

Austerity policies lie at heart of soaring homelessness and related health harms, argue experts

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Austerity policies lie at the heart of soaring homelessness across England, with serious health implications for those affected, argue experts in *The BMJ* today.

Mark Fransham and Danny Dorling at the University of Oxford say action is needed on issues of [welfare reform](#) and the housing market to help those caught up in this crisis.

The number of people officially recorded as sleeping on the streets of England rose from 1,768 in 2010 to 4,751 in 2017, but charities estimate the true figure to be more than double this, they write.

There has also been an increase in homeless families housed by local authorities in temporary accommodation, rising from 50,000 in 2010 to 78,000 in 2017. And in London alone there are an estimated 225,000 "hidden homeless" people aged 16-25—arranging their own temporary accommodation with friends or [family](#).

Homelessness also carries both physical and mental risks to health, including respiratory conditions, depression, anxiety, unintentional injury and excess winter mortality, they add. At the extreme end, when last calculated (for 2001-09) single [homeless people](#) had an average age at death of 47 years, compared with 77 years for the general population.

Fransham and Dorling argue that the recent rise in homelessness has its roots in welfare reform and the [housing market](#), almost entirely accounted for by an increase in families losing their privately rented housing.

They point to likely causes, including upward pressure on housing costs coupled with reduced availability of affordable social housing since the early 1980s, reduced funding for supporting vulnerable people with their housing (cut by 59% in real terms since 2010), and restrictions on housing benefit for lower income families.

What can be done to help those caught up in this crisis, they ask?

They point to several initiatives, such as the development of specialist primary healthcare services for [homeless](#) people, and the "housing first" model, which provides a secure tenancy for rough sleepers before associated problems like substance misuse and ill health are addressed.

This approach has been given some of the credit for the success of Finland's strategy, the only European country where homelessness has recently fallen, they explain—and is now being piloted in Liverpool, Manchester, and Birmingham, with estimated potential annual savings of £3m-£5m.

"What is needed is a comprehensive strategy that improves services for vulnerable people, an increased supply of affordable housing, more security of tenancies, adequate cash benefits to cover the rising cost of housing, and more efficient use of our existing [housing](#) stock," they conclude.

More information: Editorial: Homelessness and public health, *The BMJ*, www.bmj.com/content/360/bmj.k214

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