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Houses, Not Homelessness

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Introduction

Just over a year before the pandemic began to have a possibly temporary (beneficial) effect on homeless policy and statistics, on the 31st of January 2019, the Ministry for Housing, Communities and Local Government (MHCLG) reported that an estimated 4677 people were now sleeping on the street on any one night in England, almost three times as many as in 2010 (MHCLG, 2019). While 2019 now seems like the distant past, these numbers are still very likely to reflect the reality of street homelessness in the year 2022 (though the figures have long been disputed, with the true number estimated to be at least twice as high). In the same timeframe, the number of families housed by Local Authorities in temporary accommodation rose significantly, but at a lower rate, from 50 000 in 2010 to 78 000 in 2018. In London alone there are 225 000 'hidden homeless' people aged 16-25 arranging their own temporary accommodation with friends or family (Fransham and Dorling, 2018).

Reporting on its own rough sleeping initiative (RSI) in the same publication, MHCLG (2019, p.12) claimed: "There were 2 748 people recorded as sleeping rough across the 83 RSI areas in autumn 2018, this is a decrease of 639 or 23% from the 2017 figure of 3387." As the total figure for England hardly changed, there will have been a similar rise in those areas where the initiative was not undertaken. This could have been for many reasons, which might include people being displaced away from the 83 RSI areas to be homeless in other areas of England. MHCLG's (2019, p.12) report on itself continued:

There are a range of other factors that may impact on the number of people sleeping rough including the weather, where people choose to sleep, the date and time chosen and the availability of alternatives such as night shelters.

The Government Ministry did not mention its overall approach to housing as a potential problem, let alone that it is in fact one of the most significant factors. This isn't surprising. If they realised that they were part of the problem they would surely have done something about it by now, unless the view of the ministers in charge is that some level of homelessness is necessary or inevitable.

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This is not a phenomenon limited to the MHCLG (in 2021 renamed the Department for Levelling Up, Housing and Communities). In 2017, there were estimated to be 527 deaths of people experiencing homelessness in England and Wales (ONS, 2018). The Office for National Statistics (ONS) reported these numbers in December 2018, and said that:

Understanding a problem is the first step to solving it, and producing these statistics will help society make better decisions to tackle homelessness and stop people experiencing homelessness dying in our communities. These statistics aren't just numbers, behind each death is the story of some of the most vulnerable members of society (Humberstone, 2018).

So what is the next step? Counting the rising number of deaths with increasing accuracy is certainly essential, but only illustrates how large the underlying problem has become. It does not tell us where the causes of that problem lie or what can be done to prevent it from happening again. The same can be said of the myopic focus on street homelessness.

While officially supporting the target of “halving rough sleeping by 2022 and ending it by 2027,” in truth, policymakers are unlikely to meet these goals if the default is to blame the weather (recent warmer winters) and suggest that a few more night shelters could help. Despite acknowledging that street homelessness is just the tip of the iceberg, in England the decision was taken not to focus on the root causes. In Scotland, the approach is different and takes all forms of homelessness into account. Neither go into detail about evidence underpinning their plans or how the impact of policies will be evaluated — a missed opportunity. These Government documents are an important source of evidence for other parts of the sector, and their choice of language and areas of focus affect which issues are dealt with or ignored.

Unexplained but Not Suspicious

In general, policy suggestions on homelessness only address the most precarious and heart-wrenching cases. While this is useful to galvanize sympathy, it unintentionally implies that by helping those whose need is greatest the problem can be eradicated. This is wrong. It can also create negative side effects among the wider population who, when confronted with endless terrible individual stories, begin to feel that things will never change, becoming apathetic, desensitised, and fatalistic.

In spring 2018, in one of the streets where I used to play as a child, a homeless man died in a council-funded hostel. The newspaper report was brief: “The 61-year-old was found dead in a room in Marston Street in East Oxford on April 20. The city council said it believed there was nothing suspicious about the man’s death” (Oxford Mail, 2018).

We have long become accustomed to such deaths, and an unhelpful tradition has developed whereby it is deemed sufficient to express shock and horror instead of using these tragedies as an opportunity to learn and improve. Perspective matters, because unless we can be confident that we are framing the challenge in the right way, we may be misusing vital resources and wasting precious time and energy. To achieve real, lasting change it is vital that we take a much wider view of homelessness, one that considers the bigger picture of the drivers and root causes of the issue as informed by current evidence and a historical context and understanding.

In 2018, The Centre for Homelessness Impact advocated exactly this approach in a report that went on to suggest that we must also better understand “... how housing equity is connected to opportunity and life chances” (Teixeira et al., 2018, p.14). To achieve a step change in our efforts, a new evidence-based approach to homelessness is needed, one that aggregates evidence from other countries and our own former successes in addition to generating new research.

Luck Matters Most

Generating and utilising the right kind of evidence also requires that we ask more complex questions, like why it is that more men die homeless. The superficial reason is that there are simply more men sofa surfing, in hostels, and on the streets. And the reasons for that? Women are more likely to be parents with young children and thus have a right to be housed, while men are more likely to take to drinks and drugs to an extent that leads to homelessness. However, the explanations are more complex still.¹

¹ The consultant child and adolescent psychiatrist Sebastian Kraemer collated the evidence and has found that in a surprising large number of aspects of life men might be more likely to ‘succeed’, be promoted and be higher paid, but they are also more likely to do badly as compared to women. His examples ranged from male humans being more likely to be miscarried as a fetus, to failing to gain any qualifications at school, through to dying earlier. In the detailed notes to his analysis he made it clear that women often do very badly too, and suffer systematic discrimination in society. Sebastian summed up the fundamental difference as ‘Men die, women suffer’ Kraemer, S. (2017) Notes on the fragile male (an extension of the paper he published on December 23rd 2000, ‘The fragile male BMJ. 2000 Dec 23; 321(7276): 1609–1612), the extended notes are on-line only, see: <http://sebastiankraemer.com/docs/Kraemer%20notes%20on%20the%20fragile%20male%202017.pdf>

The number of people dying while experiencing homelessness is now so high that it is possible to break the figures down by the characteristics of those who die and the immediate, if not underlying, cause of death. Only one in six of those who die while experiencing homelessness are women, but the women in England and Wales who die while experiencing homelessness are, on average, two years younger than the men (42 rather than 44 on mean average) (ONS, 2018).

Some 21 years ago, as homelessness was starting to become normalised in the UK, Mary Shaw and I made similar calculations and found that the death rates of men experiencing street homelessness aged 16–29 years were almost 40 times higher than those of the general population. For all men aged 16–64 years, this number is about 25 times greater (SMR=2587). Very little has changed in these death rates even while the numbers of people experiencing homelessness fell and then rose (Shaw and Dorling, 1998).

The picture for women is a little different. Back in 1998 there were too few women on Britain's streets to be able to calculate their mortality rate by age. The latest data from before the pandemic began (ONS, 2018) suggested that the number of younger women experiencing homelessness is on the rise. Men experiencing homelessness die 34 years earlier than the average while women experiencing homelessness die 39 years earlier than the average. People who are homeless are at highest risk of death where they are most numerous: in London and the surrounding urban areas of the North West of England, and more recently in Oxford. In early 2019, Oxford had the second highest mortality rate for people experiencing homelessness in the UK², with the majority of those who died having grown up and gone to school in the city or a village within a ten-mile radius (ONS, 2018).

A third of the deaths of people experiencing homelessness in the UK are now attributed to drug poisoning (ONS, 2018). Doctors know that the cause they write on the death certificate is not the true underlying cause. If they knew the person and were permitted to write a more nuanced description, a few might write something far more useful. This could give a human face to people who would otherwise become statistics and present a more honest picture of the structural causes of death for people experiencing homelessness. As things stand, once the pandemic has abated, we are likely to see the same fairly inhuman statistics emerge again. They might possibly be worse as so many people fell into rent arrears during

² On February 25 2019, the BBC reported that Blackburn had the highest death rate amongst people who were homeless by area, followed closely by Oxford, and then Camden. BBC News (2019) Homeless deaths nine times higher in deprived areas, 25 February, <https://www.bbc.co.uk/news/uk-england-47357492>.

the pandemic in England in 2020 and 2021. By late 2021 “1.8 million private renting adults in England were worried they would lose or be asked to leave their current home” (BBC 2021).

Luck matters above all else to individuals, but at the aggregate level, all the luck is ironed out. At the aggregate level the evidence is not about luck at all, it is perception that matters most and the biases inherent in the interpretation and presentation of statistics. This is *always* the case. Individuals all operate with a worldview that they carefully structure their evidence to support. This means that simply gathering more evidence is not enough. To accelerate progress, the sector must be prepared to put its basic assumptions to the test on an ongoing basis.

What Constitutes Good Evidence?

The current pervading narrative places the responsibility for homelessness on the individual. But the causes of homelessness do not lie with the people that it affects. Consequently, the solution to the underlying problem is not just intervention on the streets. Neither is it limited to the ‘payment by results’ of ‘local social enterprises’, or the issuing of ‘social bonds’. Individual interventions may be well-meaning, but they can often be superficially successful. That is why it is vital to both address the dearth of causal evidence as highlighted by the Centre for Homelessness Impact Evidence and Gap Maps, while also ensuring we take the bird’s eye view of homelessness.

When the ONS released their first estimates of the number of people experiencing homelessness dying on the streets on December 20th 2018, section seven of their report was titled ‘*Proportion of deaths of homeless people that are due to drug poisoning has increased by 51 percentage points relative to the overall number of drug deaths over five years.*’ The next day the title of that section was changed to, ‘*Drug-related deaths of homeless people increased by 52 per cent over five years*’ (ONS, 2018).

This attention to detail and correction of a single statistic by one percentage point gives the impression that what matters most when gathering evidence is statistical exactness, and then issues such as drugs — the precise drug that lead to death is identified in individual cases. In 2018, the ONS notes that one-person experiencing homelessness died from smoking cannabis, while 115 died while under the influence

of opiates.³ The fact that somewhere a doctor noted cannabis consumption as a cause of death while homeless may well be the least useful piece of information ever released by a government funded agency.

The ONS should not be singled out here. The same could be said of much of the literature on homelessness. A report from Housing First England (2019) cites, “A long history of alcohol dependency, heroin and crack use and anti-social behaviour” as the main cause of homelessness for one of its service users.

The language used by leading sector organisations matters. Simple statements can, when repeated again and again in aggregate, frame a story, shifting focus from the causes to the symptoms of a problem. With homelessness, the emphasis is so often on how the people affected suffer from problematic alcohol or drug use, have ‘high/complex needs’ or all of the above, while forgetting that the evidence suggests (BBC, 2017) most people affected by homelessness (for example the vast majority who sofa surf and so on) never come into contact with the homelessness system, and can therefore not easily be labelled under any of these categories. They may be no different from you or me.

In its 2018 annual accounts, Homeless Link describes roughly five million pounds of spending in a year, and in its introduction notes that in order to achieve its ambition of halving rough sleeping by 2022, the Government must allocate “significant additional resources” (Feilden, 2018, page 1). The call for ‘significant additional resources’ is a recurrent refrain in the sector, when in fact the massive injections of funding every decade or so have probably contributed to the problem. While adequate resources are key, throwing money at the problem doesn’t necessarily mean those affected by homelessness will benefit. In 50 years, the system has grown in complexity and is more costly than ever, yet the impact of the work has not reduced the scale of the problem.

For this reason, the sector needs new types of evidence — particularly causal and comparative — in addition to greater accountability and transparency to ensure policymakers are indeed drawing on bodies of knowledge when developing policy. We know from other social policy fields like international development and education that better use of data and causal evidence can help accelerate progress and help target resources more effectively.

³ Report of December 20th 2018, referenced above (ONS, 2018), Table 1: Drug poisoning deaths of homeless people (identified) by substances mentioned, persons, 2017

Progressing Policy

Preventing homelessness in the UK requires significant reformation of housing policy. In most areas, it is currently not fit for purpose. It is not just those who are homeless who suffer as a result. Millions of others pay exorbitant rents for low-quality homes over which they have insecure rights. In this instance, we would do well to draw on evidence from the past and look at similar failures in public policy where an emphasis on the symptoms, not the causes, has prevailed. Acknowledging systemic problems is a rare occurrence in UK public policy and government often focuses on treating the symptoms of a problem for short-term gain.

In the past, it has tried to address the prevalence of babies with low birth weights by focusing on the health and wellbeing of individual mothers, rather than addressing the systemic factors that mean the UK has one of the worst records for underweight infant births and highest neonatal mortality rates in Western Europe (ONS, 2017). It has looked at the individual cases of children excluded from school instead of the wider social issues that mean school exclusions are rare elsewhere in Europe and were quite rare in the UK in past decades. It has designed measures to address poverty that mitigate only the worst effects of living on a low income rather than acknowledging that its tolerance and exacerbation of high levels of income inequality is fuelling the problem.

Without new mechanisms to instigate change, this status quo will prevail. In a complex system, better use of evidence to identify how to prioritise things that do the most good and stop doing what does not work (or causes harm) is vital.

What is to be Done?

It is not just housing policy, but social policy in general that has exacerbated homelessness by creating an environment of precarious inequality. Reliable evidence at the micro and macro levels needs to be collected and acted upon more promptly. We need to know what works in the short-term, but also keep our eyes on the long-term prize. A piecemeal approach that seeks to improve one area will have little overall effect if other areas of public life are not also improving.

In the UK, we seem unable to scale up promising interventions largely because they are never subject to rigorous evaluation, meaning that projects then close down as and when the fashion passes, but also because the root causes of new homelessness are almost never treated as a political priority. In England, there are a few new schemes being piloted that have fared well in Nordic nations, like 'Housing First'. In Finland, 'Housing First' as a policy was successful predominantly because of Finland's stronger social safety net — one that the UK has now largely lost.

We should recognise that almost all European countries have lower income inequality than the UK and enshrine more tenant rights into law. Rent regulation is a vital part of that. It is the only defence against arbitrary eviction.⁴ In Germany half of all householders rent privately, often using standard leases, which permit tenants to live in a property for the duration of their lives (Hickey, 2016). Rent caps are enforced to stabilise rates for new tenants, and closely monitored to ensure they don't increase too quickly. Tenants' groups organise to complain when landlords are not penalised for breaking the law.

In Sweden, private-sector rent levels are set through negotiations between representatives of landlords and tenants in a very similar way to how trade unions and employers negotiate pay. In 2014, the whole of Stockholm was limited to increasing rents by only 1.12% as a result. In the Netherlands, monthly rental fees are fixed by government. Government officials inspect properties for quality and decide rents accordingly. Denmark has two forms of rent regulation and does not suffer homelessness on the scale of countries with a supposedly more 'free market'. 'Free' housing markets serve only to benefit those with the most money.

In France, a new set of rent regulations came into force in the capital in August 2015, stating that private rents "must be no more than 20 percent above or 30 percent below the median rental price for the area" (Aldridge et al., 2019, p.16). Of course, the rules prompted anger among property agencies and landlords, who claimed they would deter investment. But the evidence from less equal countries is clear: landlords charging whatever rent they choose does not result in more housing becoming available. These controls have helped reduce rent inflation as firms and European agencies move parts of their workforce to Paris during the Brexit process.

The dominant narrative in most countries remains one that always focuses on the apparent deficits and perceived failures of people who become street homeless. Victim blaming is an area in which much of Western society excels. Thankfully, there is now growing evidence that this may be changing, and that attitudes in the UK are rapidly altering today (Dorling, 2018). Changing old habits will not be easy but nurturing a learning sector that acts more promptly on existing knowledge and tests its assumptions about what works will improve the positive impact of our efforts.

⁴ This section is based on work done for the book: "The Equality Effect" written by the author of this paper published by New Internationalist (Oxford) in 2017, see: <http://www.dannydorling.org/books/equalityeffect/>

► References

- Aldridge, R.W, Menezes, D., Lewer, D., et al. (2019) Causes of Death among Homeless People: A population-based cross-sectional study of linked hospitalisation and mortality data in England, *Wellcome Open Research*, <https://doi.org/10.12688/WELLCOMEOPENRES.15151.1>
<https://wellcomeopenresearch.org/articles/4-49/v1>
- BBC (2017) Sofa Surfers: The young hidden homeless, *BBC News*, December 21st, <https://www.bbc.co.uk/news/uk-42427398>
- BBC (2021) Impending Eviction Leaves Tenants 'Sick with Worry', *BBC News*, November 30th, <https://www.bbc.co.uk/news/uk-england-59389892>
- Dorling, D. (2018) *Peak Inequality: Britain's Ticking Time Bomb* (Bristol: Policy Press).
- Feilden, P. 2018. Introduction to company account 25 July 2018 authored by Homeless Link: Reports and Financial Statements for the year ended 31 March 2018, *Company Annual Financial Report*, http://apps.charitycommission.gov.uk/Accounts/Ends73/0001089173_AC_20180331_E_C.PDF.
- Fransham, M. and D. Dorling (2018) Homelessness and Public Health, *British Medical Journal* 360 p.k214.
- Housing First England (2019) *Life Stories*. Available from: <https://hfe.homeless.org.uk/life-stories> [Accessed March 2019].
- Humberstone, B. (2018) *ONS Reveals the Number of People Dying Homeless* [online only]. Available at: <https://blog.ons.gov.uk/2018/12/20/ons-reveals-the-number-of-people-dying-homeless/>
- Introduction to company account 25 July 2018 authored by Piers Feilden: "Homeless Link: Reports and Financial Statements for the year ended 31 March 2018, Charity number 1089173, Company Number 0431826, http://apps.charitycommission.gov.uk/Accounts/Ends73/0001089173_AC_20180331_E_C.PDF
- MHCLG (2019) *Rough Sleeping Statistics Autumn 2018, England (Revised)* (London: Ministry of Housing Community and Local Government (MHCLG)). Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/775089/Rough_Sleeping_Statistics_2018.pdf
- ONS (2017) *UK drops in European child mortality rankings*, October 13th, <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/childhealth/articles/ukdropsineuropeanchildmortalityrankings/2017-10-13>

ONS (2018) *Deaths of Homeless People in England and Wales: 2013 to 2017* (London: Office for National Statistics (ONS)). Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsofhomelesspeopleinenglandandwales/2013to2017>

Oxford Mail (2018) *Homeless Man Found Dead in Marston Street Hostel* (Oxford, Oxford Mail). Available at: <https://www.oxfordmail.co.uk/news/16196961.homeless-man-found-dead-in-marston-street-hostel-oxford/>

Hickey, S. (2016) *Would a Rent Cap Work for Tenants Facing £1000 a Month Rises?* (The Observer). Available at: <http://www.propertyinvesting.net/cgi-script/csNews/csNews.cgi?database=default.db&command=viewone&id=32624&op=t>

Shaw, M. and D. Dorling (1998) Mortality Amongst Street Sleeping Youth in the UK, *The Lancet* 352 p.743.

Teixeira, L., Russell, D., and Hobbs, T. (2018) *The SHARE Framework: A Smarter Way to End Homelessness* (London: Centre for Homelessness Impact).