

A Bed Every Night

Health needs profile

February 2024 update

What is the overall profile of the cohort?

3,099 referrals were made into ABEN over the course of the 2023 calendar year. **86% of individuals referred into ABEN are accommodated.** Where individuals are not accommodated by the programme, this is generally the result of disengagement on the part of the participant, rather than decisions taken by the service itself. When individuals are accommodated, their average length of stay is 63 days, after which most have a positive move-on experience into longer-term support. **They often move on into social housing, private rented accommodation, or supported accommodation.**

Participants supported are overwhelmingly men, as is the case among the overall rough sleeper population. However, 19% of the cohort supported by ABEN in 2023 were women (compared to 11% in the overall rough sleeper population). Given that we know women face additional barriers to accessing support when rough sleeping; and, crucially, often exhibit specific (and specifically under-supported) health needs, **the fact that women over-index within ABEN may suggest that they find it to be a more accessible support pathway than others¹.**

Over the course of 2023, the service also supported (at least, and possibly more due to often hidden vulnerability):

- 215 **victims of domestic abuse;**
- 47 **care leavers;**
- 24 **armed forces veterans;** and
- 11 **pregnant women.**

¹ Crisis, "Homeless Women: Still being failed yet striving to survive", available here: <https://shura.shu.ac.uk/27408/2/homeless-women-striving-survive.pdf>
DLUCH, "Rough sleeping snapshot in England: Autumn 2021", [Rough sleeping snapshot in England: autumn 2021 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/101444/rough-sleeping-snapshot-in-england-autumn-2021.pdf)

How do health needs manifest among this cohort?

When individuals are first referred into ABEN, they are screened for health needs, including physical health, mental health, learning disabilities, substance misuse needs, and pregnancy. **Broadly 60% of screenings undertaken for those accommodated identify at least one health need.** Broadly, these can be categorised as including:



As we know, health needs often overlap, and can be mutually reinforcing. Among the cohort supported across 2023, of the 60% who were screened as exhibiting at least one health vulnerability, **the majority – 35% of the total cohort – were screened as exhibiting two or more health issues.** Factors relating to mental health were the most common need identified by screening. But they were also the need most likely to overlap with other screened needs. The most common co-morbidities are set out in the table below.

Co-morbidity of health needs identified at screening - % of the total cohort supported in 2023*

	Mental health	Substance misuse	Physical health	Learning disability
Mental health	17.5%			
Substance misuse issues	26.2%	6.1%		
Physical health	13.9%	8.8%	2.6%	
Learning disability	3.7%	2.5%	1.5%	0.5%

ABEN helps many clients to access health services. Between 2020 and 2023, **2,479 individuals supported by ABEN were helped to register with a GP, and 310 were helped to access dental support.**

* (n.b. to ensure table completeness and accuracy in each individual instance, includes 'duplicates' where 3 or 4 needs were identified)

What else do we still have to learn?

There are a significant number of **gaps in our understanding** with respect to the health needs of this cohort. We hope, in the future, to better understand:

- Diagnostic-level health-needs on entry, during stay and on leaving accommodation.
- The health support which is already in place at the point of referral.
- Types of support needs required following assessment in the NHS (e.g. counselling; prescriptions; etc.)
- After referral, an understanding of how well health support offers endure over time, and the outcomes of additional referrals made in the course of enrolment in ABEN.
- Information about support plans to promote engagement and prevent re-presentation.

The GMCA continually monitors for opportunities to improve our understanding of this cohort and its vulnerabilities.