of higher-quality studies on single homelessness. For example, a major longitudinal study of single homeless people would represent a substantial investment for the future. This should not preclude smaller, exploratory studies in those areas in which we know very little, for example the friendship networks of single homeless people.

Second, small local agencies in particular would benefit from a user-friendly guide to conducting research, including the advantages and disadvantages of different types of research method. There seems to be particular need for advice to these agencies on how to evaluate their own services. These good practice guides could be produced relatively quickly and cheaply, and should build on the earlier work of CHAR (1994).

Ethical considerations

Much research on homelessness involves interviewing, or otherwise collecting information from, single homeless people. Concerns about the quality of some of this work have been highlighted above. There are also ethical issues to be considered. We would recommend that research directly involving homeless people should generally be funded only if it has clear policy aims. Intellectual curiosity alone is not sufficient reason for academic work with the most vulnerable members of society. It should be emphasised that policy-relevant research includes studies that feed into broader social and economic debates, as well as 'practical' research aimed at developing or evaluating particular responses to homelessness. Disability activists, with support from the Joseph Rowntree Foundation, have developed guidelines on funding disability research (Oliver, 1992). It may be appropriate to develop something equivalent for research with homeless people.

We should also keep in mind that not all research on homelessness should focus on homeless people. Killeen's comments on poverty research hold equally well for work on homelessness:

> ... an understanding of those who control
> the economic and social forces which
> generate poverty is at least as important
> as an understanding of the attitudes and
> coping mechanisms of those who have
> to endure it. (Killeen, 1998, p 5)

And finally...

This overview has attempted to bring together
the main themes to emerge from the wealth of
research on single homelessness that has been
conducted in the 1990s. The momentum built
up by this project should establish a basis for
ongoing monitoring and a synthesis of single
homelessness research in Britain so that it best
serves the needs of homeless people and those
who work with them.

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Appendix: The methodology

This appendix sets out the methods by which we conducted this review of single homelessness research in Britain. The review covered work published from 1990 to the end of November 1999.

First, we conducted a systematic trawl for material including official statistics, 'formal research' and significant 'grey' literature. Formal research is defined as scientifically rigorous, funded pieces of work which are either large-scale or relatively intensive. 'Grey' literature comprises less formal research, including small-scale local studies, and also non-research material such as magazine and newspaper articles, government papers and policy statements, resource packs, action plans and other similar documents produced by homelessness agencies.

A wide range of sources were used in the trawl for material, including: the *Planning Exchange*; university library databases; the British Library and National Library for Scotland; the World Wide Web; housing and social work magazines; and contacts with key homelessness agencies and research funders. Participants in national homelessness conferences were invited to submit material. All relevant items identified were entered into the bibliographic database.

Second, we selected the pieces of material to be included in the 200 research summaries. The questions that guided our selection were as follows:

- How significant a piece is it?
- Are there other more robust/more recent/ more comprehensive treatments of the same subject? (If a subject was well covered, only the most useful pieces of research were

included. Some weaker studies were included if they addressed an area where there was little else. In addition, we tried to include a selection of small-scale, local studies.)
- How easily can users gain access to the piece of literature? (Obscure items that are very difficult to obtain were only included if particularly significant.)
- Overall, how useful is the item likely to be to the intended audiences, that is, homelessness practitioners, policy makers and research funders?

Each selected piece was then summarised in around 500 words. The presentation of these summaries was based on consultation with homelessness practitioners and others. The quality, robustness and usefulness of each of these pieces of research was assessed by the research team and these points were included in a 'comments' chapter at the end of each summary.

Third, we prepared this overview report based on the reviewed pieces of research and some broader contextual material.

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