

Acknowledgements

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Foreword

Imagine not knowing where you are going to stay tonight. Where do you go, where will you sleep, how are you going to wash yourself and what are you going to eat? This is the reality for over three thousand people in England forced to sleep on our streets tonight.

Rough sleeping, the most visible form of homelessness, is increasing and shockingly more and more people have no choice but to sleep on our streets.

The new research detailed in this report makes for stark and upsetting reading. The fact that nine in ten people sleeping rough in England have experienced violence or abuse on the street is unacceptable.

Half of the people we spoke to have been physically attacked and one in five had someone urinate on or next to them. Sadly, violence, dehumanising verbal abuse, robbery, and harassment were unacceptably common experiences. Three quarters had been robbed and more than half had had items – including bricks and beer cans – thrown at them.

The fact that in the majority of cases, the perpetrator of the last incident experienced by respondents was a member of the public makes this more unsettling to read.

While these new findings are shocking and saddening, they are symptomatic

of a housing and homelessness system that has been neglected by successive governments for far too long. The chronic shortage of truly affordable housing, compounded by the three-year freeze on housing benefit while private rents soared, have hit those on lowest incomes the hardest.

People forced to sleep rough are the most visible, most acute, symptom of a systemic crisis: around half of those surveyed for this research had experienced struggles with the cost of renting and affording basics like food and heating prior to sleeping rough.

But it does not have to be this way. There are solutions that can reverse these trends which must start with everyone having a home of their own. The Government must commit to building the 90,000 new social-rented homes we need to address the housing crisis to ensure fewer people are pushed into homelessness. This will stop the injustice of homelessness and prevent more and more people's lives being put on hold.

Matt Downie

Chief Executive, Crisis



Executive Summary

Numbers of people sleeping rough

Rough sleeping in England is increasing. Following several years of decline, between 2021 and 2022 the number of people sleeping rough over the last 12 months grew by 26% to a total of 3,069.¹ Increasing levels of rough sleeping can also be set within the wider context of rising homelessness in England. Almost 300,000 households last year (2022/23) received help from English councils because they were homeless or threatened with homelessness. This has increased by 7% over the last year and is higher than prepandemic levels.²

Recent policies adopted by the Westminster government such as Everyone In and the Rough Sleeping Initiative (RSI) showed it is possible to reduce the numbers of people who have no other option but to sleep rough. But with a lack of investment in longer term solutions to address all forms of homelessness in England, including building more social homes, alongside rapidly rising rents and increasing economic pressures squeezing households with the least, the number of people experiencing their first night sleeping on the streets is increasing.

Crisis conducted this research with 157 people who have slept rough within the last two years. Many participants were still

sleeping rough. The survey was completed face-to-face across homelessness services in a number of locations in England including the North West, North East, Midlands and London.³ The survey was complemented by 20 in-depth interviews.

Journeys into rough sleeping

The reasons people are forced to sleep rough are multifaceted, but are driven by structural causes rooted in the lack of affordable and accessible housing. As the findings of this research show, many had issues with mental and physical health alongside relationship problems and experiences of poor-quality accommodation, but the leading cause of being forced onto the streets was a lack of affordable accommodation.

When asked about specific events or issues they had experienced before sleeping rough, on average participants experienced 8 separate issues that individually could lead to them losing their home. Almost half (48%) had between 8 and 20 separate issues, which contributed to them becoming homeless. 6 out of 10 (61%/95) had had mental health issues. Half of participants (53%/83) had gone through family relationship issues and a similar proportion (52%/49) had experienced (personal) relationship breakdowns or issues. Over half (52%/81) spoke to struggling with

the cost-of-living crisis and being unable to afford food and bills. Just under half (47%/74) said that they had struggled with the cost of renting and had experienced rent arrears, difficulty with meeting rent increases or being able to afford deposits or rent in advance to secure somewhere to live. Seven of out 10 (69%/51) named the prohibitive costs associated with privately renting and/or trying to secure a new private tenancy as a leading cause of them having to sleeping rough.

First night sleeping rough

Many participants were extremely fearful on their first night of rough sleeping which included fear of the unknown, the vulnerability of having nowhere safe to go and dealing with the traumas that led to the situation. During the interviews participants were asked to talk about their experiences when they first had to sleep rough. They highlighted that they had often tried hard to find somewhere or someone to stay with, but no one could put them up. This left them with no option but to sleep rough, feeling lonely and afraid of what was to come next. They lacked belongings, especially the items needed for sleeping and protecting them from the cold and extreme weather. Participants rarely slept and highlighted just how far they walked on this first night, and throughout their ongoing experience of sleeping rough. They switched quickly into survival mode, which led to them making short term decisions to look after their basic needs.

Experiences of violence and abuse

Having no choice but to sleep rough makes people more vulnerable. Participants described one of the most dangerous parts of their experiences of sleeping rough being other people and the general public in particular. Overall, 9 out of 10 (141) people had experienced at least one form of violence, abuse or theft whilst sleeping rough. When considered in relation to participants' traumatic first night's rough sleeping, this shows that fears for their safety were not unfounded. Shockingly, half (51%) of research participants experienced being physically attacked whilst sleeping rough. Sixty-one per cent had been threatened with violence or intimidated and 72% had been verbally abused or harassed. Over half of participants (53%) had things thrown at them including bricks and beer cans, with 83% of participants experiencing having items thrown at them over three times.

These are not one-off incidents, either: more than 6 in 10 (66%) of those who had been physically attacked reported being attacked on more than three occasions; 83% had been threatened with violence and 92% had been verbally abused more than three times. Sleeping rough exposes people to the vagaries in behaviour of others around them, especially

Department for Levelling up, Housing and Communities (2022) *Annual Rough Sleeping Snapshot in England:* autumn 2022. Online: DLUHC. https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2022

Department for Levelling up, Housing and Communities (2023), *Statutory homelessness in England: financial year 2022-23*. Online: DLUHC. <a href="https://www.gov.uk/government/statistics/statutory-homelessness-in-england-financial-year-2022-23/statutory-homelessness-in-england-f

Proportion of participants from each location: Manchester 25%, London 24%, Sheffield 15%, Grimsby 15%, Birmingham 17% and Salford 10%.

the general public, with 70% of the last 738 incidents reported by people in the research perpetrated by a member of the public. Of those participants who reported having been physically attacked, the perpetrator of the last incident was a member of the public in more than three quarters (76%) of cases. Members of the public were responsible for 81% of instances when participants were threatened with violence and a similar proportion (80%) of cases in which they were verbally abused.

There were also more targeted attacks and abuse on participants due to their gender, race and religion. Sadly, we know people with protected characteristics are more likely to be victims of crime and abuse⁴ and this is increased by the added vulnerability of sleeping rough. As with all areas of society, intersectionality is vital when looking at a social issue, as many people experience situations differently based on who they are and how society treats them because of their identity or background.⁵

Only a small proportion of participants (6%) stated that they had been sexually assaulted, interfered with, or attacked whilst sleeping rough. However, just under a third of those who had were female (28%). Also 33% of female-identifying participants had been abused, harassed, interfered with, or attacked because of their gender. People sleeping rough are far less likely to be female or identify as female (11% of this sample).

This is often because of how vulnerable sleeping rough makes a woman and often leads to women staying in extremely difficult or dangerous situations to avoid having to sleep rough.⁶

Interactions with the police

Despite the ongoing and repeated nature of the crimes the people experienced, it was unlikely that they would report these to the police. Overall, out of 733 incidents only 109 (15%) of the last incidents experienced were reported to the police. The main reasons given by participants for not contacting the police following incidents was that they felt that the police would be unlikely to do anything (63%), because they feared repercussions from the perpetrator (9%), or because they dealt with the matter themselves (9%). This emphasises the point that the majority of the participants of this research did not feel like it was in their interest to report the - in some cases - very serious crimes they were victim of to the police.

In order to feel a degree of safety some participants kept to busy areas, where there are more cameras, police and security which can be reassuring and give people the feeling of safety so that they could rest. This, however, also brings people into more contact with the police and enforcement actions that are responding to calls from business

about the presence and behaviour of people on the streets. Those who have no choice but to sleep rough can appear in opposition approaches to create safer neighbourhoods and town centres due to being seen antisocial and criminal, whether this is the case or not. This can then lead to people sleeping rough being pushed away from town centres and busy areas, making it more difficult for them to engage in support and making them more vulnerable.⁷

Impacts on physical health

We all need a safe stable home to build our lives and thrive. Sleeping rough puts incredible strain on people's physical and mental health and can leave them with multiple illness and injuries that could have been managed or completely avoided if they had the foundation of a home.

Sleeping rough is traumatic and in too many cases leads to lives being cut short. Latest figures estimate that between 658 and 824 people died whilst homeless in 2021. The mean age of those who died was 45 for men and 43 for women. Suicide accounted for 13% of these deaths.⁸ These shocking numbers show the very brutal impact of homelessness. Participants were asked about a range of impacts from physical and mental health,

loneliness, and more personal questions about how they view themselves and society.

The physical effects of sleeping rough are significant. A lack of sleep, walking thousands of steps, limited protection from sun, rain and cold, malnutrition and the impact of self-medicating with alcohol and drugs all contribute to a worsening or the development of physical health issues.⁹ For many people experiencing homelessness these physical challenges are met with little support, rest or knowing when it will end.

Every night I used to lay down and I used to think am I going to wake up in the morning

Participants were asked about the impact sleeping rough had on their physical health, with 94% reporting at least one health issue, 78% reporting three or more health issues, and 39% having six or more. This shows just how damaging sleeping rough is on a person's physical health. The main physical health issues experienced by 70% of participants were those caused by extreme weather conditions, living in physical pain (69%) and issues with feet and legs related to walking (66%). These issues really highlight the strain placed on the body.

8 - 1

Office for National Statistics (2023) *Victims of Crime*. https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/crime-and-reoffending/victims-of-crime/latest

⁵ Cole, E. R. and Duncan, L. E. (2023) *Better policy interventions through intersectionality*. Social Issues and Policy Review, Volume 7, Issue 1, pp. 62-78.

Sanders, B., Boobis, S., and Albanese, F. (2019) 'It was like a nightmare' The reality of sofa surfing in Britain today. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/types-of-homelessness/it-was-like-a-nightmare-the-reality-of-sofa-surfing-in-britain-today/

Sanders, B. & Albanese, F. (2017) An examination of the scale and impact of enforcement interventions on street homeless people in England and Wales. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/types-of-homelessness/an-examination-of-the-scale-and-impact-of-enforcement-interventions-on-street-homeless-people-in-england-and-wales-2017/

⁸ Office for National Statistics (2021) *Deaths of homeless people in England and Wales:* https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsofhomelesspeopleinenglandandwales/previousReleases

Herzberg, D. and Boobis, S. (2022) *The Unhealthy State of Homelessness 2022: Findings from the Homeless Health Needs Audit.* London: Homeless Link. Online: https://homeless.org.uk/knowledge-hub/unhealthy-state-of-homelessness-2022-findings-from-the-homeless-health-needs-audit

Impacts on mental health

The stresses that lead to sleeping rough as well as the resulting abuse, uncertainty and anxiety led the majority of participants to experience a range of mental health issues. Of the 157 participants of this research, 86% had at least one or more mental health needs due to sleeping rough, 63% had three or more needs and 15% had six and over. This again shows that participants faced multiple and complex situations whilst sleeping rough.

The most common mental health impacts reported by participants were psychosis (experienced by 85% of participants), anxiety/generalised anxiety disorders and depression (both experienced by 75% of participants). Just over half (56%) of participants said that they experienced suicidal thoughts, while 29% experienced post-traumatic stress disorder (PTSD), 22% experienced antisocial/borderline personality disorder (ASPD/BPD), 17% experienced obsessive-compulsive disorders (OCD) and 13% experienced bipolar disorder.

Accessing support

With the multiple physical and mental health needs exhibited by participants, being able to access the health services needed is vital to stop these issues from escalating and becoming more problematic.¹⁰ However, for almost a quarter (23%/36) could only sometimes access the services they needed.

Nearly half (47%) of participants said they were able to access the health services they needed, either all the time (31%) or most of the time (16%). For 1 in 10 (11%/17) they rarely had access and 15% said that they were never able to access the services that they needed. Almost half of participants could only sometimes, rarely or never access the health services they needed. Just over two-fifths (42%) of participants said that their experiences made them less likely to engage with support as they become less trusting of others and institutions around them, potentially prolonging their homelessness.

Impacts on sense of self

While most individuals feel lonely at some point in their life, loneliness affects some people more than others.11 Feeling isolated in our society and being unable to connect with other people can further exacerbate loneliness which can have its own long-term consequences. Loneliness cuts lives short, increasing the risk of early mortality by 26%. It can also put people at greater risk of poorer mental health. Homelessness increases the likelihood of someone experiencing loneliness: 62% (97) participants said that they often felt isolated from others, compared to approximately 6% of the general population reporting that they often or always feel lonely, suggesting that those sleeping rough are much more likely to feel isolated.¹² This makes people sleeping rough some of the most

isolated and lonely people in society. Participants were asked about the impact that sleeping rough had on them as a person and their views of themselves and our society more widely. Two thirds of participants (69%) said that sleeping rough made them less trusting, feel invisible and negatively impacted on their relationships with family, children, and friends. Sixty six per cent felt that nobody cared about their situation. Shockingly, 64%/101 participants felt that sleeping rough meant that they were afraid for their lives or that they might die.

Sleeping rough can be deadly at worst, but will always be a trauma that can have a significant impact on a person's life. This is highlighted by over half (56%) of participants feeling that sleeping rough has made it hard to live a 'normal' life again.

Participants were asked whether sleeping rough had made aspects of their life harder and the results are stark (see Appendix 2). On all questions over half of participants felt that sleeping rough had made that aspect of their lives more difficult. It had the biggest impact on participants' ability to look after their basic needs and to stay physically healthy (both 80%/126). Participants also felt it had made maintaining their mental health (78%) and accessing support (77%) much more difficult.

As the research demonstrates, sleeping rough is dangerous, traumatic and has devastating impacts on people's health and wellbeing. It does not have to be this way. As with all forms of homelessness, rough sleeping can be ended through different policy choices, new approaches and more targeted funding.

Ending homelessness

Ending homelessness does not mean no-one will ever lose their home again. It means it will be prevented where possible, and when it does happen there is a quick solution which helps everyone into a safe and settled home to build a decent life and meet their true potential. With the right political will and policy choices we can design a system which prioritises preventing homelessness first and ensures anyone experiencing it is helped quickly into secure housing. That is why Crisis recommends that.

In the short term the Westminster
Government must remove the legislation
from the Criminal Justice Bill that will
criminalise people for being homeless,
akin to the Vagrancy Act. Instead, genuine
support should be put in place in the forms of
prevention programmes and Housing First and
enabling multi-agency working between local
authorities and public institutions

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National Institute for Health and Care Excellence (2022) *Integrated health and social care for people* experiencing homelessness: https://www.nice.org.uk/quidance/ng214

Sanders, B. & Brianna, B. (2015) 'I was all on my own': experiences of loneliness and isolation amongst homeless people. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/health-and-wellbeing/i-was-all-on-my-own-2015/

Department for Culture, Media and Sport (2023) Community Life Survey 2021/22: Wellbeing and loneliness. Online: DCMS: <a href="https://www.gov.uk/government/statistics/community-life-survey-202122/community-life-survey-202122-wellbeing-and-loneliness#:~:text=Overall%20in%202021%2F22%3A,%2F20%20and%202020%2F21.8:text=A%20composite%20loneliness%20score%20was%20produced%20combining%20the%20three%20indirect%20loneliness%20measures

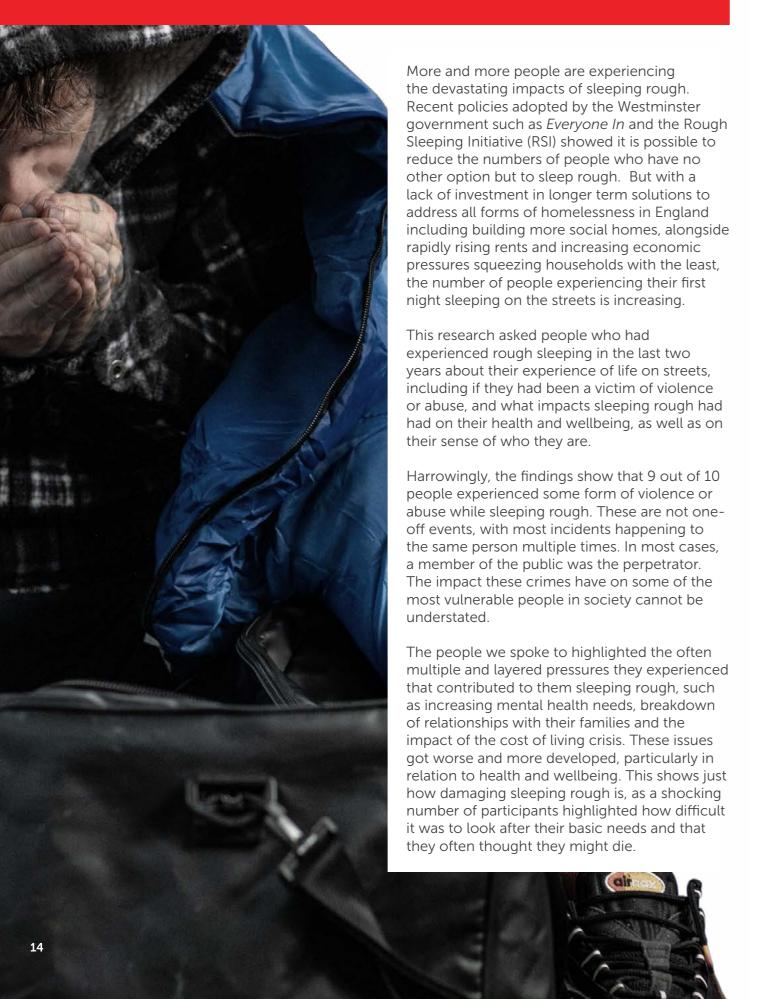
The Westminster Government should scale up provision of Housing First in England so that it is available to all who need it, and alongside this to ensure access to specialist supported housing for the minority of people with complex support needs for whom Housing First is not suitable.

To address housing affordability in the short to medium term the level of investment in Local Housing Allowance rates must be maintained beyond 2024/2025 and kept in line with inflation. The level of benefit cap should also be reviewed so it does not cause homelessness and, at a minimum there should be exemptions from the benefit cap for people sleeping rough or who qualify for Housing First

Over the long term the Westminster Government should put in place a long-term plan capable of increasing the supply of social rent homes to meet current and future need – 90,000 social rented homes in England per year for the next 15 years.



Introduction



This left people feeling like no-one cared about their situation, with assumptions being made about them by the public and politicians.

No-one chooses to be homeless. There is a reason behind it. I'm not asking for no big five storey house. Just a roof over my head.

People think that you're there because you want to be there, and that's not the case.

This contributed to a sense of loneliness, suggesting that people sleeping rough are some of the most isolated people in society. That disconnection from society exacerbates issues caused by sleeping rough and left participants fending for themselves, rather than contacting services or the police or others, when they found themselves a victim of crime.

The report makes for stark reading and shows how and why sleeping rough is so traumatic and often leads to a worsening of someone's situation. However, we know it does not have to be this way. There are interventions, backed by evidence, that can reduce someone's likelihood of having to sleep rough but also which can help people out of a cycle of homelessness and rough sleeping. That is why Crisis recommends that:

In the short term the Westminster
Government must remove the legislation
from the Criminal Justice Bill that will
criminalise people for being homeless,
akin to the Vagrancy Act. Instead,
genuine support should be put in place in
the formsof prevention programmes and
Housing First and enabling multiagency working between local authorities
and public institutions

- The Westminster government should scale up provision of Housing First in England so that it is available to all who need it, and alongside this to ensure access to specialist supported housing for the minority of people with complex support needs for whom Housing First is not suitable.
- To address housing affordability in the short to medium term the level of investment in Local Housing Allowance rates must be maintained beyond 2024/25 and kept in line with inflation. The level of benefit cap should also be reviewed so it does not cause homelessness and at a minimum there should be exemptions from the benefit cap for people sleeping rough or who qualify for Housing First
- Over the long term the Westminster Government should put in place a longterm plan capable of increasing the supply of social rent homes to meet current and future need – 90,000 social rented homes in England per year for the next 15 years.

People think that
you're there because
you want to be there,
and that's not the case.

About the research

Research methods, objectives, and participants

This report is informed by research conducted during the late summer of 2023. A survey of 157 people with current or recent rough sleeping experience (within the last two years) was conducted. The survey was completed face-to-face across homelessness services in a number of locations in England including the North West, North East, Midlands and London.¹³ The survey was complemented by 20 in-depth interviews. These were done either face-to-face or via online meetings. The survey focused on the following research questions reflecting upon people's experiences of sleeping rough, which build upon and update the existing understanding we have of the experience and impact of rough sleeping:

- **1.** How prevalent today are experiences of violence and abuse amongst people sleeping rough?
- **2.** What was the experience of the first night of sleeping rough like and what events shaped people's journeys to this point?
- **3.** What are the impacts of violence and abuse on the physical and mental well-being of people sleeping rough?

4. What sort of interactions do people sleeping rough have with others and local businesses in the community?

Research participants received £10 for completing the survey and £20 for participating in an interview. Those 157 people who completed the survey closely matched the demographics of the wider rough sleeping population in England¹⁴ in that the majority were male (89%), over three-quarters identified as British or Irish (77%) and 60% were aged between 35 and 54.

Women make up a disproportionately small amount of people seen rough sleeping. This is not because women are less likely to be homeless, but they experience more hidden forms such as sofa surfing or staying in squats. While women that do sleep rough are 'almost certainly being undercounted' as they bed down in 'hidden' places (i.e., sheds, empty garages) to try and keep safe. 16

Forty three per cent of participants had experienced homelessness aged 24 and younger, including 25% who experienced homelessness for the first time between the age of 13 and 17. Experiencing the loss of a secure base from which to develop into an adult has a huge impact and can be the trigger

of a lifetime of homelessness. This supports previous research which shows increased likelihood of experiencing homelessness as an adult if you have experienced it as a child.¹⁷

As a teenager, growing up. I was at home. But once I got kicked out of there, I never had my own place.

At the time they participated in the research, 40% of people were currently sleeping rough, 13% in hostels or floating shelter and 10% were sofa surfing. Overall, 79% of the participants were either sleeping rough or still homeless. Of the 32 (21%) participants who were in more settled accommodation, 18 28% felt that they were currently at risk of being forced to leave this accommodation, while 63% were worried that they would have no choice but to sleep rough again in the near future.

As a teenager, growing up,

I was at home. But once I got

kicked out of there,

I never had my own place.

Proportion of participants from each location: Manchester 25%, London 24%, Sheffield 15%, Grimsby 15%, Birmingham 17% and Salford 10%.

Surveys of the total adult population are typically a sample size of 2000, which represents the UK adult population of 44.7m (or 0.4%). There are around 3,069 people sleeping rough on any given night in England, and this survey therefore represents around 5% of people counted or estimated to be sleeping rough on any given night. See Department for Levelling up, Housing and Communities (2022) *Annual Rough Sleeping Snapshot in England: autumn 2022.* Online: DLUHC. https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2022

¹⁵ Bretherton, J. & Pleace, N. (2021). Women's Homelessness in Camden: Improving Data, Strategy and Outcomes. London: Single Homeless Project (SHP). Online: https://eprints.whiterose.ac.uk/197893/1/womenshomelessnessincamdenimprovingdatastrategyandoutcomes_flicandtheuniversityofyork_december2021compressed.pdf

Bretherton, J. and Pleace, N. (2018). *Women and rough sleeping. York: University of York.* Online: https://www.mungos.org/wp-content/uploads/2018/10/Women-and-Rough-Sleeping-Report-2018-Summary.pdf

Mitchell, E., Waring, T., Ahern, E., O'Donovan, D., O'Reilly, D. and Bradley, D.T. (2023). *Predictors and consequences of homelessness in whole-population observational studies that used administrative data: a systematic review.* BMC Public Health, 23(1), p.1610.

Settled accommodation is defined as: Private rented accommodation, social rented accommodation, supported housing and living in a property you own.

Chapter 1. Journey's into sleeping rough



1.1 Rough sleeping in England

Rough sleeping in England is increasing. Following several years of decline, between 2021 and 2022 the number of people sleeping rough grew by 26% to a total of 3,069.¹⁹ This is a snapshot figure derived from either a count-based estimate of visible rough sleeping, an evidence-based estimate meeting with local agencies to record those who are known to be sleeping rough or an evidence-based estimate meeting including a spotlight count. The annual nightly snapshot are helpful to show trends in rough sleeping levels but provide a minimum estimate and the levels of rough sleeping are higher than this.²⁰

Heriot-Watt University have developed a dataset known as 'core homelessness'. Based on triangulating six separate data sources this estimates rough sleeping is 2.5 to four times higher than official estimates. Projecting levels forward rough sleeping is estimated to rise by 9% by 2024.²¹

Increasing levels of rough sleeping are not inevitable. The response to the Covid-19 pandemic showed what effective policy intervention could achieve. The drop in rough sleeping numbers from 2019 reflects the actions of the Everyone In initiative that provided shelter to anyone who was sleeping rough, or at risk of doing so, at the time regardless of their eligibility for services. As the official count has started to rise again, this is – in part – because of the

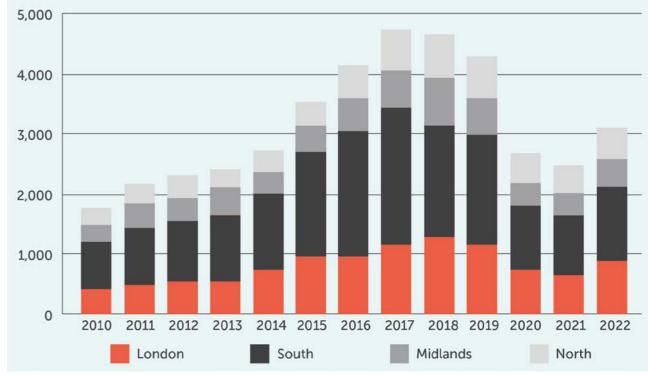
restoration of pre-Covid-19 policies and practices around housing support for people experiencing rough sleeping.²²

This increase in people rough sleeping is further reflected in other statistics. Most notably, new monthly data started to be recorded by local authorities on support for people rough sleeping.²³ These statistics provide information about both the number of new people and the total number of people

seen rough sleeping during the month. In September 2023, the total monthly rough sleeping count stood at 8,442 which was a 27% increase on the same time the year before. During this same period the number of new people seen rough sleeping increased by 15% to 2993 new people in September 2023.²⁴

Statistics reported by councils across England provide further confirmation of the increase in rough sleeping. Data shows that in 2022/23

Figure 1. Rough Sleeping in England, as officially estimated, 2010-2022.



(Source: DLUHC Homelessness Statistics.)

22 Ibid.

¹⁹ Department for Levelling up, Housing and Communities (2022) *Annual Rough Sleeping Snapshot in England:*autumn 2022. Online: DLUHC. https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2022

Fitzpatrick, S., Bramley, G., McMordie, L., Pawson, H., Watts-Cobbe, B., Young, G. (2023) *The Homelessness Monitor: England 2023*. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-monitor-england/the-homelessness-monitor-england-2023/

²¹ Ibid.

Department for Levelling up, Housing and Communities (2023), *Ending Rough Sleeping Data Framework,*September 2023. Online: DLUHC. <a href="https://www.gov.uk/government/publications/ending-rough-sleeping-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework-september-2023/ending-data-framework

²⁴ Ibid.



there were 14,790 households sleeping rough at the time of their application to a council for help. This has increased over almost a third over the course of a year (32%) and has more than doubled since 2018/19 (a 110% increase).²⁵

Data specifically focused on rough sleeping in London (CHAIN) provides further evidence on the increasing scale of rough sleeping. Over 4,068 people were sleeping rough in the capital between July and September 2023. This is an increase of 12% on the same period the previous year. Over half of people – 2,086 – sleeping rough in London at this time were new to the streets and, as with overall numbers, the number of new rough sleepers has increased since last year (by 13%).²⁶

Increasing levels of rough sleeping can also be set within the wider context of rising homelessness in England. Almost 300,000 households last year (2022/23) received help from English councils because they were homeless or threatened with homelessness. This has increased by 7% over the last year and is higher than pre-pandemic levels.²⁷

Poverty is a key contributory factor in homelessness and the plays a central role in the UK in shaping who is at risk of homelessness.²⁸ As with levels of rough sleeping and homelessness more widely,

poverty and destitution are increasing, meaning more and more people are struggling to afford to meet their most basic physical needs to stay warm, dry, clean and fed. In 2022, around 1.8 million households experienced destitution in the UK at some point over the course of the year. These households account for 3.8 million people and this number has increased by 61% since 2019, meaning more people are at risk of losing their accommodation and somewhere safe to stay.²⁹

1.2 Causes of homelessness

The causes of homelessness are multidimensional and there is rarely a single cause or trigger. Structural, interpersonal, and personal factors and their interaction with each other all play a role and the balance and influence of each can vary over time, place, cultures, and demographic groups within a society.³⁰

The main structural factors (meaning those outside of an individual's control) in the UK are housing market trends and policies, while the effects of changes in the labour market

take time to impact and can be mediated by welfare arrangements.³¹ Individual vulnerabilities, support needs and 'risk taking' behaviours (such as drug and alcohol use), often associated with people rough sleeping, need to be contextualised and viewed within the pressures associated with poverty and other forms of social disadvantage. Relationships – both personal and wider ones – can sometimes help safeguard against homelessness but in times of financial stress can become strained and limited in their effectiveness at helping to prevent homelessness.³²

Research into the current cost-of-living crisis shows just how much financial strain many people are living under and the stress this can cause with regard the relationships they have, for example being unable to afford travel to see others or socialise.³³ This demonstrates how deteriorating economic conditions can contribute to more individual and interpersonal vulnerabilities that can lead to homelessness.

1.3 Journeys into rough sleeping

As previous research makes clear, there is seldom a single cause to someone's homelessness.³⁴ This is borne out in

the experiences of the 157 people who participated in this research before sleeping rough and in what they felt had contributed to their rough sleeping (see Table 1 below).

When asked about specific events or issues they had experienced before sleeping rough, on average participants experienced 8 issues and almost half (48%) had between 8 and 20 separate issues. 6 out of 10 (61%/95) explained that they had had mental health issues. Half (53%/83) explained they had gone through family relationship issues and a similar proportion (52%/49) had experienced (personal) relationship breakdowns or issues.

While these experiences fall within what could be categorised as personal factors a similar proportion of people reported structural experiences prior to sleeping rough. For instance, over half (52%/81) spoke to struggling with the cost-of-living crisis and being unable to afford food and bills. Just under half (47%/74) said that they had struggled with the cost of renting and had experienced rent arrears, difficulty with meeting rent increases or being able to afford deposits or rent in advance to secure somewhere to live.

²⁵ Department for Levelling up, Housing and Communities (2023), Statutory homelessness: *Detailed local authority-level tables, April 2022 to March 2023*. Online: DLUHC. https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness.

Greater London Authority (GLA) (2023), Rough sleeping in London (CHAIN reports), Borough Reports 2023-24 Q2. Online: https://data.london.gov.uk/dataset/timeline/chain-reports.

²⁷ Department for Levelling up, Housing and Communities (2023), *Statutory homelessness in England: financial year 2022-23*. Online: DLUHC. <a href="https://www.gov.uk/government/statistics/statutory-homelessness-in-england-financial-year-2022-23/statutory-homelessness-in-englan

²⁸ Bramley, B. & Fitzpatrick, S. (2018) *Homelessness in the UK: who is most at risk?* Housing Studies. 33(1). 96-116.

²⁹ Fitzpatrick, S. et al. (2023) Destitution in the UK 2023. London: Joseph Rowntree Foundation. Online: https://www.jrf.org.uk/report/destitution-uk-2023

³⁰ Fitzpatrick, S. (2005) Explaining Homelessness: a Critical Realist Perspective. Housing, Theory and Society, 22:1, 1-17.

Fitzpatrick, S., Bramley, G., McMordie, L., Pawson, H., Watts-Cobbe, B., Young, G. (2023) *The Homelessness Monitor: England 2023*. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/homelessness-monitor/england/the-homelessness-monitor-england-2023/

Fitzpatrick, S., Bramley, G., McMordie, L., Pawson, H., Watts-Cobbe, B., Young, G. (2023) *The Homelessness Monitor: England 2023*. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/homelessness-monitor/england/the-homelessness-monitor-england-2023/

Allard, M. (2022) "I don't know what the winter's going to bring:" experiences of homelessness during a cost of living crisis. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness-knowledge-hub/cost-of-homelessness/experiences-of-homelessness-during-a-cost-of-living-crisis/.

Fitzpatrick, S. (2012). *Homelessness: causation*. In S. Smith (Ed.), International Encyclopedia of Housing and Home (1st ed., pp. 15–24). Elsevier; Johnsen, S., & Watts, B. (2014). Homelessness and poverty: reviewing the links. Heriot-Watt University; Bramley, G. and Fitzpatrick, S. (2017) Homelessness in the UK: who is most at risk? Housing Studies, Volume 3. Issue 1: 96-11.

The ambulance man, he put his hand to the wall, and he nearly slip, and he said my god, the ice has built up on the inside of the house - and the ambulance driver said he wouldn't have a dog living in these conditions.

Furthermore, 4 out of 10 (40%/60) had experienced issues with poor quality accommodation while the same proportion had struggled with changes to or issues with their welfare payments. Both experiences were reported as being beyond the control of the participant.

I lost my money from gambling. I lost £27,000 in in one hour on the online gambling. That is why I lost — because I was saving money, I rent private, not from agency, it doesn't matter how I went it but if you don't have money, you don't have accommodation.

I got my own place. 2017 I lost it. I kept complaining about the wastewater that was leaking from the flat above, a council property, and they didn't do nothing to help.

While there was a range of structural, interpersonal and personal experiences people had had prior to rough sleeping, when it came to asking which experiences had actually led to them rough sleeping, multiple issues were identified.

Seven of out 10 (69%/51) named the prohibitive costs associated with privately renting and/ or trying to secure a new private tenancy as a leading cause to their having to sleep rough.

This comes as no surprise given the issues with affordability in the private rented sector and the impact of the freeze on local housing allowance (which was in place when the research was conducted). Since the beginning of the pandemic, rents in the UK have risen by 12% on average yet, at the time of writing, housing benefit remained frozen at levels set

according to rent data collected during 2018-19. The Recent analysis showed what this meant for those relying on housing benefit to rent privately: just 4% of 1–3-bedroom properties listed in the last year on the Zoopla website were affordable to people who need housing benefit to help pay their rent. This was down from 12% in April 2022 despite the fact that 1.9 million households - over one in three who rent privately – need housing benefit to help pay for rent. The same should be a support of the same should be same s

I never had a guarantor, someone that would vouch for me, so sometimes if I had the money I would go and stay in a Travelodge or something. I mean I couldn't afford that forever, so it's just a vicious cycle basically.

Because of the homeless life I lived I weren't used to paying bills, having to manage money at such a young age that I think I had my property for about three weeks, four weeks. My debt rose because I was 16 and I didn't know about how to pay for gas and electric, council tax, rent, and at a young age.

Being unable to afford housing costs put strain on relationships and living arrangements. Of those who had experienced relationship breakdown and issues before rough sleeping, 64% said that family relationship issues and 60% reported that personal relationship issues had led to them having to sleep rough.

[I was] falling out with a friend and I had given up my flat to move in with him to help keep his bills down - we ended up falling out over rent.

I was paying him and he was saying that he was paying my half of the rent to the council and he wasn't. He was keeping it.

Oh, there's a little top up' and I thought I don't mind that because of the service charges, right, because it was in an over 55s building and I got a letter coming through saying £65 a month and I was thinking hang on am minute, this is double than what they were asking.

Other experiences that led people to sleep rough were issues with employment and low income (56%) and changes to or issues with benefits (47%).

Work is often seen as a protection against homelessness or as a means to help people out of homelessness, but employment cannot be understood as a simple panacea. The rise in insecure and low-paid work has given rise to more people struggling in in-work homelessness, meaning it can be very hard to secure affordable accommodation despite being in employment.³⁷



³⁵ Crisis and Zoopla (2023) Falling Short: Housing Benefit and the rising cost of renting in England. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/housing-models-and-access/falling-short-housing-benefit-and-the-rising-cost-of-renting-in-england/

³⁶ Crisis (2023) Freeze on housing benefit decimating low income renters' ability to find secure homes. Online: https://www.crisis.org.uk/about-us/media-centre/freeze-on-housing-benefit-decimating-low-income-renters-ability-to-find-secure-homes/

³⁷ Sanders, B. and Allard, M. (2021) 'Barely breaking even': the experiences and impact of in-work homelessness across Britain. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-homelessness-homelessness-homelessness-homelessness-homelessness-britain/

Once I lost my job, I didn't know I can apply for benefits. I didn't know that completely. My wife left after three or four months, she just found another man, vou know, so she hit me once again when I've been on the floor. And that is how it started.

Well, I was in a hotel for a couple of weeks but then the money goes. I could get a job, but I couldn't take the job because you live on the street.

Changes to the welfare regime, including the sanctioning of benefit recipients and the previous freezing of housing benefit have long been identified as a significant contributing factor to rising homelessness.³⁸ Research shows that these have disproportionally impacted those already in poverty and/or at risk of homelessness.³⁹ Indeed, almost half of participants reported that experiencing changes to or issues with their benefits directly contributed to them sleeping rough.

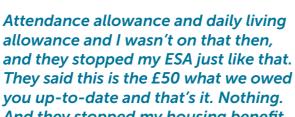
I can't get in to nowhere because they've sanctioned my benefits, so I've got no benefits at the moment, so I can't get anything.

allowance and I wasn't on that then, and they stopped my ESA just like that. They said this is the £50 what we owed vou up-to-date and that's it. Nothing. And they stopped my housing benefit.

Participants identified that being on benefits when looking for a property was often a barrier, with many landlords being unwilling to accept people on benefits. One of the drivers of this exclusion from the private rented sector for people on benefits comes from mortgage and insurance providers. 40 This has a knock-on effect, reducing the already limited number of properties available for those at risk of experiencing homelessness.

I was short of money - all the rooms I applied, they needed deposits, and you have to be working. Most of them they don't want DSS.

The poor condition or quality of accommodation also added to the pressures participants were under before sleeping rough. Over half (52%/31) of those who had experienced poor condition or quality accommodation said that it had contributed to them sleeping rough.



Of those participants (19) subject 'no recourse to public funds' (NRPF), the majority (68%/13) felt that this status had contributed towards them having to sleeping rough. Again, these findings sit within the wider on-going debate about NRPF and the impact this can have on people with uncertain migration status who are often 'locked out' of support services or

any financial assistance.41

or housing.

I didn't really know where to get support and then when I found out about this service and I started coming here but I had no recourse to public funds, meaning I couldn't get benefits or housing.

So, I found a telephone number to hostel, so they took me there but I wasn't eligible for any benefits at the moment, any universal credit.

Other experiences that contributed to rough sleeping included encounters with the criminal justice system: 6 out of 10 (59%/39)

of those who had served time in prison said that it had led to their rough sleeping.

...I started coming here but I

had no recourse to public funds,

meaning I couldn't get benefits

So now I'm panicking - I had mental health problems and that was my main mental health thing with like the worry of getting out, being homeless again, and basically going back down the same path again and that was my main worry, I was thinking - I started having like suicidal thoughts. So when it came to my release date it I was like have you got somewhere for me to go 'No, I'm sorry', so you can imagine my fear.

I came out 2021, January 2021, I did a whole 16. On being released I was released homeless and basically that was my main concern whilst I was doing the sentence. Before I went in jail I was already homeless, my life was all chaotic and everything else.

Fitzpatrick, S., Bramley, G., McMordie, L., Pawson, H., Watts-Cobbe, B., Young, G. (2023) The Homelessness Monitor: England 2023. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessnessknowledge-hub/homelessness-monitor/england/the-homelessness-monitor-england-2023/

Reeve, K. (2017) Welfare conditionality, benefit sanctions and homelessness in the UK: ending the 'something for nothing culture' or punishing the poor? Journal of Poverty and Social Justice, vol 25 no 1, 65-78; Shelter (2023) The chancellor must act: the housing benefit freeze is costing the country: https://blog.shelter.org.uk/2023/11/the-chancellor-must-act-the-housing-benefit-freezeis-costing-the-country

Wilson, W. (2023) Can private landlords refuse to let to benefit claimants and people with children? London: House of Commons Library. Online: https://researchbriefings.files.parliament.uk/documents/SN07008/ SN07008.pdf

⁴¹ Boobis, S., Jacob, R., and Sanders, B. (2019) A Home For All: Understanding Migrant Homelessness in Great Britain. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledgehub/types-of-homelessness/a-home-for-all-understanding-migrant-homelessness-in-great-britain-2019/ Morris, M. and Qureshi, A. (2021) Locked out of a livelihood: the case for reforming 'no recourse to public funds' London: Institute for Public Policy Research. Online: https://www.ippr.org/research/publications/lockedout-of-a-livelihood

Table 1. issues experienced before rough sleeping and leading to it

| Would you mind telling me if you experienced any of the following before sleeping rough? | | | Contrib rough | ed to sleeping | |
|--|--------|-----|---------------|----------------|---------------|
| Issue | Counts | % | Count | % | Туре |
| Mental health issues (including depression, anxiety, PTSD etc) | 95 | 61% | 57 | 60% | Personal |
| Family relationship breakdown/issues | 83 | 53% | 53 | 64% | Interpersonal |
| Other issues with the cost of living (e.g., unable to afford food, energy bills. etc) | 82 | 52% | 43 | 52% | Structural |
| Relationship breakdown/issues | 81 | 52% | 49 | 60% | Interpersonal |
| Being arrested by police (e.g., criminal charges, court etc.) | 78 | 50% | 30 | 38% | Interpersonal |
| Issues with the cost of renting (e.g., rent arrears, rent increase, can't afford deposit, or rent in advance) | 74 | 47% | 51 | 69% | Structural |
| Physical health problems and/or a disability | 69 | 44% | 26 | 38% | Personal |
| Served time in prison | 66 | 42% | 39 | 59% | Personal |
| Drug dependency issues | 65 | 41% | 43 | 66% | Personal |
| Poor conditions/quality of accommodation | 60 | 38% | 31 | 52% | Structural |
| Changes or issues with benefits | 60 | 38% | 30 | 52% | Personal |
| Debt | 58 | 37% | 30 | 52% | Personal |
| Issues with employment or low income | 55 | 35% | 31 | 56% | Structural |
| Concerned for my own safety because of neighbours' or other tenants' anti-social behaviour | 51 | 32% | 28 | 55% | Interpersonal |
| Alcohol dependency issues | 41 | 26% | 24 | 59% | Personal |
| Learning difficulties / neurodiversity (e.g., dyslexia, dyspraxia, autism etc) | 34 | 22% | 15 | 44% | Personal |
| Discrimination because of your class, race, sexuality, gender, disability, health condition or another part of your identity | 33 | 21% | 14 | 42% | Interpersonal |
| Difficulties reading or writing | 31 | 20% | 10 | 32% | Personal |
| Violence/abuse from a parent | 28 | 18% | 13 | 46% | Interpersonal |
| Violence/abuse from a partner | 26 | 17% | 10 | 38% | Interpersonal |
| Asked to leave accommodation because of your 'behaviour' (e.g., anti-social behaviour) | 24 | 15% | 11 | 46% | Interpersonal |
| Being in local authority care/fostered | 23 | 15% | 9 | 39% | Interpersonal |
| Sexual violence/assault/exploitation | 20 | 13% | 11 | 55% | Interpersonal |
| Immigration status meaning that you cannot work, receive benefits, or rent accommodation | 19 | 12% | 13 | 68% | Structural |
| Served time in the armed forces | 10 | 6% | 1 | 10% | Interpersonal |
| Issues with paying a mortgage | 7 | 4% | 2 | 29% | Structural |

(N=157 Source: rough sleeping survey)

The number of people forced to sleep rough is increasing. The reason people have to do so is multifaceted but is driven by structural causes rooted in the lack of affordable and accessible housing. As the findings of this research show, many had issues with mental and physical health alongside relationship problems and experiences of poor quality accommodation, but when it came to the leading contributor to their having to sleep rough, it was the lack of affordable accommodation that ultimately drove them to the streets.

As the next chapters of this report demonstrate, this is no place to live or try to exist. Sleeping and living on the street is dangerous and has serious implications for health and well-being. The next chapter examines what it was like for the people participating this research to have to face up to the first night on the streets.

Chapter summary

- The number of people forced to sleep rough increased by 26% between 2021 and 2022.
- Restoration of pre-Covid-19 policies and practices around housing support for people experiencing rough sleeping have contributed to rough sleeping increasing.

- The causes of homelessness are multidimensional and there is rarely a single cause or trigger. Structural, interpersonal, and personal factors all contribute to people having no choice but to sleep rough.
- On average participants experienced 8 issues and almost half (48%) had between 8 and 20 separate issues that would put them at risk of homelessness.
- 6 out of 10 people (61%/95) explained that they had had mental health issues.
- Half (53%/83) explained they had gone through family relationship issues and a similar proportion (52%/49) had experienced (personal) relationship breakdowns or issues.
- For instance, over half (52%/81) spoke to struggling with the cost-of-living crisis and being unable to afford food and bills.
- Just under half (47%/74) said that they had struggled with the cost of renting and had experienced rent arrears, difficulty with meeting rent increases or being able to afford deposits or rent in advance to secure somewhere to live.
- 7 of out 10 (69%/51) named the prohibitive costs associated with privately renting and/or trying to secure a new private tenancy as a leading cause to their having to sleep rough.

Chapter 2. First night sleeping rough



Nowhere to stay

The causes of homelessness can often seem complicated but for the people who participated in this research, having no choice but to sleep rough was often simple. It happened once all other options were gone or because someone's social network of friends and family had been used up or was unavailable. They were rejected from the last person, place, or option they thought they might have after losing their accommodation, realising that they had no other choice but to sleep rough. The consequences of that time of isolation and vulnerability can be brutal.

I would run out of friends and my girlfriend didn't want to know me and I thought I've got nowhere to go and so I would literally jump on the bus and go from the first stop, more or less, to the last stop, and then do the same back just so I was out of the cold. It was a horrible feeling. Horrible feeling.

It was February, it was cold, I said I don't have any experience - okay, and so I go a few people [who could let me stay at theirs] and everyone says 'No, no, no, no, no chance'.

I don't want to like overstay my welcome. She was like 'I understand that' and so later on that morning, which as the Friday, I put everything else that I had in my bag, I put that in, jumped on the bus.

No belongings

In the most part, participants did not have time to prepare for the emergency situations they faced. Not having sleeping bags, phones, clothes, or any of the equipment that might be considered necessary if they were going to sleep outside for an indeterminate period of time. Participants found themselves in a position with no belongings that are either sentimental or practical, whilst at the same time trying to meet their basic needs. This was the experience of people on their first night with nowhere to go and little or nothing to keep them warm or occupied.

I came into the city, and it was cold and lonely. Especially at Christmas time, do you know what I mean? I didn't have no stuff like I've got no sleeping bags and stuff, so was a cold, dark place. It wasn't nice. I got some cardboard. I just went and got some cardboard and made a little box. Put a lid on and just got in there and tried to keep as warm as I could until I could find the support

All my properties are stolen, no single pin left, because of my status.

Phones have become an important element of modern-day life and research shows this holds equally true for people experiencing homelessness.⁴² Participants highlighted how lost they felt without having access to a phone to look things up or contact anyone.

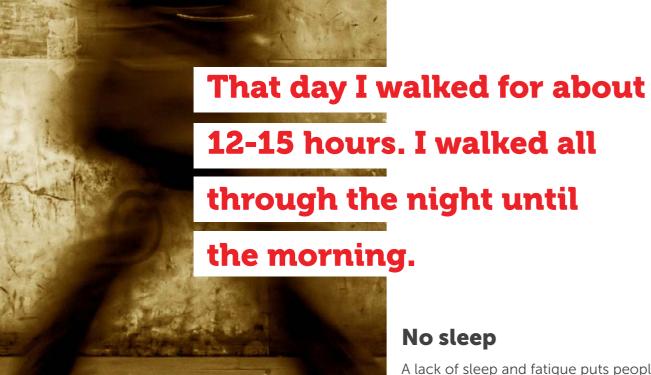
There was a night actually I misplaced my phone. I had nothing. Like nothing.

You are completely lost you know. I wanted to cry. I didn't know what to do. I even didn't have the smartphone with me because it was broken and I was completely lost.

Walking, walking, walking...

Participants' experiences of their first night sleeping rough had many things in common but what stood out was that everyone kept on the move. Walking or travelling on public transport to feel safe or to find somewhere that could be safe enough. It shows how lost people find themselves and that the only solution or option they have is to keep moving and to not stop until they are so tired that they have no choice but to rest. This contributes to the physical health issues and weight loss experienced by people whilst they sleep rough which will be explored further in chapter 4.

Rhoades, H. et al. (2017) *No digital divide? Technology use among homeless adults,* Journal of Social Distress and the Homeless Vol. 26, Issue 1; Striano, M. (2016/17) Digital Inclusion and Homelessness, Homeless in Europe, Winter 2016-2017. Brussels: FEANSTA.



That day I walked for about 12-15 hours. I walked all through the night until the morning.

It's hard to say what it was like. Cause it was that bad. I mean, it was. I was fearful. Really. That's the main word. You're walking around town.

I am walking, walking, walking. I can't sleep the first night, I was walking. I tried to sleep and no, I couldn't find any proper place for sleeping. It's horrible, the first few days, the first few weeks.

A lack of sleep and fatigue puts people's bodies under extreme pressure and quickly impacts on people's mental health. ⁴³ Very few participants slept on their first night as they could not find a place that made them feel safe enough switch off. This left them facing their first day of having nowhere to go with no sleep adding to the challenges they faced. A lack of sleep was highlighted throughout as being a major issue for all whilst sleeping rough; it was not just the first night but almost every night. The cumulative impact of a lack of sleep compounded the mental and physical situations they faced when having slept rough for a considerable period of time.

I still don't sleep good. I have still got one eye open — like for example you can hear a dog barking. Any little noise like that, or a tree whistling, you jump up because you think is that someone coming near me. You never get a good sleep. You have always got one eye open and you're lying there and your half asleep but you're not because you've got to keep your wits about you, just in case someone wants to - up to you and do anything to you.

I was completely lost to be honest. I have never been so lost. Like a dog who is looking for his owner, you know, so I was walking all night. I think in the morning I had been here and after that I can't remember now but some of this, I have been back to the train station - I was so tired; I just didn't care. I said it doesn't matter; I will go sleep here.

It was in a park, that was the first time. I couldn't sleep really. I couldn't really sleep, because everywhere was just darkness. I was thinking to myself – the first thing that jumped into my mind was this: if I survive this night then perhaps I would survive another night, and another night, and another night. I couldn't sleep, and to this very day I still can't sleep properly living rough.

Finding somewhere 'safe' enough

Those who did find somewhere to rest made choices that meant they felt 'safer', whether this was being out of sight, around people or near security cameras. These are often the only options left to people to make them feel more secure.

It felt safer in the open, yeah. Where there's cameras and, you know what I mean? Yeah, it didn't make me feel any better. It was still a sad night. I had a few sad nights to be fair. But you become thick skinned. You have to. Quickly.

The first night I slept rough, it was actually that there was some building work going on in town and there was two containers, and I just slept between there, and then there was loads of people around.

It felt safer in the open, yeah.

Where there's cameras and,
you know what I mean?

Yeah, it didn't make me feel
any better...

⁴³ Mental Health Foundation (2011) Sleep Matters: The impact of sleep on health and wellbeing. London: Mental Health Foundation. Online: https://www.mentalhealth.org.uk/explore-mental-health/publications/sleep-matters-impact-sleep-health-and-wellbeing

We were a couple of guys, we were all moving to the coach station which is open until 6 and nobody will trouble you. Everybody is sleeping, even the travellers You are scared, because it was the only place you can trust.

In survival mode

Having nowhere to sleep, no belongings and no support put participants into survival mode very quickly. They described survival being hour to hour and day to day. This shortening of time made making long-term decisions incredibly difficult and made them feel trapped in their situations. Facing barriers with cleaning, going to the bathroom, sleeping, or eating and drinking took up more time, and hence more mental capacity. Participants described how being in survival mode for even short periods of time affected their mental wellbeing and had an impact on how they interacted with others and the options they had available.

It's all in the moment, all very, very quick. All taking away future thinking. Everything is about survival mode.

You are problem solving in the minute. It's kind of like where am I, what am I doing? And you weren't going anymore than 20 minutes in advance in your processing. You were just kind of going 'Oh, it's getting cold now, I need to address this, I haven't got my shelter, I need to address this, oh, I'm pretty vulnerable in this space, I need to address this' and that is how you built it up and that is how you saw the world.

You've just got to live in the second. You can't think about what's happening in five minutes time, ten minutes time, tomorrow morning. Right now, you've just got to be where are you now.

Lonely and afraid

Sleeping rough is an isolating experience. Participants explained how fearful they were on their first night and how daunted they were at their uncertain future prospects. Sadly, these fears were not misplaced as the vast majority of reported that they experienced violence, abuse, pain and sadness.

Everybody is sleeping, even the travellers.

You are scared,
because it was the only
place you can trust.

I was fearful. Really. That's the main word.

It's hard to say what it was like. 'Cos it was that bad.

It was just a nightmare. It was terrible. It was like people will look at you badly.

I would feel like a person lost at sea with land 15 miles away, if I didn't understand that it's something I can do, I can manage that, because I've been through it. So actually I might say I can call it a blessing that I learned to deal with loneliness.

Homelessness is a daunting thing. A very daunting thing if you've never experienced it right, and if you're not conditioned to experiencing it.

Being on the streets quickly impacts people's emotional state and alters how they interact with the world and other people. Participants' experiences of their first night with no option but to sleep rough shows just how quickly the negative impacts start. There is fear, a lack of sleep, few belongings, likely a lack of the tools needed to survive outside being always on the move and getting into survival mode very quickly.

Chapter summary

- Many participants were fearful on their first night of rough sleeping which included; fear of the unknown, the vulnerability of having nowhere safe to go and dealing with the traumas that led to the situation.
- Many people were rejected from the last person, place, or option they thought they might have after losing their accommodation, realising that they had no other choice but to sleep rough.
- Participants found themselves in a position with no belongings that are either sentimental or practical, whilst at the same time trying to meet their basic needs.
- The majority of participants kept moving on their first night sleeping rough, whether by foot or public transport as they did not know where to go or what to do.
- A lack of sleep was highlighted throughout as being a major issue for all whilst sleeping rough; it was not just the first night but almost every night.
- Having nowhere to sleep, no belongings and no support put participants into survival mode very quickly which affected their mental wellbeing and had an impact on how they interacted with others and the options they had available.



Case study 1. David – prison leaver

When David was released from prison, he was initially found a place to stay in a hostel as he had nowhere else to go. During this time his probation officer was trying to arrange moveon accommodation.

David's probation officer failed to do this. This was despite David giving the officer the details of his nephew who could accommodate him for a while. He explained that his probation officer was always busy and stretched resulting in things not being done in time, meaning he had no move-on accommodation available for him.

Was always last minute, always last minute and then by the last minute it was too late sometimes.

David had to leave the hostel. With nowhere to go in a city he was unfamiliar with he found a park and a bench.

It was up to five days and I just slept on the bench.

David had no previous experiences of homelessness and the prospect of having nowhere to go and having to sleep in a park filled him with fear.

I was fearful. Really. That's the main word.

Despite his probation officer failing to arrange on move-on accommodation, David blamed himself for the situation he found himself in. He had always prided himself on being able to look after himself and take responsibility.

You know, I've always looked after myself and make sure I've had things right and obviously we're just getting in that situation. I'm thinking well...I'll blame with myself, even though it wasn't my fault.

Although he explained that while sleeping in the park he did not encounter many other people and kept himself to himself, this did not stop the fear and anxiety his situation generated.

I was scared. I was fearful and my anxiety — I think, my anxiety and my mental health well, they were

I was scared...
I think, my anxiety
and my mental health
well, they were
uncontrolled.

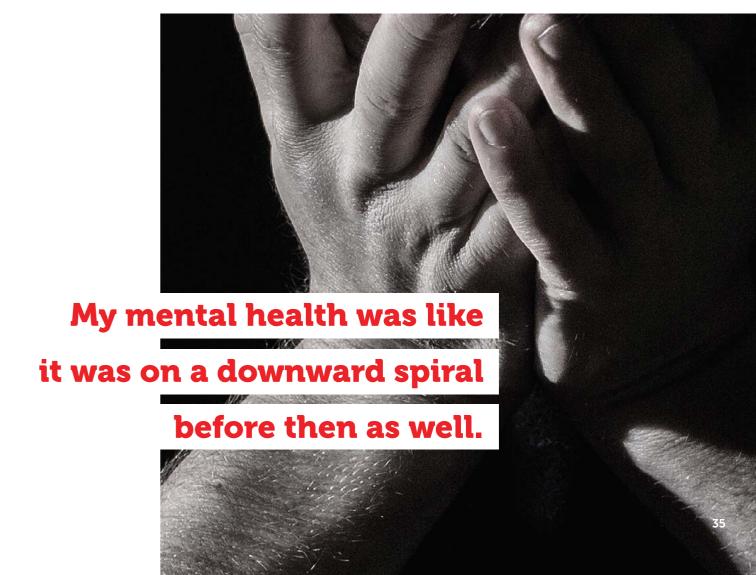
uncontrolled. That was controlling my body. That was controlling what I was doing. It wasn't me.

He went to the council but, because he had no local connection, he was told there was no help. David explained that his mental health really started to be affected at this point. He suffers with PTSD and being in the hostel had been hard. Having to sleep rough only added to the pressures he felt.

My mental health was like it was on a downward spiral before then as well.

Walking the streets during the day to while away time, he would feel stigmatised by others about his situation while everyone else went about their day. The uncertainty about his future and poor sleep took their toll to the point that sometimes he just has 'tears that keep coming'.

It was only after becoming a member of Crisis that David was able to get the support that he needed. His support worker was able to advocate on his behalf at the local council. David is not on the streets now and is staying with his nephew, which is where he could have been all along had he received the support he was entitled to.



Chapter 3. **Experiences of violence and abuse**



considered in relation to participants' traumatic first night's rough sleeping, this shows that fears for their safety were not unfounded.

Shockingly, half (51%) of research participants experienced being physically attacked whilst sleeping rough. Sixty one per cent had been threatened with violence or intimidated and 72% had been verbally abused or harassed.

One guy had a knife in his hand. I had to run away. I had to run away. I didn't know how to sort it out because he was like mad. I tried to speak to him and said okay, give me one second, and I just fucking ran away.

We were there sleeping, and one man came in. He was kicking us, kicking me, kicking her, and abusing us - there is nobody around there.

These are not one-off incidents: 66% of those who had been physically attacked reported being attacked on more than three occasions. Eighty three per cent had been threatened with violence and 92% had been verbally abused more than three times.

Sleeping rough is dangerous. People are more exposed to the vagaries in behaviour of others around them, especially the general public, with 70% of the last 738 incidents reported perpetrated by a member of the public. Of those participants who reported having been physically attacked, the perpetrator of the last incident was a member of the public in 76% of cases. Members of the public were responsible for 81% of instances when participants were threatened with violence and a similar proportion (80%) of cases in which they were verbally abused.

Assaulted badly in a couple of cases, with broken bones and all that. I've been attacked a number of times.

I've had families walk past me and I've had the kids saying horrible things - and the parents are just allowing it and I think that's such bad parenting - And then I think hang on, I'm homeless and I'm looking at you thinking you don't even know how to be a parent and yet you're looking at me like I'm a piece of shit on your



in a couple of cases, with broken bones and all that. I've been attacked

Table 2: Experiences of violence and abuse

| Have you ever personally experienced any of the following incidents in the period(s) you were sleeping rough? | Number of incidents | Percentage experienced | Percentage experienced 3 or more incidents | Percentage incident perpetrated by a member of the public | Percentage of last incidents reported to the police |
|--|---------------------------|------------------------|---|---|---|
| Had belongings stolen | 117 | 75% | 69% | 45% | 23% |
| Being verbally abused or harassed | 113 | 72% | 92% | 81% | 11% |
| Being threatened with violence or intimidated | 96 | 61% | 83% | 80% | 7% |
| Having things thrown at you | 83 | 53% | 82% | 86% | 11% |
| Being attacked physically (e.g., hit, kicked, or had any kind of violence | 80 | 51% | 66% | 76% | 23% |
| Had your belongings deliberately damaged or vandalised i.e., tent set on fire, slashed, bedding damaged | 73 | 46% | 74% | 55% | 18% |
| Being threatened with being reported to the police or being reported to the police | 69 | 44% | 74% | 72% | 10% |
| Being racially abused, harassed, or attacked | 42 | 27% | 79% | 76% | 12% |
| Someone urinating on you or near you | 29 | 18% | 68% | 79% | 10% |
| Being abused, harassed, or attacked because of your religion or beliefs | 14 | 9% | 64% | 64% | 21% |
| Being sexually assaulted, interfered with, or attacked | 9 | 6% | 66% | 67% | 22% |
| Being abused, harassed, or attacked because of your gender and/or sexuality | 8 | 5% | 64% | 63% | 38% |

(N=157 Source: rough sleeping survey)

Over half of participants (53%) had things thrown at them including bricks and beer cans, with 83% of participants experiencing having items thrown at them over three times. Many lost count of the number of times this had happened. Of all the forms of attack participants experienced, a member of the public was the most likely perpetrator of the last incident of throwing things, with 86% of last incidents being carried out by a member of the public.

Oh, I've had things thrown at me, I've been spat at, I've been called a tramp. All kinds of horrible names.

I was literally going to move in a couple of days, and they threw a brick over the wall, and it landed near.

Well, most times it is the people drunk on a night out and I've just put it down to alcohol, they're just idiots and they see you there and they show off in front of their mates and throw their beer at you.

Despite the small number of possessions that participants had, three-quarters (75%) experienced belongings being stolen or vandalised or destroyed (46%). Again, these were not one-off incidents, with 69% having their belongings stolen on more than three

occasions and 74% of those having their belongings damaged or vandalised on more than three occasions.

These actions were less likely than others to be undertaken by a member of the general public, but the public were still the most likely perpetrator, with 45% (things stolen) and 55% (vandalised) of last incidents carried out by a member of the public respectively.

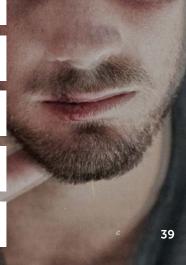
I just got a Stanley knife in my throat. They took all my money out of my pocket.

So two men just ran up to me and grabbed all my stuff. - It was a Friday night three weeks ago and I vaguely remember coming to and somebody standing over me and they punched me or kicked me on the side of the head and I've gone down like that, and by the time I managed to get myself to my feet my bag had gone.

Street robbery.

I had my stuff nicked last week. The only night I didn't put my stuff behind me. And I woke up at 2.15 and God I was like 'Oh man', do you know what I mean? I had only had my rucksack a week and it's just gone. Broke my heart.

...they punched me or kicked me on the side of the head and I've gone down...by the time I managed to get myself to my feet my, bag had gone.



There were also more targeted attacks and abuse on participants due to their gender, race and religion. This is unsurprising as people with protected characteristics are more likely to be victims of crime and abuse⁴⁴ and this will be increased by the added vulnerability of sleeping rough. As with all areas of society, intersectionality is vital when looking at a social issue as many experience situations differently based on who they are and how society treats them because of their identity or background.⁴⁵

Only a small proportion of participants (6%) stated that they had been sexually assaulted, interfered with, or attacked whilst sleeping rough. However, just under a third of those who had were female (28%). Also 33% of female identifying participants had been abused, harassed, interfered with, or attacked because of their gender. As highlighted in the previous chapter, people sleeping rough are far less likely to be female or identify as female (11% of this sample). This is often because of how vulnerable sleeping rough makes a woman and often leads to women staying in extremely difficult or dangerous situations to avoid having to sleep rough.⁴⁶

I just saw these three men. They came up to me and they were trying to remove my clothes, but thank God I wore tights, like three – and I wore jeans, and I wore two tops and

everything and I lay down with my chest, so they couldn't – maybe one shadow just came like lightning, so they ran away.

Twenty seven per cent of participants had been racially abused, harassed or attacked whilst sleeping rough. Of participants who described their ethnicity as being either Black, Asian, or mixed / dual ethnicity, this rose to 50%. For participants who identified as white, 19% said they had experienced racial abuse. Of all those who had experienced racial abuse, this happened on more than three occasions to 79% of people. The perpetrator of the racial abuse was most likely to be a member of the public, who were behind 76% of the last incidents participants had experienced. In addition, 9% of participants had been abused, harassed or attacked due to their religion or beliefs.

They could tell you that you are a terrorist or something, they could call you a monkey, they could tell you that you are a black boy.

People just ask me where you came from, and I say 'Hi, I'm from Poland', 'Then go back to your country'.

Shockingly, 18% of participants had had someone urinate on or near them whilst they were sleeping rough. Over half (68%) of

participants had this happen on more than three occasions, with the perpetrator being a member of the public in 79% of incidents. These experiences add to the existing evidence about members of the public treating people rough sleeping in inhumane and degrading ways.⁴⁷

I was sleeping in a doorway, and he got a bin bag and tipped it all over me. I've been urinated on in the street - on a Friday night when everyone is out clubbing and you're walking around for two or three days stinking of piss.

Somebody comes and piss over you, somebody that day stole my bag once, and worried about what could happen. Anything. Then the rain can come.

Many participants highlighted that incidents were more likely to take place on a Friday and Saturday with people being drunk and therefore more abusive. Participants reported the streets at these times being more dangerous with violent, drug and alcohol-related crime increasing. Again, being out in town centres with nowhere to escape to, services and public buildings closed, participants felt far more vulnerable to attacks from members of the public.

He was drinking - I remember he poured it on my shoe, and it entered my shoe, the drink, my socks were soaked - it is like that. It is a lot.

It's normally drunken people on the weekend, to be fair. The general public don't do it. Drunken people. You know how it is, anyway, I don't need to tell you. I know it's not acceptable, people do crazy things when they're drinking.

Participants were asked if they had been threatened with being reported to the police or actually reported to the police whilst sleeping rough. Just under half (44% of participants) had experienced this, with 74% having had it happen more than three times. A member of the public was the person to report them on 72% of the last occasions it occurred. This means that the participants of the research were not only attacked and abused by people who were in most cases a member of the public, but they were also reported to the police by members of the public.

3.2 Is violence and abuse getting worse?

Comparisons to previous research shows that experiences of violence and abuse against people sleeping rough has increased.⁴⁸

⁴⁴ Office for National Statistics (2023) *Victims of Crime*. https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/crime-and-reoffending/victims-of-crime/latest

⁴⁵ Cole, E. R. and Duncan, L. E. (2023) Better policy interventions through intersectionality. Social Issues and Policy Review, Volume 7, Issue 1, pp. 62-78.

⁴⁶ Sanders, B., Boobis, S., and Albanese, F. (2019) 'It was like a nightmare' The reality of sofa surfing in Britain today. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/types-of-homelessness/it-was-like-a-nightmare-the-reality-of-sofa-surfing-in-britain-today/

⁴⁷ Sanders, B. & Albanese, F. (2016) "It's no life at all": Rough sleepers' experiences of violence and abuse on the streets of England and Wales. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/ homelessness-knowledge-hub/types-of-homelessness/its-no-life-at-all-2016/

⁴⁸ Sanders, B. & Albanese, F. (2016) "It's no life at all": Rough sleepers' experiences of violence and abuse on the streets of England and Wales. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/ homelessness-knowledge-hub/types-of-homelessness/its-no-life-at-all-2016/. Whilst not like-for-like samples (2016 research had a sample of 458 participants, all of whom had slept rough in the last 12 months), the findings show a picture of increased experiences of violence and abuse for people with no other option than to sleep rough.

The proportion of those who have experienced one or more forms of attack and abuse (Table 3) has risen from 79% in 2016 and 90% in this study. The proportion of those who experienced violence has risen from 59% to 72%, and of those who experienced abuse from 35% to 51%. In addition, the proportion of people who reported having had belongings stolen was 54% and is now 75%.

Whilst these data sets are not directly comparable, it does paint a picture of a worsening situation for people sleeping rough. Crime statistics show that, in 2023 there was a 20% increase in the number of violent offences when compared with pre-pandemic levels. 49 Not having a door to close or a space that is safe means that it is people who are sleeping rough who are likely to feel the sharp end of an increase in violence.

3.3 Interactions with businesses, security, and the police.

Increasingly more of the spaces in our city centres are private businesses or private spaces watched over by cameras, security and the police. 50 51 Due to the places where people

find themselves sleeping rough, they may have more contact with these businesses, staff and security than the general public. Participants were asked about their experiences interacting with the staff of shops and businesses (see Appendix 3).

Table 3: Comparison of violence and abuse over time

| Experienced ever | 2016 | 2023 |
|-----------------------|------|------|
| Any violence / abuse | 79% | 90% |
| Things stolen | 54% | 75% |
| Verbal abuse/harassed | 59% | 72% |
| Violence | 48% | 61% |
| Things thrown | 34% | 53% |
| Physically attacked | 35% | 51% |
| Belongings damaged | 23% | 46% |
| Urinated on | 9% | 18% |
| Sexually assaulted | 7% | 6% |

(2016, N=458 & 2023, N=157 Source: 'It's no life at all' & rough sleeping survey)

Firstly, not all experiences were bad: 39% of participants said that they were offered food or money by shops and business and 20% said they were offered support.

The staff there knew I was there every night and every time they would come out, like the staff would come out and put stuff in the bin or come out for a cigarette they would ask if I wanted a coffee, because I wasn't making a nuisance of myself and causing disruptions.

I even ended up getting a quilt off the Hotel that they were throwing out because they knew I was there.

However, there were also lots of negative experiences, with half of participants (47%) stating that they had been verbally told to move on and 21% reporting that that the staff of shops and businesses would not let them in or near their business. There were also examples of business using more abusive and aggressive approaches to control spaces, with 20% of participants being threatened with violence while 16% were physically moved on. Participants also had their belongings touched and damaged (15%) or experienced having staff call the police to move them on (16%).

I wouldn't say violent like beating me up but yeah, just pushing me and putting their hands on me and that, yeah.

So, the security came in, he was so nasty, he didn't want to know. All you homeless people, you get out of this place. I told the security, don't tell them like that, they are women. And my friend said don't mind, and I said no, let's go. So, the cleaner was kicking us out, telling us to go, that this place is not for the homeless, that they will call the police.

He said - get outside, tell us to come out and push you, who told you to stay here, this, this, this. We said no, we are allowed to stay here. 'You don't have status, you can't stay here', he said it, and my friend was crying.

Despite having limited access to food in general whilst sleeping rough, participants described not being let into shops or restaurants because they were sleeping rough. Indeed, 17% of participants said that they had been discriminated against by staff, business owners and security. A further 8% of participants also reported that they had been taken advantage of and been exploited because of their situations.

I walked in and I went 'I'm homeless, can I have a cup of tea' and she went 'There you are, milk, sugar?' and I went yeah, and you get a big cup of tea. I thought what a touch!

⁴⁹ Office for National Statistics (2023) Crime in England and Wales: year ending March 2023: https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/yearendingmarch2023#:~:text=Overall%2C%20the%20police%20recorded%202.1,the%20year%20ending%20March%202022

Goold, B. J. (2004), 'Under Surveillance', CCTV and Policing: Public Area Surveillance and Police Practices in Britain, Clarendon Studies in Criminology. Oxford: Oxford University Press.

⁵¹ Nods, Pien. (2022) "Who Owns the City?: A Response to Privatised Public Space." Delft: Delft University of Technology.

Most of the time. There has been one or two times by security in places, like get out, what are you doing in here? And making the wrong assumptions for me. You know what I mean? I'm all good, I'm not stealing, I'm just coming in. Nah, get out.

I've got my couple of quid, and I just want to get a sandwich or a bottle of water or something and then the security guard's following me down the aisles. But because he's seen me on the street, he's got the assumption that 'Oh he's coming in here, he's going to nick something. Get out, get out'. Why? I just want to buy something.

3.4 Reporting crimes to the police

Despite the ongoing and repeated nature of the crimes the research participants experienced, it was unlikely that they would report these to the police. Overall, out of 733 incidents only 109 (15%) of the last incidents experienced by participants were reported to the police. The incidents that were most

likely to be reported were: being abused, harassed, or attacked because of their gender and/or sexuality; in these cases 38% of the last incidents experienced were reported to the police. Just under a quarter (23%) of the last incidents of being physically attacked or having belongings stolen were reported. The main reasons given by participants for not contacting the police were because they felt that the police would be unlikely to do anything (63%), because they feared repercussions from the perpetrator (9%), or because they dealt with the matter themselves (9%). This emphasises the point that the majority of the participants of this research did not feel like it was in their interest to report the - in some cases - very serious crimes they were victim of to the police.

I went to the police about them. Nothing got done. Gave statements and everything and nothing got done.

Half the time homeless people don't go to the police no more. Someone in town got beat up – they don't do nothing.

I didn't report because I was afraid. Afraid of them to come back to me. So. I left that one. I've stopped violence on people who are homeless on many occasions, or prevented violence, on many occasions.

I was always brought up that we don't talk to the police, you know, if something happens you deal with it. So basically, you don't snitch.

3.5 Enforcement and interactions with the police

In order to feel a degree of safety some participants kept to busy areas, where there are more cameras, police and security which can be reassuring and give people the feeling of safety so that they could rest. This, however, also brings people into more contact with the police and enforcement actions that are responding to calls from business about the presence and behaviour of people on the streets. Those who have no choice but to sleep rough can get caught up in approaches to create safer neighbourhoods and town centres due to being seen as antisocial and criminal, whether this is the case or not. This can then lead to people sleeping rough being pushed away from town centres and busy areas, making it more difficult for them to engage in support and making them more vulnerable.52

Participants of this research had negative interactions with police, security, and businesses but there are limited options for action to be take on these issues whilst they themselves are often at the sharp end of both crime and the law. Some participants highlighted what they felt was a lack of action by the police when they reported crimes to them.

I had been reported missing and I got a phone call off a mate saying - the police are looking for you, what's going on man - I've been in out for 6, 7 weeks and the police haven't even stopped me once. They must see me every day, but they haven't once stopped to namecheck me or anything, so the police have left me alone.

The police won't do nothing. You can go to the police station; you can phone them up. They're not coming out. I've had it before. They're not interested in what's going on. They're the ones that are moving people on.

⁵² Sanders, B. & Albanese, F. (2017) An examination of the scale and impact of enforcement interventions on street homeless people in England and Wales. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/types-of-homelessness/an-examination-of-the-scale-and-impact-of-enforcement-interventions-on-street-homeless-people-in-england-and-wales-2017/

There were also examples where participants' interactions with the police had been negative in that they stereotyped people based on them sleeping rough and in some cases were themselves violent or abusive to them.

I don't have any positive experiences. I have negative experiences. By seeing you on the street they will look at you as a lazy one. And then, number two, they look at you as a druggie. They group all of us together and then when they come close to you, they will look at you like this.

They've got a map and you're not allowed in the whole of the city centre for 24 hours. - As soon as you step into town, they can give a homeless person a fine - of £70. We haven't got money to buy a bag of chips! We can't even get a cup of tea in the morning, so how are we going to pay a £70 fine.

About three hours afterwards the police assaulted me, the police!

A bit of both really. I've had some nice interactions with a couple of - teams and the lady has come up to me and said, 'I haven't seen you around', you know what I mean. Then I've had one or two arseholes who've said, 'You can't stay here tonight mate'. A bit of both, bit of both. So yeah, some are good, and some are bad, yeah.

Participants reported that ongoing experiences of violence, abuse and crime had had an impact on their mental health, physical health and their relationships with other people. At the same time, sleeping rough made them more visible and vulnerable as they had nowhere to hide, recover or feel safe, effectively being always on show in spaces which are policed and inhospitable. The violence and abuse experienced also impacted participants' perceptions of themselves and their trust in others.

I've got no trust. I used to wear my heart on my sleeve, and I and don't trust nobody no more. Nobody. You only end up getting kicked in the face or something. I don't do it.

I've become hardened. I wasn't like this before, so it has changed me in a big way.

I've never really been an angry person. I'm not angry now but I'm bitter. I am just bitter. I don't do people.

Oh, that made me feel small. It made me feel small. It made me feel I wish the ground would open up and swallow me.

You've got one thing – and every time you hear a noise. You jump up

just in case. He could be a very nice person, but just in case because of past experience he might be someone that's violent or wants to do something and so you jump up and say, 'What you doing mate?' and you never quite switch off. It builds up and builds up.

3.6 Pushed further to the fringes of our society

Participants' experiences have in some cases given them a negative perception of the public and wider society. This is unsurprising, not only because of the abuse they have experienced but also because of the feeling of rejection and lack of care that has led them to and kept them on our streets.

I think society is bollocks mate, and I'm being honest with you. Bollocks. And it's just going to get worse, and I can see it. Cost of living and that. - This divide is going like [getting bigger gesture] that at the moment. I'm being serious. This divided. There ain't no middle. It's just going [too get worse].

Somebody was consoling me, one girl, she said don't do it, I said I don't love society, everybody rejects [you].

I don't know how to put my finger on it, but just people think that people who go to work and have a family and that are just normal and nice people. But they're not. It's like they're in disguise. Underneath they're horrible.

There was also a feeling of judgement among participants, with negative stereotypes being made about them because of the situation they were in. Findings of this research suggest that these assumptions can lead to people sleeping rough being dehumanised and contributing to the way that vulnerable people are treated by passers buy, business, and the law.

Misconception number one is the public thinks that homeless people don't want to work — I was working when I was homeless, so it was cash in hand and it wasn't much, but I did have some money that I used to buy stuff for my encampment, whether it was nails or pieces of wood. They might just say 'Oh he's a drug addict' but I don't think that they know the reasons and steps before that, of why that person has become like this. So, I think that they know, but they don't know the reasons behind it.

It is more I would say about the physical dirtiness. - when you look unkempt people tend to stay away from you. They don't know the reason why you look that way, - That stigma is something I would like to raise awareness from, because people generally – would say from what I've learnt people don't really care much.

Despite all of the stereotypes, misconceptions and abuse that can dehumanise people who are sleeping rough there is a strong truth highlighted in the below quote. That being, that every statistic, every person walked past, every victim of violence, abuse and robbery, every person having a mental health crisis whilst sleeping rough is a human being who experiences emotions the same as all of us. The only difference for those sleeping rough is that they do not have their own space to protect them from the dangers in our society.

I think that every single one of the people that are homeless are the same – the same as every single one of the people who are reading this report. They're humans. It's good to look at them in a human way. Look at it that way. Don't overcomplicate things, because everyone is human. Start - helping people that are homeless and then you might get better solutions.

Chapter Summary

- Overall, 9 out of 10 (141) participants had experienced at least one form of violence, abuse or theft whilst sleeping rough.
- Shockingly, half (51%) of research participants experienced being physically attacked whilst sleeping rough. 61% had been threatened with violence or intimidated and 72% had been verbally abused or harassed.
- These are not one-off incidents: 66% of those who had been physically attacked reported being attacked on more than three occasions. Eighty three per cent had been threatened with violence and 92% had been verbally abused more than three times.
- Of those participants who reported having been physically attacked, the perpetrator of the last incident was a member of the public in 76% of cases.
- Over half of participants (53%) had things thrown at them including bricks and beer cans, with 83% of participants experiencing having items thrown at them over three times.
- Despite the small number of possessions that participants had, three-quarters (75%) experienced belongings being stolen or vandalised or destroyed (46%).

• A third (33%) of female identifying participants had been abused, harassed, interfered with or attacked because of their gender. • 18% of participants had had someone urinate on or near them whilst they were sleeping rough. • Out of 733 incidents only 109 (15%) of the last incidents experienced by participants were reported to the police. • Some people highlighted what they felt was a lack of action by the police when they reported crimes to them. • Half of participants (47%) stated that they had been verbally told to move on and 21% reporting that that the staff of shops and businesses would not let them in or near their business. • Participants' experiences have in some cases given them a negative perception of the public and wider society. This is unsurprising, not only because of the abuse they have experienced but also because of the feeling of rejection and lack of care that has led them to and kept them on our streets.

Case study 2. Simon – Long term experiences of sleeping rough

Simon had a falling out with his mum and dad and experienced sleeping rough for the first time at 15 years of age.

15 years of age, I left my mum's house and I was sleeping on the street.

Simon secured his first property from the council at the age of 16, but at the time was not used to paying bills and managing a household. This led to debt which resulted in him quickly losing the council property. He has autism and ADHD with the trauma of sleeping rough from a young age which he believes this made it more difficult to maintain his accommodation.

Simon has had multiple experiences of sleeping rough, with short periods of stability or times in prison, but these have ended and led to him having no option but to sleep rough again. He has currently had his benefits sanctioned, meaning that he has lost the benefits to which he was entitled to. Despite this, Simon refuses to beg as he says people 'look at you like you're a piece of dirt'.

Whilst sleeping rough Simon had interactions with police that led him being placed under an order that banned him from the city centre for 24 hours. If he went into the city centre over that period of time he would have been arrested and fined. This meant that he could not reach the services that provided him with food and support. He also felt less safe being out of the city centre.

If you break that 24 hours they give a homeless person a fine of £70. We haven't got money to buy a bag of chips!

Also, while sleeping rough, Simon had multiple experiences of violence and abuse from the general public.

I've had a public member walk past me and call me a tramp. I was sleeping in a doorway and he got a bin bag and tipped it all over me. I've been urinated on in the street.

Although Simon has contacted the police, he reported that they have not responded with any action. These negative interactions with the police led Simon to feel as if there is no point dealing with them.

If you break that

24 hours they give

a homeless person a

fine of £70. We haven't

got money to buy a

bag of chips!

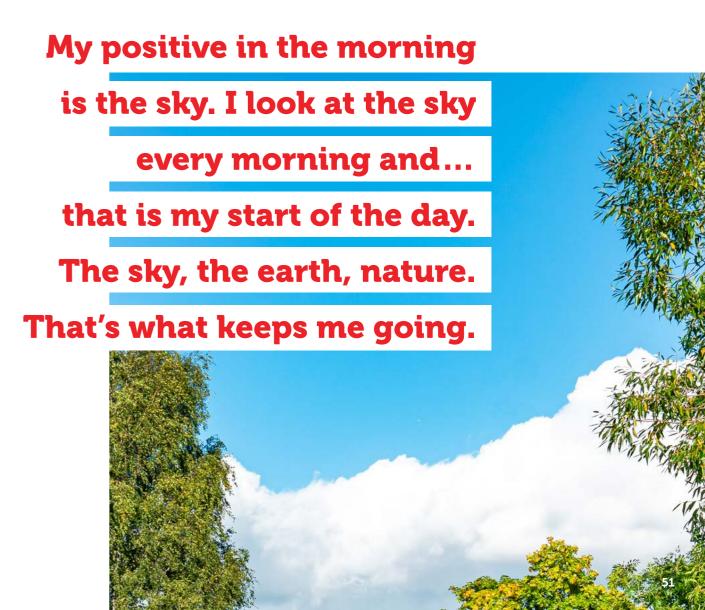
Sleeping rough has also impacted on Simon's health; he has had trench foot which has led to ongoing issues with his feet. He also needs insulin for his diabetes which he finds challenging to manage while sleeping rough. This contributed to an increase in Simon's drug and alcohol use to help him cope with the impacts of sleeping rough.

When I'm asleep in the car park I have a spliff of mamba and it numbs everything and I forget everything. It's to forget about the pain, forget about the heartache, forget about their problems, keep warm.

All of these issues combined have greatly impacted on Simon's mental health, leading to his making attempts to get sectioned and to commit suicide.

Simon is currently in contact with a psychiatric nurse and is hoping to get support with his mental health and drug use. Despite his experiences, he says he finds strength and positivity each day.

My positive in the morning is the sky. I look at the sky every morning and ... that is my start of the day. The sky, the earth, nature. That's what keeps me going.



Chapter 4. Impact of sleeping rough



We all need a safe stable home to build our lives and thrive. Sleeping rough puts incredible strain on people's physical and mental health and leave them with multiple illness and injuries that could have been managed or completely avoided if they had the foundation of a home.

Sleeping rough has a detrimental impact on people's health and wellbeing. It is traumatic and in too many cases leads to lives being cut short. Latest figures estimate that between 658 and 824 people died whilst homeless in 2021. The mean age of those who died was 45 for men and 43 for women. Suicide accounted for 13% of these deaths.⁵³ These shocking numbers show the very brutal impact of homelessness. Participants were asked about a range of impacts from physical and mental health, loneliness, and more personal questions about how they view themselves and society.

4.1 Physical impacts of sleeping rough

The physical effects of sleeping rough are significant. A lack of sleep, walking thousands of steps, limited protection from sun, rain and cold, malnutrition and the impact of self-medicating with alcohol and drugs all contribute to a worsening or the development of physical health issues.⁵⁴

53 Office for National Statistics (2021 Death of homeless people in England and Wales: https://www.ons.gov.uk/peoplepopulation andcommunity/birthsdeathsandmarriages/ deaths/bulletinsdeathsofhomelesspeoplein englandandwales/ previousReleases

54 Herzberg, D. and Boobis, S. (2022) The Unhealthy State of Homelessness 2022: Findings from the Homeless Health Needs Audit. London: Homeless Link. Online: https://homeless.org.uk/knowledge-hub/unhealthy-state-of-homelessness-2022-findings-from-the-homeless-health-needs-audit

For many people experiencing homelessness these physical challenges are met with little support, rest or knowing when it will end.

Every night I used to lay down and I used to think am I going to wake up in the morning.

Participants were asked about the impact sleeping rough had on their physical health, with 94% reporting at least one health issue, 78% reporting three or more health issues, and 39% having six or more. This shows just how damaging sleeping rough is on a person's physical health. The main physical health issues experienced by 70% of participants were those caused by extreme weather conditions, living in physical pain (69%) and issues with feet and legs related to walking (66%). These issues really highlight the strain placed on the body.

[Walking] a hell of a lot, and I think that was adding towards my weight loss as well. I was burning more than I was eating. Some people would be grateful for that I suppose but - I feel terrible, honestly.

I think that I've had prolonged coughing a lot and my coughing has done big damage to my lungs. It scarred my lungs. And that's what happens. When you cough it - makes the lungs weak and susceptible to infection - one day will kill me. There's no ifs, buts or maybes.

I sat down and I thought – my legs were saying listen mate, that's enough now. I want some rest. It's mental because you are just walking. You're walking from here to there to there. You're not really getting nowhere.

Trench foot where my feet have been wet, dry, wet, dry.

Participants reported other physical health issues related to the impacts of sleeping rough, including having issues with dental and oral health (62%), issues related to diet and hunger (55%), negative impacts of drink or drug use (54%), issues with breathing (46%) and some with life threatening conditions such as cancer or heart disease (10%). People who sleep rough typically have very poor access to health care services, which means that these self-reported health concerns are likely to be an under-estimation due to lack of diagnoses.



Everywhere was dark, nobody was there. I catch cold. So, I told the driver that I am feeling shivery, I can't breathe. He says he can drop me at hospital - they did me an x-ray, they said I had pneumonia.

I've lost so much weight since Christmas, honestly. I was like 12.5 stone, and I must be about 8 stone now.

The biggest problem, because my glasses have been broken and without glasses I cannot see properly and I spent a lot of time without glasses.

Participants were asked if their health issue had developed or had gotten worse whilst sleeping rough. Of the 54% of participants who had health issues related to drinking and drug use, 92% highlighted that these issues had gotten worse whilst sleeping rough.

Also high proportion of participants with a life-threatening condition (81%) said that it had gotten worse. Having to living in physical pain also got worse for 78% of those with that issue.

Yeah, with alcohol. And that don't help because – it helps in the beginning, so I have a few drinks and then it all comes, and then I blank it out, but then when it goes up here, I get more depressed. So, then I have another drink – it's a short-term fix.

I smoke mamba, I'm not happy about what I do, but I smoke mamba every day because it blocks out the pain. Stops the coldness... when I'm asleep in the car park I have a spliff of mamba and it numbs everything, and I forget everything.

...I'm not happy about what I do, but I smoke mamba every day because it blocks out the pain. Stops the coldness ...

The issues that participants said developed whilst sleeping rough included those relating to reproductive health with almost half (44%) of those who had this issue saying that it developed whilst they were sleeping rough.

Of those who had issues with their feet from walking, 31% had developed this whilst sleeping rough, and 31% of those who had issues with their sexual heath developed this whilst sleeping rough. As already stated, the

number of female participants is low but over a third (40%) indicated that they had issues with their reproductive health whilst sleeping rough.

Many of the health issues highlighted will have become harder to manage and monitor during periods of sleeping rough. No having access to medication, check-ups, keeping warm and dry or eating healthily will all exasperate existing issues.

Table 4: Impact of sleeping rough on physical health

| Which of the following effects has sleeping rough had on your physical health? | Total had issue | Percent with health issue | Of which got worse | Of which developed |
|--|--------------------|---------------------------------|--------------------|--------------------|
| Health issues caused by extreme weather conditions (hot, cold or wet weather) | 110 | 70% | 70% | 30% |
| Living with physical pain | 109 | 69% | 78% | 22% |
| Issues with feet and legs related to walking | 103 | 66% | 69% | 31% |
| Had issues with your dental/oral health | 98 | 62% | 76% | 24% |
| Health issues related to your diet / hunger | 87 | 55% | 70% | 30% |
| Negative health impacts of drinking or drug use | 84 | 54% | 92% | 8% |
| Health issues with breathing | 72 | 46% | 71% | 29% |
| Life threatening conditions such as cancer, heart disease etc. | 16 | 10% | 81% | 19% |
| Sexual health (e.g. HIV, gonorrhoea etc) | 13 | 8% | 69% | 31% |
| Reproductive health (periods, menopause, pregnancy etc.) | 9 | 6% | 56% | 44% |

(N=157 Source: rough sleeping survey)

4.2 Mental health impacts of sleeping rough

The stresses that lead to sleeping rough as well as the resulting abuse, uncertainty and anxiety led the majority of participants to experience a range of mental health issues. Of the 157 participants of this research, 86% had at least one or more mental health needs due to sleeping rough, 63% had three or more needs and 15% had six and over. This again shows that participants faced multiple and complex situations whilst sleeping rough.

The most common mental health impacts reported by participants were psychosis (experienced by 85% of participants), anxiety/generalised anxiety disorders and depression (both experienced by 75% of participants). Just over half (56%) of participants said that they experienced suicidal thoughts, while 29% experienced post-traumatic stress disorder (PTSD), 22% experienced antisocial/borderline personality disorder (ASPD/ BPD), 17% experienced obsessive-compulsive disorders (OCD) and 13% experienced bipolar disorder.

These issues can have a very real impact on a person's ability to interact with the world and people around them and may require intensive support and medication to regulate. In interviews many participants highlighted the suicidal thoughts and ideation they had whilst sleeping rough.

It was hell. I saw abuse, I saw disgrace, I was ashamed of myself. I was about to kill myself.

I've had like suicidal thoughts, but I just keep saying to myself, come on mate, you're out. Like things are not too good, but you're out.

I just snapped. I took 124
paracetamols, and I was drinking
vodka and - but I have never
-depression in my life, but this
time - I don't know - you can't do it
no more. You try so hard for so long
and everything - and you're the one
that gets fucked over at the end
of it.

I don't know how I'm still here to tell you the truth, do you know what I mean? - those years, I've tried to kill myself [multiple times]

Sleeping rough compounded existing conditions and these deteriorated during people's experiences of rough sleeping. The main conditions that got worse were bipolar disorder (86%), ASPD / BPD (85%) and anxiety / generalised anxiety disorders and depression which both got worse for 84% of participants.

The conditions that were most likely to develop were psychosis, with 93% of the 134 participants who reported having psychosis saying that it developed whilst sleeping rough. Suicidal thoughts developed for 27% once they had started sleeping rough as did PTSD for 20%.

It just heightens my anxiety because you're always on guard. You don't even realise it sometimes, but you always have to be on the ball. Anxiety, depression, paranoia. It's an accumulation of things and it builds up and all the things add up and you're stressed out, aren't you.

This year, that is how depressed I've been. I took myself to hospital and tried to get myself sectioned. Mental health - everything has gone.

But my mental, my mental health was like it was on a downward spiral before then as well.

57

Table 5: Impact of sleeping rough on mental health

| What impact has sleeping rough had on your mental health? | Total had an issue | Percent with health issue | Of which got worse | of which developed |
|---|--------------------|---------------------------------|--------------------|-----------------------|
| Psychosis | 134 | 85% | 7% | 93% |
| Anxiety / generalised anxiety disorders | 118 | 75% | 84% | 16% |
| Depression | 117 | 75% | 84% | 16% |
| Suicidal thoughts | 88 | 56% | 73% | 27% |
| Post Traumatic Stress Disorder (PTSD) | 45 | 29% | 80% | 20% |
| Antisocial / borderline personality disorder (ASPD) / (BPD) | 34 | 22% | 85% | 15% |
| Obsessive-compulsive disorders (OCD) | 27 | 17% | 81% | 19% |
| Bipolar disorder | 21 | 13% | 86% | 14% |

(N=157 Source: rough sleeping survey)



Even with all the difficulties experienced by the participants, some reflected on how they could continue despite the very real impacts of sleeping on the streets.

I'm quite resilient. I slept rough outside since I was 18 in the worst imaginable conditions, minus 20. If you can survive when it's colder than a freezer you can survive any inclement weather down here.

The only thing is that I am very prayerful. I depend on God. I don't depend on human beings because I got disappointed to people, I call friends.

But it's shown me how strong really, I am. I'm really strong, yes.

Others reflected on some of their previous experiences where they had felt particularly vulnerable and tried to avoid being forced into these again.

It's made me see how determined I am not to go back to them old ways. I can walk into them volatile situations that are in the city every single day - I can stay there for 30 seconds, experience what I used to be part of, and then realise how bad it was and walk out of it again, rather than walk in and just get sucked in by people.

So, I can stay focused and look back at how bad things were in my life before with drugs and crime and that. Now I'm clean and I'm not doing any crime that's enough to just keep me focused now.

4.3 Access to health services

With the multiple physical and mental health needs exhibited by participants, being able to access the health services needed is vital to stop these issues from escalating and becoming more problematic.55 However, for almost a guarter (23%/36) could only sometimes access the services they needed. Nearly half (47%) of participants said they were able to access the health services they needed either all the time (31%) or most of the time (16%). For 1 in 10 (11%/17) they rarely had access and 15% said that they were never able to access the services that they needed. Almost half of participants could only sometimes, rarely or nether access the health services they needed.

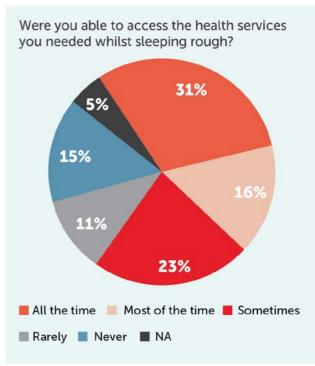
I haven't seen them for a while so they must be quite good, but I've been to the hospital a few times recently, and the doctor I - ended up in different parts of London and I couldn't get to him to get treated.

The only problem is my dentist. I haven't been to a dentist in ten years.

It has only been quite recently that I've realised that it's quite bad. But I'm in the process of sorting it and being referred to the mental health.

A lack of access to appropriate healthcare means that health conditions worsen while living on the street and drive a pattern of unpredictable and chaotic use of emergency services; people who sleep rough are six times more likely to visit A&E than the general population and stay in hospital three times longer.56

Figure 2: Access to health services whilst sleeping rough



(N=157 Source: rough sleeping survey, see Appendix 4).

⁵⁵ National Institute for Health and Care Excellence (2022) Integrated health and social care for people experiencing homelessness: https://www.nice.org.uk/guidance/ng214

⁵⁶ The Health Foundation, Promoting compassionate health care for homeless people: https://www.health.org. uk/improvement-projects/promoting-compassionate-health-care-for-homeless-people

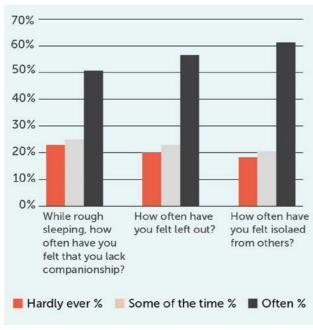
4.4 Loneliness, isolation and impact on self-perception:

Loneliness describes the experience of being unable or prohibited from attaining relationships with others built on trust, mutual benefit, and support.57 While most individuals feel lonely at some point in their life, loneliness affects some people more than others. 58 Feeling isolated in our society and unable to connect with other people can further exacerbate loneliness which can have its own long-term consequences. Loneliness cuts lives short, increasing the risk of early mortality by 26%, it can also put people at greater risk of poorer mental health. There appears to be an association between mental wellbeing and loneliness: research estimates that 60% of people experiencing chronic loneliness experience mental distress. compared to 15% of people who are not chronically lonely.⁵⁹

I am constantly lonely.

So, I am just doing my own thing. But it's lonely, that's the only thing, it's lonely. You know what I mean? And I don't like being lonely. Homelessness increases the likelihood of someone experiencing loneliness: 62% (97) participants said that they often felt isolated from others, compared to approximately 6% of the general population reporting that they often or always feel lonely, suggesting that those sleeping rough are much more likely to feel isolated.⁶⁰ This makes people sleeping rough some of the most isolated and lonely people in society.

Figure 3: Experiences of loneliness whilst sleeping rough



(N=157 Source: rough sleeping survey).

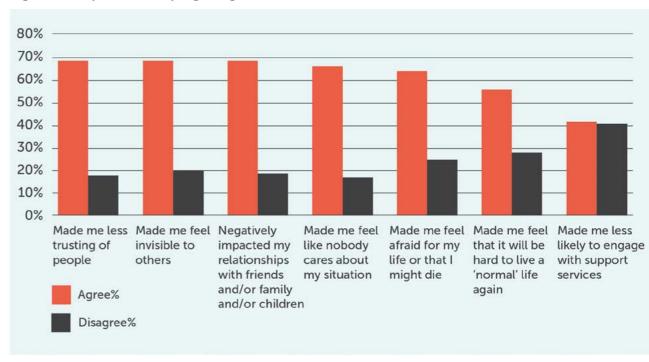
4.5 Impact on sense of self

Participants were asked about the impact that sleeping rough had on them as a person and their views of themselves and our society more widely. Two thirds of participants (69%) said that sleeping rough made them less trusting, feel invisible and negatively impacted on their relationships with family, children, and friends. Sixty six per cent felt that nobody cared about their situation. Shockingly, 64%/101 participants felt that sleeping rough meant that they were afraid for their lives or that they might die.

Sleeping rough can be deadly and, when it is not, it is a trauma that can have a significant impact on a person's life. This is highlighted by over half (56%) of participants feeling that sleeping rough has made it hard to live a 'normal' life again.

Just over two-fifths (42%) of participants said that their experiences made them less likely to engage with support as they become less trusting of others and institutions around them, potentially prolonging their homelessness.

Figure 4: Impact of sleeping rough on sense of self



(N=157 Source: rough sleeping survey, see Appendix 1).

Department for Culture, Media and Sport (2023) Community Life Survey 2021/22: Wellbeing and loneliness. Online: DCMS: <a href="https://www.gov.uk/government/statistics/community-life-survey-202122/community-life-survey-202122-wellbeing-and-loneliness#:~:text=Overall%20in%202021%2F22%3A,%2F20%20and%202020%2F21.8text=A%20composite%20loneliness%20score%20was%20produced%20combining%20the%20three%20indirect%20loneliness%20measures.

⁵⁸ Sanders, B. & Brianna, B. (2015) 'I was all on my own': experiences of loneliness and isolation amongst homeless people. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/health-and-wellbeing/i-was-all-on-my-own-2015/

⁵⁹ Campaign to End Loneliness, Facts and statistics about loneliness: https://www.campaigntoendloneliness.org/ facts-and-statistics/

Department for Culture, Media and Sport (2023) Community Life Survey 2021/22: Wellbeing and loneliness. Online: DCMS: <a href="https://www.gov.uk/government/statistics/community-life-survey-202122/community-life-survey-202122-wellbeing-and-loneliness#:~:text=Overall%20in%202021%2F22%3A,%2F20%20and%202020%2F21.6:text=A%20composite%20loneliness%20score%20was%20produced%20combining%20the%20three%20indirect%20loneliness%20measures Office for National Statistics (2021) Deaths of homeless people in England and Wales: https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsofhomelesspeopleinenglandandwales/previousReleases

I lost all my ideas about myself, yes, and I said why should I do this? Nobody has even seen and nobody even cares if I'm good or not.

Most people turn out to be horrible or not who they say they are anyway. So, I am just doing my own thing. But it's lonely, that's the only thing, it's lonely. I have always been a people person and had a good family. And that puts pressure on, added pressure.

It would take your soul away. Thinking you're in the middle of the city with 165 million people [I've] been out in the forest about 50 miles away from another human being — it's more lonely to be in the city.

Participants were asked whether sleeping rough had made aspects of their life harder and the results are stark (see Appendix 2). On all questions over half of participants felt that sleeping rough had made that aspect of their lives more difficult. It had the biggest impact on participants' ability to look after their basic needs and to stay physically healthy (both 80%/126). Participants also felt it had made maintaining their mental health (78%) and accessing support (77%) much more difficult.

You've got nowhere to use the bathroom, nowhere to shower, nowhere to wash, nowhere to change your clothes. Horrible. Really bad experience.

When it came to ambitions and life goals it was clear the negative impact experience of rough sleeping can have. Over two thirds of participants (77%) felt that sleeping rough had made it harder to achieve their life goals while 76%/120 said it made it harder to get or maintain work. Three quarters (75%) said that it made maintaining relationships harder. While two-thirds (66%) explained that it made it more difficult to maintain appointments and meet existing commitments, and 58% thought it had made it harder to manage any alcohol or drug issues.

It was clear that, for many people, their goals were very current, in particular about staying in control of drug and alcohol use or negative behaviour, mixed with aspirations for what comes next when they no longer have to sleep rough.

I'm hoping to get back in to work – stay clean and stay healthy basically, that's what I'm hoping.

I'm going to detox. I'm on the waiting list. So obviously when that helps, or when that stops, then I would like to go into your kind of field or something in this voluntary aspect, and then help people that have been through what I've been through.

For others the focus was on getting work and stability in their lives, making sure that they took the steps that would make this possible such as normalising their immigration status, securing training or volunteering.

I think that I'm just going to work on getting my CSCS card renewed and just try and get a few days' work.
Slowly and surely try and hopefully that will help my head.

I wanted to achieve giving me a status. Then get a job. or work with the charity because I love to serve.

Do some voluntary work in the third sector, see if I can refresh the skills that I had because I left [my job at a charity] in 2016 and now I'd have to do two years voluntary work – to get my skills and knowledge back up to where I was, but getting the job centre to stay off your back for that long – so that would be the idea scenario.

There was also a desire from some participants to reconnect with aspects of their lives that may have caused or been impacted by their experiences of homelessness.

Family, yeah, the hope of getting them back because they've distanced themselves from me, which is fine because I understand why they did that, because of my drinking and my behaviour, but I'm saying they're always shunning you. 'Change yourself, get yourself back to the [person] that we knew', the real me, and then we can bring you back. So, there is always that hope there. So, if I change my life around, I will rekindle that relationship. So that's my hope. That I get my life back.

Well, my ambition is that I want to do more writing. I'm a poet and also a singer and so yeah, I want to do that because it's not to make money or make myself famous or anything like that. It's just to please people and please myself.

...So, if I change my life around, I will rekindle that relationship. So that's my hope.

That I get my life back.

My ambitions now since experiencing the homelessness three times, I would love to eventually say hire an empty shop, because there are loads of empty shops around the town centres and cities now, and bring in other organisations like say Salvation Army and provide beds or a space for someone that is rough sleeping and only charge them say 50p or £1 a night so they've got warmth, they can get off the street for that night, and then in the morning signpost them to say Crisis and housing advice centres and stuff like that.

Participants explained how homelessness and sleeping rough had interrupted their lives and hindered their ability to achieve their goals and ambitions. Surviving sleeping rough and homelessness takes a huge amount of energy and takes away from that person's ability to contribute to society. Sadly, for many participants this was the case and homelessness robbed them of those opportunities where a stable home could mean that they are able to work towards their goals.

It cuts my wings. I had big plans previously, but now I have to start from the beginning.

When I am going to buy a car, I am going to go back to a job which I done before, and slowly, slowly, slowly build up once again — I don't want to come back to anything what I've done before in my life. I need to start something else.

I thought I could get a decent flat, settle, do what I want to do. There is never that happening. - You're putting homeless people in there, all in that block of flats, that is going to spark a drugs thing, — it's like putting a light to a fire. And there is always going to be something going on in there, but I'm not interested in them buildings, do you know what I mean. Not interested. You might as well put me in prison, do you know what I mean?

...I'm not interested in them

buildings, do you know what

I mean. Not interested.

You might as well put me

in prison...

Chapter summary

- Sleeping rough has a detrimental impact on people's health and wellbeing. It is traumatic and in too many cases leads to lives being cut short.
- Latest figures estimate that between 658 and 824 people died whilst homeless in 2021. The mean age of those who died was 45 for men and 43 for women. Suicide accounted for 13% of these deaths.⁶¹
- Participants were asked about the impact sleeping rough had on their physical health, with 94% reporting at least one health issue, 78% reporting three or more health issues, and 39% having six or more.
- The main physical health issues experienced by 70% of participants were those caused by extreme weather conditions, living in physical pain (69%) and issues with feet and legs related to walking (66%).
- 86% of participants had at least one or more mental health needs due to sleeping rough, 63% had three or more needs and 15% had six and over. This again shows that participants faced multiple and complex situations whilst sleeping rough.
- Just over half (56%) of participants said that they experienced suicidal thoughts.

- The most common mental health impacts highlighted by participants were psychosis (experienced by 85% of participants), anxiety/generalised anxiety disorders and depression (both experienced by 75% of participants).
- For 1 in 10 (11%/17) they rarely had access and 15% said that they were never able to access the services that they needed. Almost half of participants could only sometimes, rarely or nether access the health services they needed.
- Homelessness increases the likelihood of someone experiencing loneliness: 62% (97) participants said that they often felt isolated from others, compared to approximately 6% of the general population reporting that they often or always feel lonely.
- Two thirds of participants (69%) said that sleeping rough made them less trusting, feel invisible and negatively impacted on their relationships with family, children and friends.
- 66% felt that nobody cared about their situation.
- Shockingly, 64%/101 participants felt that sleeping rough meant that they were afraid for their lives or that they might die.

⁶¹ Greater London Authority (GLA) (2023), Rough sleeping in London (CHAIN reports). Online: https://data.london.gov.uk/dataset/timeline/chain-reports

Chapter 5. Ending rough sleeping



As the research demonstrates, sleeping rough is dangerous, traumatic and has devastating impacts on people's health and wellbeing. It does not have to be this way. As with all forms of homelessness, rough sleeping can be ended through different policy choices new approaches and more targeted funding.

Ending homelessness doesn't mean no-one will ever lose their home again. It means it will be prevented where possible, and when it does happen there's a quick solution which helps everyone into a safe and settled home to build a decent life and meet their true potential. With the right political will and policy choices we can design a system which prioritises preventing homelessness first and ensures anyone experiencing it is helped quickly into secure housing.

5.1 Preventing Rough Sleeping

The best way to stop the negative impact of sleeping rough is to prevent it from happening in the first place. Prevention can involve services and interventions being available to identify and support people who might be at risk of homelessness in the future or interventions that stop someone from becoming homeless at the point that it takes place.

...try and understand their behaviour. Don't just dismiss them as they're disruptive and kick them out of the school...

Early or upstream prevention is focused on reducing the long-term risk factors associated with homelessness. This research, alongside other evidence, shows many people experience homelessness under 18 and therefore providing the right support for children and young people could help prevent homelessness happening later on in life. This is particularly seen in the link between young people leaving care and sleeping rough, with 8% of those identified as sleeping rough in London being a care leaver. 62 Reducing the number of adverse childhood experiences (ACE's), which can be an indicator of future homelessness, would help to reduce the number of young people becoming homeless in the first place and reduce the potential of future rough sleeping.⁶³

I would say if you see a child playing up, a school kid, take him in to a room after school - and speak to him - give me ten minutes, five minutes, and talk to me. And try and understand their behaviour. Don't just dismiss them as they're disruptive and kick them out of the school and 'Oh, we don't want nothing to do with you' because years down the line that doesn't happen and they end up in the prison system, and then their whole life spirals out of control. So just talk to them.

Prevention also means ensuring that people have access to holistic support and looks at their situation in the round. Linking services so that they can identify people at risk of homelessness as part of other assistance including support for benefits and financial issues, health and wellbeing, social care, immigration and probation services can help to ensure that someone's housing situation is also considered.⁶⁴ Many participants had pre-existing support needs that contributed to them becoming homeless and their needs increased during periods of rough sleeping. If appropriate support is provided early, it is possible to identify the risk of homelessness at an earlier stage.

Prevention is better than the cure. Of course, it is, definitely. Prevention. Preventing people from becoming homeless in the first place. Especially in my own circumstances where obviously - there wasn't the awareness of mental health issues.

An example of prevention that links housing and healthcare services is the Pathway model. The healthcare system often fails to prevent homelessness, and too many people are currently discharged from hospital onto the streets. Pathway, a homeless health charity, has created a model of support that brings together multi-disciplinary services to avoid discharges onto the street. It is a

Greater London Authority (GLA) (2023), Rough sleeping in London (CHAIN reports). Online: https://data.london.gov.uk/dataset/timeline/chain-reports

https://www.cardiff.ac.uk/research/explore/find-a-project/view/2500988-upstream-cymru

Dunn, L. (2022) 75 Ways to Prevent Homelessness. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/

well evidenced and effective approach to supporting people who are homeless, helping to prevent them being discharged without somewhere safe to stay, and connecting them with local services, such as a GP, to ensure that their health needs are supported. Similar models of specialist NHS services also exist for general practice, mental health, and substance use.

Crisis is calling on the Westminster Government to prevent people being discharged from hospital to the street in England, by adopting evidence-based approaches such as the Pathway model to ensure health and housing services work together.⁶⁵

5.2 Intensive support

A large proportion of participants had multiple issues that contributed to them sleeping rough. The more pressure someone is under, the more intensive the support they need to gain more stability. Critical Time Intervention (CTI)⁶⁶ delivers intensive support over an extended time to ensure that people in complex transitionary situations get the support that they need. It is a particularly important when someone is leaving prison, hospital, or another institutional setting to ensure that there is a plan in place to help with the transition and the additional support needs that might make their accommodation

situation precarious.⁶⁷ The approach works by providing access to permanent housing and intensive, time-limited and focused support to help people settle into their home and access mainstream support services. It is a well-evidenced approach in the US, where randomised control trials have found it beneficial for military veterans and people with a history of mental illness while being discharged from mental health institutions. Critical Time Interventions have been variously found to have a positive effect on housing stability, health, wellbeing and relationships in the US and the Netherlands. Crisis is piloting this intervention in relation to people leaving prison in Liverpool and Swansea.68

For those who have already experienced the trauma of sleeping rough and face other complex challenges, including mental health needs, substance misuse and experience of complex trauma. Housing First is a well evidenced intervention. Housing First⁶⁹ recognises that simply providing a place to live is not enough to reverse the damage caused by entrenched homelessness. It offers secure housing as well as wraparound support that keeps someone in that housing and enables people to deal at their own pace with any issues that might put that person at risk of homelessness. To achieve this, Housing First must be fully integrated with healthcare. Joint housing, health, and social care

commissioning of Housing First programmes should become the norm and having specialist healthcare professionals located within Housing First teams can also reduce barriers to care. There also needs to be strategic and operational engagement with the criminal justice system, in particular to prevent homelessness when people with high and complex needs are at risk of homelessness on leaving prison.

Housing First has also been shown to be effective where young people leaving the care system also have high and complex support needs which leave them at risk of homelessness. To It also has a role to play in providing settled housing for survivors of domestic abuse, both in preventing homelessness and in providing a route out of rough sleeping.

Crisis is calling on the Westminster Government to scale up provision of Housing First so that it is available to all who need it, and alongside this to ensure access to specialist supported housing for the minority of people with complex support needs for whom Housing First is not suitable.

Underpinning these approaches to housing someone sleeping rough is the need for assertive outreach to locate and engage those at risk of becoming 'entrenched' in

sleeping rough. Assertive outreach teams aim to work with people sleeping rough for a long time and have the highest levels of support needs.⁷² The teams use an integrated model of support, drawing on a range of services including drugs, alcohol, and mental health. The primary objective of assertive outreach is to rehouse people in permanent accommodation. Teams work with people using an open ended and persistent approach. This is not to be confused with coercive or punitive approaches. There is some positive evidence on the impacts of assertive outreach, including evaluations of the Rough Sleepers Unit (RSU) and Rough Sleepers Initiative programmes in England and Scotland, and of Street to Home in Australia. The use of the approach under the RSU contributed to reducing the number of rough sleepers by approximately two thirds within three years.

For approaches like these to be imbedded in the way a local authority works requires local strategies and joined work by services. An approach that has been successful in parts of both America, Canada and Australia is called Built for Zero,⁷³ which aims to identify those experiencing or at risk of homelessness through their interactions with services. The aim is to then identify the support needs they have and develop a strategy to end that person's homelessness. As the approach continues the aim is to reach a point where

Page, E. and Hicks, C. (2023) *Beyond the Ward: Exploring the Duty to Refer in Hospital Settings*. London: Pathway. Online: https://www.pathway.org.uk/publication/beyond-the-ward-exploring-the-duty-to-refer-in-hospital-settings/

^{66 &}lt;a href="https://www.criticaltime.org/cti-model/">https://www.criticaltime.org/cti-model/

Downie, M. (2018) Everybody In: How to end homelessness in Great Britain. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/the-plan-to-end-homelessness-full-version/introduction/

⁶⁸ Crisis (2023) Let's Make History: A Manifesto for a Future Free from Homelessness. London: Crisis. Online: https://www.crisis.org.uk/get-involved/campaign/make-history/

^{69 &}lt;u>https://homeless.org.uk/areas-of-expertise/housing-first/</u>

Dixon, J. et al. (2021) *Relationships First? The initial two years of Haringey Housing First Project for Care Leavers.* London: Centrepoint. Online: https://centrepoint.org.uk/research-and-reports/housing-first-care-leavers-evaluation-initial-two-years-haringey-housing-first

⁷¹ Domestic Abuse Housing Alliance, *Whole Housing Approach Toolkit*: https://www.dahalliance.org.uk/ https://www.dahalliance.org.uk/ https://www.dahalliance.org.uk/

⁷² South London and Maudsley NHS Foundation Trust, *Assertive Outreach Rehabilitation Team*: https://slam.nhs.uk/service-detail/service/assertive-outreach-rehabilitation-team-aort-283/

⁷³ https://community.solutions/built-for-zero/the-movement/

anyone who is sleeping rough is supported into settled accommodation immediately. This does not mean that no one will experience the issues that lead to sleeping rough but that if it does that homelessness is short lived and sustainably ended. This as do the other support highlighted above require services to work together and for holistic and people centred approaches be taken by services to end each individual homelessness.

Crisis is calling for the Westminster
Government to ensure people are not forced
to sleep rough in the first place through
local or combined authority Prevention
Programmes that fund evidence-based
housing and support models which respond
to the needs of people at highest risk of
homelessness at different points in their
journey. This should include funding for
Critical Time interventions, and the national
rollout of Housing First. The best available
research shows that at least 16,450 people
across England need Housing First to end
their homelessness.⁷⁴

Further, the Westminster Government should explore building on the Duty to Refer introduced in the Homelessness Reduction Act (2017) to introduce a Duty to Prevent on public bodies, that will enable multi-agency working between local authorities, health, social care, and others.

5.3 From enforcement to ending homelessness

As this research shows, people sleeping rough are far more likely to experience violence and abuse than the public. That is why the campaign to repeal the outdated Vagrancy Act⁷⁵ was so important, the most vulnerable people in our society should not be criminalised, for the crime of being poor and because society is not able to prevent or end their homelessness. Previous research from Crisis demonstrates that criminalising people sleeping rough pushes them further away from support services and makes them more vulnerable.⁷⁶

The proposals in the Criminal Justice Bill currently passing through Parliament replace much of the Vagrancy Act and goes further. If the proposals become law in England and Wales, it will continue a shameful tradition of criminalising people sleeping rough and so poor they have no choice but to beg to feed themselves. The legislation takes a broad approach to tackle what it calls 'nuisance' rough sleeping and begging, with additional police and local authority powers that mean anyone even suspected of intending to sleep rough or beg can subject to enforcement action by the police. The enforcement action possible includes moving people on and imprisoning them or fining them up to £2,500 if they do not comply. The broad definition

of 'nuisance' rough sleeping also contains within its subjective elements, such as holding signs or written words that can be considered 'insulting' and elements that dehumanise people sleeping rough, such as considering people to have 'excessive smell'. The Bill therefore plays into stereotypical judgements about people sleeping rough and dangerously enables enforcement action to take place as a result.

The Criminal Justice Bill also enhances the powers available to the police and other local agencies under the Anti-social Behaviour, Crime and Policing Act 2014. Sheffield Hallam University's 2022 research into the use of PSPOs, found that many PSPOs contain provisions that directly targeted people experiencing street homelessness.77 They found that 'the dispersal powers associated with the PSPO created vicious cycles of intimidation, dispersal and displacement'. This displacement meant that people were moved away from the areas where they accessed support, resulting in missed opportunities for meaningful engagement. Whilst some the participants reported that on occasions policing bodies were supportive. They also reported that 'PSPOs did not change their behaviour, but instead made their lives more difficult and unpleasant'. We need to ensure that these new powers are not used disproportionately against people experiencing street homelessness and

that punitive responses are replaced with productive partnership working to find lasting solutions to end people's homelessness.

Crisis' work with the national police chiefs' council (NPCC) highlights the important role police can play in connecting someone sleeping rough to support. 78 This will also help to end someone's rough sleeping rather then moving it to somewhere less obvious, it suggests that any enforcement activity needs to link up with genuine offers of support in order to be successful. Police can play an important role in linking vulnerable people sleeping rough with the types of services and activities outlined above. Having interactions with police being a positive step towards ending someone's homelessness instead of a purely criminal interaction that can push people further away from the support they need.

Crisis is calling for the Westminster Government to remove the legislation from the Criminal Justice Bill that will criminalise people for being homeless, akin to the Vagrancy Act. Instead, genuine support should be put in place in the forms of prevention programmes and Housing First and enabling multi-agency working between local authorities and public institutions.

⁷⁴ Blood, I. et al. (2018) Implementing Housing First across England, Scotland, and Wales. London: Crisis. Online: https://www.crisis.org.uk/media/239451/implementing_housing_first_across_england_scotland_and_wales_2018.pdf; Crisis (2021) Home for All: The case for scaling up Housing First in England. London: Crisis. Online: https://www.crisis.org.uk/media/245740/home-for-all_the-case-for-scaling-up-housing-first-in-england_report_sept2021.pdf

⁷⁵ Morris, N. (2019) Scrap the Vagrancy Act. London: Crisis. Online: https://www.crisis.org.uk/media/240604/cri0220_vagrancyact_report_aw_web.pdf

⁷⁶ Sanders, B. & Albanese, F. (2017) An examination of the scale and impact of enforcement interventions on street homeless people in England and Wales. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/types-of-homelessness/an-examination-of-the-scale-and-impact-of-enforcement-interventions-on-street-homeless-people-in-england-and-wales-2017/

Heap, V. Black, A. & Devany, C. (2022). Living within a Public Spaces Protection Order:
The impacts of policing anti-social behaviour on people experiencing street homelessness. Sheffield: Sheffield Hallam University. Online: Living within a Public Spaces Protection Order: the impacts of policing anti-social behaviour on people experiencing street homelessness | Sheffield Hallam University (shu.ac.uk)

⁷⁸ Crisis and the National Police Chiefs' Council (2021) From enforcement to ending homelessness. London: Crisis. Online: https://www.crisis.org.uk/ending-homelessness/resources-for-practitioners/housing-centre-guides/

As well as putting evidence-based housing and support interventions in place, an important way to support engagement with people who are forced to sleep rough is to ensure there is an offer of help, available to everyone. In the pandemic, the Everyone In offer saw people brought into the safety of shelter, with access to support services where they were available. The Westminster Government should build on these positive learnings and outcomes and introduce a Somewhere Safe to Stay duty, which would provide an offer of safe accommodation for everyone sleeping rough, from where interventions to meet their needs and resolve their rough sleeping can be offered. To ensure the success of this duty, local authorities would need to be adequately resourced, and there would need to be interim accommodation as well as long-term housing available.

5.4 Secure and affordable accommodation

Before participants slept rough for the first time, they were often in insecure accommodation or experienced financial issues that meant they could not remain in or find new accommodation when they needed it. This then made them particularly vulnerable to having no choice but to sleep rough. Having nowhere to live should not be the consequence of a relationship breakdown or

losing your job or experiencing a deterioration in your mental or physical health. Keeping people housed is the best way of preventing homelessness.

An ongoing policy ask of Crisis is that Local Housing Allowance rates are kept in line with inflation. It is therefore positive to see the uplifting of Local Housing Allowance rates to the 30th percentile rent from April 2024 across Great Britain. However, this level of investment needs to be to ensure people are not priced out of areas or risk losing their homes again when rents go up. In addition, in areas where housing affordability is most acute, the overall benefit cap means that people in receipt of Local Housing Allowance do not receive the right level of financial support when it is invested in or maintained. The current benefit cap levels were set in 2016 to reflect the then median household wage, and have only received one uplift since in 2020, where it was lifted by inflation. The cap levels also provide one level in London (differentiated by single people and families), and another level for all areas outside London, including Scotland and Wales. The levels create additional financial pressure and hardship and cut off financial support from Local Housing Allowance. Crisis is calling for the level of the benefit cap to be reviewed so it does not cause homelessness, and at a minimum for there to be exemptions from the benefit cap for people sleeping rough or who qualify for Housing First tenancies due to their support needs.

Affordability is not the only issue when accessing private rented accommodation, many landlords will not accept people on housing benefit. This means people are often excluded from tenancies because they are at a point where they require extra financial support. The Renters (Reform) Bill, which is currently passing through Parliament will introduce reforms to private renting in England, including a ban on landlords refusing to let to people on benefits. This Bill must be prioritised by the Westminster Government and passed, including with these protections so that people on the lowest incomes can also access the private rented sector. This would also be facilitated through additional funding for Help to Rent schemes, which work to provide support to both landlords and tenants on the lowest incomes to support with issues with benefits and mediation, to prevent homelessness from the private rented sector where possible. As the Bill passes through Parliament, it must also be strengthened to ensure it prevents homelessness and overly punitive measures around rental arrears and antisocial behaviour are removed.

While the private rented sector can provide an important housing option for people on the lowest incomes, particularly if reforms through the Renters (Reform) Bill go through, the most effective intervention to prevent and end all forms of homelessness in England is the significant increase of social rented

homes. As the most affordable tenure, it is most likely to provide a safe, settled home for people who need one. There has been a longstanding fall in availability of social housing in England, as the number of social rent homes being sold though right to buy has exceeded the number of new homes for social rent being built. Consequently, the number of homes available for social rent has fallen by over 200,000 since 2011.79 To help address the shortfall in provision and reduce homelessness, Crisis' research shows that 90,000 social homes need to be built each year for at least the next ten years. This would help to relieve the pressure on temporary accommodation, use of which is at record highs and reduce the risk of people having no choice but to sleep rough. It would give people the secure and stable homes they need to thrive and keep them away from the negative impacts of homelessness.

Crisis is calling on the Westminster Government to put in place a long-term plan capable of increasing the supply of social rent homes to meet current and future need.

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⁷⁹ Stevens, M. et al. (2023) *UK Housing Review 2023*. London: Chartered Institute of Housing. Online: https://www.ukhousingreview.org.uk/ukhr23/index.html

Chapter summary

- Ending homelessness and rough sleeping doesn't mean no-one will ever lose their home again. It means it will be prevented where possible, and when it does happen there's a quick solution which helps everyone into a safe and settled home to build a decent life and meet their true potential. With the right political will and policy choices we can design a system which prioritises preventing homelessness first and ensures anyone experiencing it is helped quickly into secure housing. The best way to stop the negative impact of sleeping rough is to prevent it from happening in the first place. A good example of prevention that links housing and healthcare services is the Pathway model. The healthcare system often fails to prevent homelessness, and too many people are currently discharged from hospital onto the streets. Pathway, a homeless health charity, has created a model of support that brings together multi-disciplinary services to avoid discharges onto the street.
- A large proportion of participants had multiple issues that contributed to them sleeping rough. The more pressure someone is under, the more intensive the support they need to gain more stability.

- Crisis is calling for the Westminster
 Government to ensure people are not
 forced to sleep rough in the first place
 through local or combined authority
 Prevention Programmes that fund
 evidence-based housing and support
 models which respond to the needs of
 people at highest risk of homelessness
 at different points in their journey.
 This should include funding for Critical
 Time interventions, and the national
 rollout of Housing First. The best available
 research shows that at least 16,450
 people across England need Housing First
 to end their homelessness.⁸⁰
- As this research shows, people sleeping rough are far more likely to experience violence and abuse than the public. That is why the campaign to repeal the outdated Vagrancy Act⁸¹ was so important, the most vulnerable people in our society should not be criminalised, for the crime of being poor and because society is not able to prevent or end their homelessness.
- Crisis is calling for the Westminster
 Government to remove the legislation
 from the Criminal Justice Bill that will
 criminalise people for being homeless,
 akin to the Vagrancy Act. Instead, genuine
 support should be put in place in the forms
 of prevention programmes
 and Housing First and enabling multiagency working between local authorities
 and public institutions.

- Before participants slept rough for the first time, they were often in insecure accommodation or experienced financial issues that meant they could not remain in or find new accommodation when they needed it. This then made them particularly vulnerable to having no choice but to sleep rough.
- Crisis continues to call for Local Housing Allowance rates to be kept in line with inflation. It is therefore positive to see the uplifting of Local Housing Allowance rates to the 30th percentile rent in a local area. However, this level of investment needs to be maintained rather than allowing pressure to build up on households by repeatedly freezing the rates at levels that will soon lead to people being unable to find properties to rent and live in.



- Blood, I. et al. (2018) Implementing Housing First across England, Scotland, and Wales. London: Crisis. Online: https://www.crisis.org.uk/media/239451/implementing_housing_first_across_england_scotland_and_wales_2018.pdf; Crisis (2021) Home for All: The case for scaling up Housing First in England. London: Crisis. Online: https://www.crisis.org.uk/media/245740/home-for-all_the-case-for-scaling-up-housing-first-in-england_report_sept2021.pdf
- Morris, N. (2019) Scrap the Vagrancy Act. London: Crisis. Online: https://www.crisis.org.uk/media/240604/ cri0220_vagrancyact_report_aw_web.pdf



Appendix

Table 6: Impact of sleeping rough on sense of self (see Figure 4)

| Thinking about what impact rough sleeping has had on you as a person, how much do you agree or disagree with the following statements? | Agree | Agree % | Disagree | Disagree % |
|--|-------|---------|----------|------------|
| Made me less trusting of people | 109 | 69% | 28 | 18% |
| Made me feel invisible to others | 109 | 69% | 31 | 20% |
| Negatively impacted my relationships with friends and/or family and/or children | 108 | 69% | 30 | 19% |
| Made me feel like nobody cares about my situation | 104 | 66% | 26 | 17% |
| Made me feel afraid for my life or that I might die | 101 | 64% | 40 | 25% |
| Made me feel that it will be hard to live a 'normal' life again | 88 | 56% | 44 | 28% |
| Made me less likely to engage with support services | 66 | 42% | 64 | 41% |

Table 7: Impact of sleeping rough on making life harder

| Do you think that sleeping rough has made it much harder, harder, or didn't make much difference for you to do the following? | NET: made it harder/ much harder | % | Didn't make much difference | % | Don't know/ not sure | % |
|---|--|-----|-----------------------------------|-----|-------------------------|-----|
| Get or maintain work | 120 | 76% | 24 | 15% | 13 | 8% |
| Achieve your life goals / made my life goals feel further away | 121 | 77% | 30 | 19% | 6 | 4% |
| Access help or support | 121 | 77% | 30 | 19% | 6 | 4% |
| Attend appointments / meet existing commitments (benefits, health, education etc.) | 104 | 66% | 48 | 31% | 5 | 3% |
| Maintain relationships with family (including children) & friends | 117 | 75% | 29 | 18% | 11 | 7% |
| Stay physically healthy | 126 | 80% | 26 | 17% | 5 | 3% |
| Manage your mental health | 123 | 78% | 27 | 17% | 7 | 4% |
| Manage alcohol/drug issues | 91 | 58% | 40 | 25% | 26 | 17% |
| Meet my basic needs | 126 | 80% | 26 | 17% | 5 | 3% |

Table 8: Interactions with businesses, security, and the police

| Thinking about sleeping out in areas where there are shops and/or businesses, have you ever had any of the following interactions with shop/business owners? | Counts | % |
|--|--------|-----|
| Verbally told me to move on | 74 | 47% |
| Offered me food or money | 61 | 39% |
| I intentionally stayed away from business | 54 | 34% |
| Didn't let me stay near the shop/business | 33 | 21% |
| Offered me help or support | 32 | 20% |
| Threatened me with violence | 32 | 20% |
| Didn't let me in the shop or restaurant | 26 | 17% |
| Discriminated against me | 26 | 17% |
| They called the police | 25 | 16% |
| Physically moved me on | 25 | 16% |
| Touched/damaged my belongings | 23 | 15% |
| Took advantage of me because of my situation (e.g. exploitation and modern slavery) | 13 | 8% |
| Don't know/not sure | 6 | 4% |
| None of the above | 26 | 17% |
| Other (please describe) | 1 | 1% |

Table 9: Access to health services while sleeping rough (see Figure 2)

| Were you able to access the health services you needed whilst sleeping rough? | Count | % |
|---|-------|-----|
| All the time | 48 | 31% |
| Most of the time | 25 | 16% |
| Sometimes | 36 | 23% |
| Rarely | 17 | 11% |
| Never | 23 | 15% |
| NA | 8 | 5% |



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