Bridging the Gap: Improving Health Outcomes for People Experiencing Homelessness

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The Scale of the Problem

- •327,950 households were owed support to prevent or relieve homelessness in 2024, a 5% increase from 2023.
- •Temporary accommodation use is at record levels, with 117,400 households in England living in temporary housing.
- •People experiencing homelessness face extreme health inequalities:
- 63% have a long-term illness or disability.
- Average age of death for someone experiencing homelessness is around 30 years lower than the general population.
- 41% report a long-term physical health problem, and 45% have a diagnosed mental health condition, compared to 28% and 25% respectively in the general population.

The Scale of the Oroblem

Homeless people 'deeply failed' as deaths in UK reach record high



Anthony Marks died in September 2024, weeks after being assaulted while sheltering in a bin shed

Michael Buchanan

Social affairs correspondent

8 October 2025

The number of people who died while homeless in the UK reached a record high last year, according to new figures.

The Museum of Homelessness, which compiles the data, said that 1,611

homologe popula diad in 2024

The Scale of the Problem

Total deaths: 1,611 people experiencing homelessness died in 2024

- a **9% increase** from 2023 (1,474 deaths).
- This equates to an average of 4 deaths per day.

Causes of death:

- 55% were classified as "deaths of despair" including suicide and drug-related deaths.
- 44% involved drugs or alcohol, with increasing fatalities linked to novel psychoactive substances

Demographics

- Three-quarters of those who died were men.
- 169 people were sleeping rough at the time of death.

Sheffield Homelessness

According to Shelter: **1,482 people** were living in **temporary accommodation** in Sheffield.

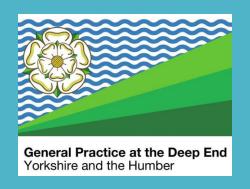
31 people were sleeping rough on any given night (though local charities estimate this number may now be closer to 50).

581 children were among those in temporary accommodation.

In year to 2025:

- •13.6% decrease in the number of households presenting as homeless compared to the previous year
- •Temporary accommodation placements fell by 8%.
- •Families in B&Bs dropped by 65%

Expert by experience perspective



ResultsData gathered from five-point-scale of Patient Satisfaction

Satisfaction Level	% of Respondents	Number
Extremely Satisfied	69%	9
Quite Satisfied	0%	0
Neither Satisfied Nor Dissatisfied	23%	3
Quite Dissatisfied	0%	0
Extremely Dissatisfied	8%	1

Key themes from responses to open-ended question



Vays to access healthcare (i.e outreach clinics, telephone calls and texts, booking appointments)



Importance of nonjudgemental clinicians and mutual respect



Desire for more control over the medication decision process (particularly for increased dosage)

Faculty for Homeless and Inclusion Health



https://www.pathway.org.uk/

Pathway is the UK's leading homeless and inclusion health charity. We work with the NHS and other partners to create improved models of care for homeless people and excluded groups.

Models of Primary Care for Homelessness



I have the right to register and receive treatment from a GP practice

I <u>do not</u> need a fixed address.

I do not need identification.

Anyone in England can see a GP.

Specialist health centres

Mixed model "Specialist GP Practices"

Business as usual

HEARTH study. Delivering primary health care to people who are homeless



An evaluation of the integration, effectiveness and costs of different models

The Housing First Approach

Core principle: Provide immediate access to permanent housing without preconditions (e.g., sobriety, treatment compliance).

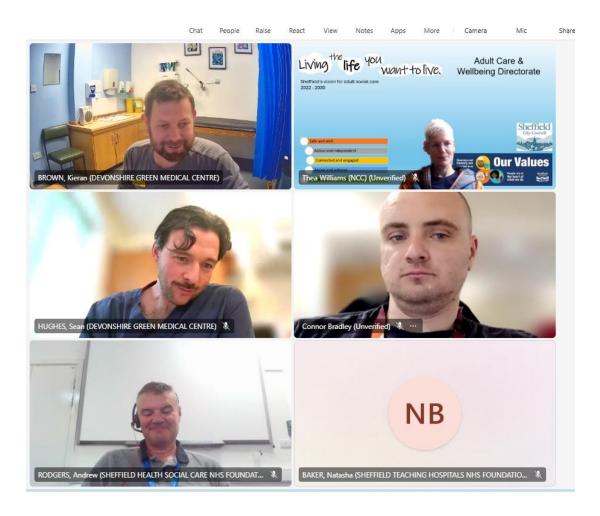
Positive outcomes for

- Housing Stability
- Health outcomes
- Social and economic measures
- Cost effectiveness (whole person view)

Though some challenges to roll-out

Overcoming Boundaries

- Complexity and Chaos
- Challenges to traditional roles
- Working across traditional boundaries
- Multidisciplinary working
- Mutual support and supervision
- Safeguarding approaches



What could the future look like?

Focus on outreach care

Increased Hospital Inreach

Continued development of MDT working across traditional service boundaries

Services targeted to match need

Opportunities for creative commissioning of services

A request...

Intervention to optiMise Palliative caRe for peOple with liVed Experience of homelessness (IMPROVE)

Stakeholder meeting – Mid Jan 2026 Community of Practice – 6 sessions during 226

Thank you

Questions?

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