Introduction

Homeless people experience some of the poorest levels of health among the general population. Evidence however has shown that many barriers exist for homeless people in accessing health and social care services. The aim of this study was to understand these issues, identify what work is currently happening to support homeless people to access Health and Social Care (HSC) services and to identify what needs to be done in the future.

What is homelessness?

Homelessness is a complex issue which is often misunderstood as people tend to have a stereotypical image of a homeless person as someone who sleeps on the street. Being homeless however can include people who live in temporary accommodation or the ‘hidden homeless’ who live in overcrowded conditions or face eviction from their homes. Figure 1.1 below shows the extent of homelessness in Northern Ireland.

Factors which cause homelessness

There is no single reason why a person may become homeless. Often, a culmination of events can lead to homelessness as shown in Figure 1.2.

Figure 1.2 Summary of the main factors which can lead to homelessness

- **Financial**
  - Poverty
  - Financial crisis / debt
  - Redundancy / unemployment

- **Health**
  - Mental health issues
  - Substance misuse
  - Illness

- **Housing**
  - Accommodation not reasonable
  - Loss of accommodation
  - Shortage of affordable housing

- **Societal**
  - Relationship breakdown
  - Offenders
  - Care background
  - Intimidation
  - Migrant workers

Health issues homeless people face

Whilst there are a wide range of health issues more common to homeless people, the most prevalent are physical health problems, mental health issues, and alcohol and substance misuse. It is important to also note however that there is wide variation in health needs within the homeless population.
Key issues homeless people face in accessing Health and Social Care services in Northern Ireland

<table>
<thead>
<tr>
<th>GP Access</th>
<th>Issues with registering, including problems with providing adequate documentation such as identification. However, it is not widely known that it is not necessary to have a permanent address to register for GP services. Practical issues, like moving away from the local area may also make it difficult to register with a new GP.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Geographical location of services</td>
<td>Gaining access to services due to their location, is an issue which can increase the difficulty of accessing health and social care services and can make some services inaccessible as people may require transport to travel to them.</td>
</tr>
<tr>
<td>Personal circumstance</td>
<td>The difficult and chaotic life circumstances of homeless people may make it difficult to manage appointments arranged in advance. Homeless people may also be reluctant to access services because they expect a hostile response. These people may also have a low self-esteem and lack confidence to seek help.</td>
</tr>
<tr>
<td>Timely access</td>
<td>Waiting lists for services can cause difficulty and mean homeless people do not get access to services quickly. The transient nature of homeless people may also make it difficult for people to maintain appointments.</td>
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<tr>
<td>Complex needs</td>
<td>Often being homeless can mean an individual may have a dual diagnosis which may make it more difficult to access the services they need.</td>
</tr>
<tr>
<td>Lack of specific services</td>
<td>A lack of long term care provision can cause ongoing health problems for homeless people.</td>
</tr>
</tbody>
</table>
Within Northern Ireland, there are a range of organisations and groups across the statutory, voluntary and community sectors working with homeless people to support their needs. The Patient and Client Council spoke to a number of these groups to identify how access to health and social care services could be improved in the future. See Figure 1.3.

**Case study: An example of how services can be improved**

One example of an initiative which demonstrates statutory, community and voluntary organisations working well together is the Enhancing Healthcare for the Homeless (ECHO) steering group.

This group was developed in the Northern Health and Social Care Trust in 2010 after hostel staff in the area identified that there was a need for better access to GP services for homeless people.

Since then, the group introduced a GP registration referral pilot in GP practices in the local area aimed at improving access to general health care for homeless people. A checklist was provided to hostels and GP practices to provide guidance on what to do if someone turned up who was staying in temporary accommodation or had no fixed address. This means homeless people who are new to the area can register with a GP and have quicker access to primary care and medication.

The key to the success of the ECHO programme has been developing strong links and partnerships with a wide range of statutory agencies, voluntary organisations, community groups and private sector organisations. It has also helped to build relationships with hostel staff, residents and GPs. In addition it has been reported to have led to a reduction in the use of urgent care services for medication and emergency care.

In the future it is hoped that these links and partnerships will help promote better awareness of the health and social care services available to people affected by homelessness and will result in an increase in the uptake of those services.

**Figure 1.3 - What people told us needs to change in Health and Social Care in Northern Ireland**

1. Education and awareness for health professionals about the issues homeless people face

2. Collaborative, integrated services based on homeless people’s needs

3. Making sure homeless people can easily access the services that they need

4. Timely access to the services that homeless people need


**Conclusion**

Many health problems are more prevalent amongst homeless people (in comparison with the general population). Their specific health needs, combined with the sometimes chaotic and transient nature of their lifestyles can mean that providing services to the homeless population can be complex, with accessibility to health and social care services being particularly problematic. There is evidence of some good examples of groups and organisations working to ensure that the health and social care needs of homeless people in Northern Ireland are addressed. However, a greater understanding of the needs of homeless people across Health and Social Care is necessary and future services should be delivered in ways that recognise and meet these needs.
References

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