

Health and Homelessness in Scotland: Briefing

This briefing summarises the findings of the Scottish Government's recent research into health and homelessness. It is aimed at health and social care partnership management, integrated joint boards, registered social landlords, local authority housing and homelessness services and NHS Boards.

The health and homelessness research

Research was undertaken by the Scottish Government to better understand the links between homelessness and health service usage. ¹ The study linked health and homelessness data sets for the first time and covered the period between 2001 and 2016. It matched people of the same age and gender who had experienced homelessness with people with no experience of homelessness from the most and least deprived areas of Scotland. The study then compared the health care usage of these groups.

Key findings

- At least **8% of the Scottish population had experienced homelessness at some point in their lives** during this time period.
- 27% of people who had experienced homelessness did so more than once.
- People with experience of homelessness accounted for 55% of Accident and Emergency
 Attendances during this period within the study group, almost twice the rate as their peers in the
 most deprived areas and 3.5 times higher than those who lived in the least deprived areas of
 Scotland.
- Similarly, people with experience of homelessness accounted for **52% of Acute Hospital Admissions** within the study group, with attendance rates ranging from 1.7 times greater than in the most deprived areas and 3.1 greater than the least deprived areas of Scotland.

The study also identified the following:

- Increased interactions with health services preceded people becoming homeless, suggesting that as their risk of homelessness increased so did their engagement with a range of crisis health services.
- Higher levels of interactions with health services followed the first homelessness assessment for people experiencing repeat homelessness.
- Mental Health services appear to have the greatest demand placed on them prior to and immediately preceding a homeless application.

Opportunities for action

The findings provide an opportunity for health, social care and housing to explore how homelessness is responded to, and prevented. This could include new initiatives to share data at a local level to prevent homelessness, drive improvements in care coordination and shift the balance of care from acute settings to the community.

If you are interested in taking forward improvement work in this area the Place, Home and Housing Portfolio can offer support with Quality Improvement methodology, data measurement or evaluation. Visit the Place, Housing team's website or email: hcis.phh@nhs.net for more information.



¹ Health and Homelessness in Scotland