



The Risks and Costs of Homelessness

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Overview

Homelessness is a vast and escalating problem in the UK, with a staggering human cost. This report details the interaction of risk factors which systematically predisposes some of the most vulnerable groups to homelessness and exacerbates existing patterns of disadvantage. In many cases, the factors which increase risk are themselves made worse by the onset of homelessness. This produces a pernicious cycle from which it may be impossible to escape without support. For this reason, the cost section of this report mirrors the section on risk factors. Homelessness also generates a substantial monetary burden, estimated by this report as an additional cost of £44.4 billion per year in England alone. It is almost certain that this figure falls short of reality, not least because the detriment of homelessness can be inherited, protracting costs beyond one generation. Therefore, homelessness prevention strategies promise a cost-effective way to save lives.

The Scale of Homelessness

Individuals in the UK are homeless if they have no accommodation, or if their accommodation is such that it would be unreasonable for them to continue living there.¹ In practice, 'homelessness' encompasses a broad range of living situations such as rough sleeping, sofa-surfing, and the use of shelters and emergency accommodation.

A shocking number of people in the UK are homeless. In England in 2020/21, local authorities deemed 282,000 homelessness applications eligible and 82% of these were 'core homeless' households, those experiencing the most acute forms of homelessness.² This means that **nearly 1 in 100 households in England are core homeless.**³ Every 8 minutes a child becomes homeless in Britain, which is enough to fill 2.5 double decker buses every single day.⁴ Accurately estimating the number of homeless people in the UK is difficult, not least because of restrictive data-sharing protocols and the sizeable 'hidden homeless' population who do not interact with homeless services (around 63% of single homeless people do not show up on official statistics).⁵ As a result, **it is overwhelmingly likely that the above estimates understate the scale of homelessness.**

¹Housing Act 1996

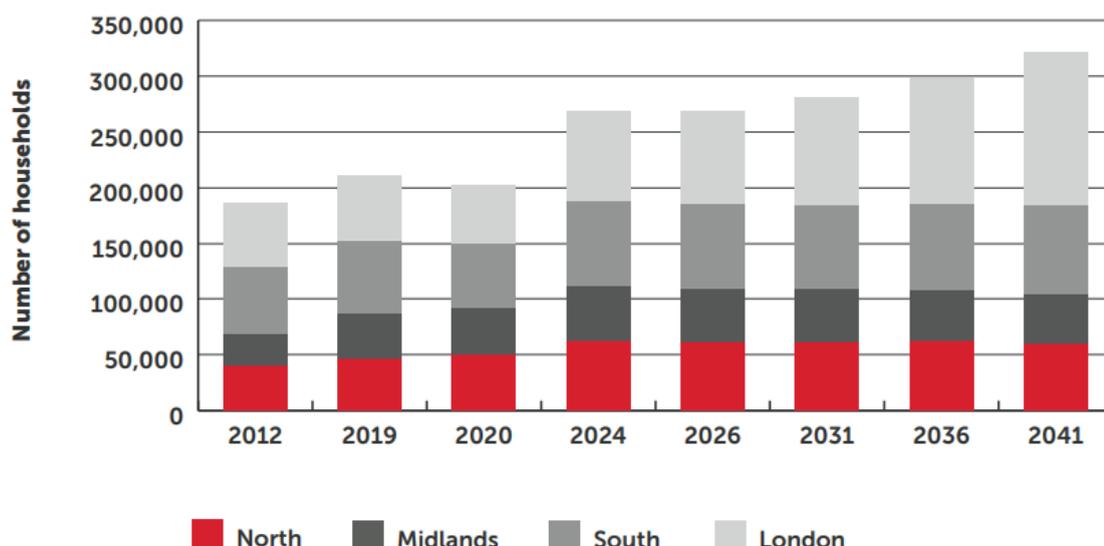
²Watts et al, 2022

³The Big Issue, 2021

⁴Shelter England, 2019

⁵Stone, Dowling and Cameron, 2019

Projection of 'Core Homelessness' by region, England 2012-41



Source: Watts et al, 2022

The scale of homelessness is only growing; **it is projected that core homelessness will increase by one third from 2019 to 2024 in England.**⁶ This rapid escalation is even more worrying given the general increase of homelessness since 2012, including an 85% rise in rough sleeping and a 194% rise in unsuitable temporary accommodation between 2012 and 2019.⁷ These trends necessitate an urgent response, however the scale of the problem is matched by its complexity.

Risk Factors for Homelessness

Homelessness is not randomly distributed throughout the UK. Rather, there are a set of interactive factors including domestic abuse, mental illness, and addiction problems, which systematically predispose individuals to homelessness.

“ First, take a white male who had a relatively affluent childhood in the rural south of England, an unproblematic school career, went to university and graduated at 21, who was living with his parents at age 26, with no partner relationship and no children. **His predicted probability of homelessness by age 30 is 0.6%.**

Second, take a mixed ethnicity female, who experienced poverty as a child, was brought up by a lone parent, left school or college at 16, had spells of unemployment, and was living as a renter with no partner but with her own children at age 26. **Her predicted probability of homelessness by age 30 is 71.2%.**

”

(Bramley and Fitzpatrick, 2017)

⁶ Watts et al, 2022

⁷ Watts et al, 2022

Isolating the impact of a predictor on the risk homelessness is complex. If an individual possesses one risk factor, they are much more likely to possess others, compounding their vulnerability. Similarly, many predictors exhibit a mutually perpetuating relationship with homelessness, whereby becoming homeless contributes to a factor that makes homelessness more likely.

Demographics



In the UK, homeless people tend to be young;⁸ 7.6% of young people have experienced homelessness in the last five years, compared to the population average of 2.5%. This connection appears to be explained by this demographic's disproportionate level of poverty.⁹

Poverty is one of the most powerful predictors of homelessness, especially youth homelessness. One systematic account of the distribution of homelessness in the UK found that **childhood poverty was the largest contributor to the predictive model for homelessness in 16-30 year olds**, accounting for 52% of the explained variance.¹⁰ These impacts can also be inherited: **43% of people with homeless parents become homeless themselves** and this rate may be even higher for marginalised ethnic groups.¹¹



In England, **people from a minority ethnic background have a threefold higher risk of statutory homelessness compared to the White population**, though Asian households have a lower risk. Black people in particular face a greater risk of homelessness than other ethnic groups, nearly five times that of White people in 2015, and **this disparity could be worsening**.¹² These inequalities are also present within the homeless population itself: Australian research reports that Indigenous people are overrepresented by a factor of 3 among homeless women who are not sleeping rough, but by a factor of 10 in the rough-sleeping female population.¹³

Identifying as non-heterosexual more than doubles one's risk of homelessness.¹⁴ 20% of all LGBTQIA+-identifying people and 25% of transgender people have experienced homelessness.¹⁵



Certain aspects of family structure and relations can also increase one's probability of experiencing homelessness. **Lone parent households are twice as likely to become homeless, and single person households are**

⁸ Bramley and Fitzpatrick, 2017

⁹ Watts, Johnsen and Sosenko, 2015

¹⁰ Bramley and Fitzpatrick, 2017

¹¹ Martin, 2014

¹² Watts, Johnsen and Sosenko, 2015

¹³ Box, Flatau and Lester, 2022

¹⁴ Nilsson, Nordentoft and Hjorthoj, 2019

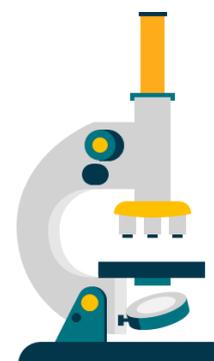
¹⁵ www.mungos.org, 2017

30% more likely.¹⁶ There are strong protective effects associated with having a partner,¹⁷ a social network,¹⁸ and being able to live in the family home as an adult.¹⁹

Health and Addiction

It is widely acknowledged that mental illness is a key risk factor for homelessness, with one study finding it increases one's odds by 70%.²⁰ Relatedly, those with a history of suicide attempt are 3.6 times more at risk of homelessness than those without, and those with psychotic or personality disorders have double the risk.²¹ Citizens Advice Bureau is 62% more likely to advise people with mental health problems about threatened homelessness than other clients, and they report that this demographic is 3 times as likely to be homeless due to repossession by a housing association.²²

There is limited evidence to suggest that physical health problems are predictors of homelessness. Research shows that the prevalence of chronic health problems is much higher than average among homeless people, prior to the start of their homelessness.²³ However, **evidence suggests there is no causal link between these health factors and the onset of homelessness**, because the association disappears when other relevant factors are controlled for.²⁴



It is estimated that drug-related problems triple the risk of homelessness, and having alcohol-use problems multiply one's risk by 2.4.²⁵ 41% of emergency patients with the most acute drug-use problems used a shelter within a year.²⁶ As is true of most risk factors, substance use can also be linked to homelessness more indirectly; parental substance use is the most common predictor of separation from one's biological parents which can also cause homelessness (see below).²⁷

Domestic Abuse and Relationship Breakdown

Domestic abuse is consistently reported to be a primary cause of homelessness in developed countries, and is experienced by roughly 40% of homeless women in the UK.²⁸ This association operates through multiple mechanisms including insufficient income to live as a lone parent, housing

¹⁶ Bramley and Fitzpatrick, 2017

¹⁷ Nilsson, Nordentoft and Hjorthoj, 2019

¹⁸ Groton and Radey, 2018

¹⁹ Bramley and Fitzpatrick, 2017

²⁰ Nilsson, Nordentoft and Hjorthoj, 2019

²¹ Nilsson, Nordentoft and Hjorthoj, 2019

²² Isaksen and Williams, 2017

²³ Department for Communities and Local Government, 2012

²⁴ Nilsson, Nordentoft and Hjorthoj, 2019

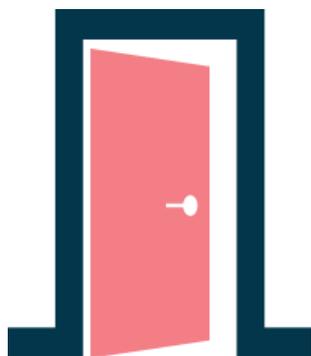
²⁵ Nilsson, Nordentoft and Hjorthoj, 2019

²⁶ Zhao, 2022

²⁷ Lewis et al, 2021

²⁸ European Federation of National Organisations Working with the Homeless, 2019

discrimination, criminal records and credit problems, and ongoing harassment by the ex-partner.²⁹



More broadly, in 2020/21 **53% of homelessness applications in England were filed because of a loss of accommodation supplied by family or friends, or due to relationship breakdown and domestic abuse.**³⁰ After controlling for other factors, higher levels of family conflict at ages 13 and 15 uniquely predict homelessness by the age of 25.³¹ **Running away during youth, a good proxy for relationship breakdown between parents and child, more than triples the odds of homelessness,**³² as does ever having been ordered out of the home by parents.³³

Education

Challenges in school increase the risk of future homelessness: exclusion from school before 16 does so by 240%,³⁴ low educational attainment by 30%,³⁵ and leaving full-time education a year earlier by 12%.³⁶ **Education is a predictor of homelessness distinct from its effects on income** - one study compared users of US healthcare services



to show that 50% of homeless patients had less than a high school education, in contrast with 28% of low-income patients, and 2% of patients with private healthcare insurance.³⁷

There is also evidence of an association between level of education and acuteness of homelessness: in one study 22% of women sleeping rough had completed Australian high school compared to 32% of women experiencing other forms of homelessness.³⁸

Care Leavers

Being a care leaver is consistently found to be one of the most reliable predictors for homelessness, with one meta-analysis estimating that it makes the average person 3.7 times more likely to be homeless.³⁹ In 2010, the National Audit Office estimated that 25% of the homeless population had experience in the care system.⁴⁰ **The number of care leavers experiencing homelessness would**

²⁹ Baker et al, 2010

³⁰ Watts et al, 2022

³¹ Heerde et al, 2021

³² Nilsson, Nordentoft and Hjorthoj, 2019

³³ Shelton et al, 2009

³⁴ Bramley and Fitzpatrick, 2017

³⁵ Nilsson, Nordentoft and Hjorthoj, 2019

³⁶ Shelton et al, 2009

³⁷ Heffron, Skipper and Lambert, 1997

³⁸ Box, Flatau and Lester, 2022

³⁹ Nilsson, Nordentoft and Hjorthoj, 2019

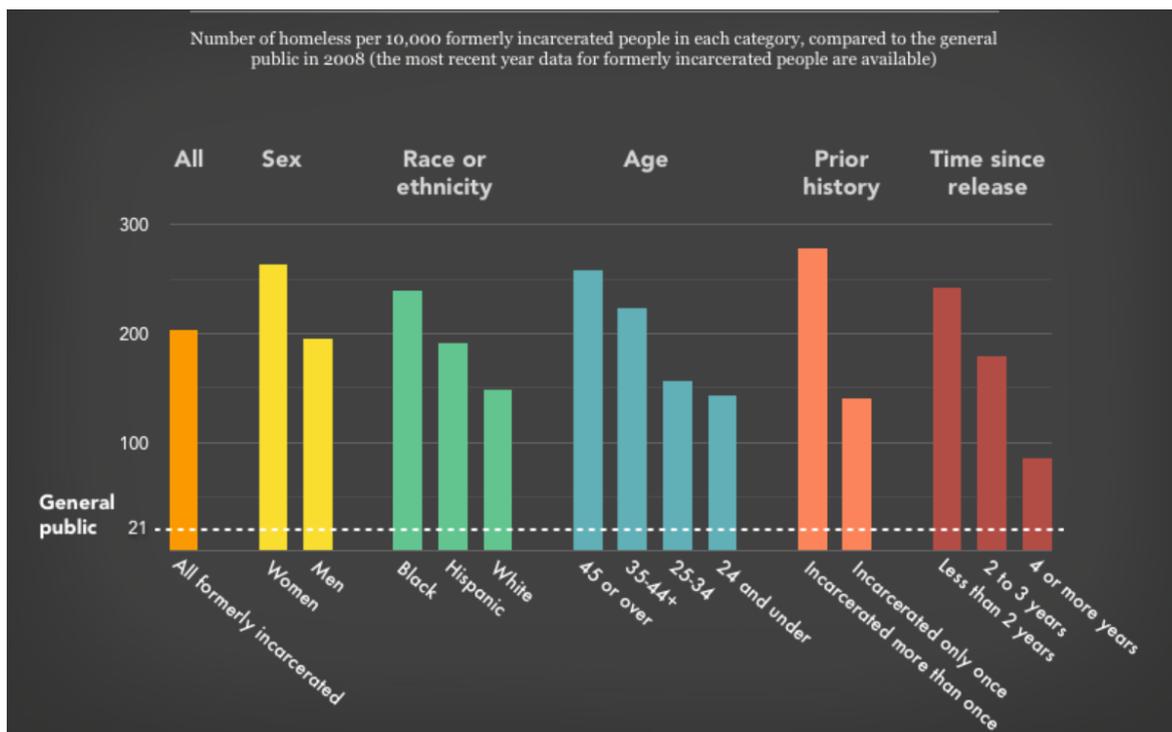
⁴⁰ Sanders, Jones and Whelan, 2021

need to decrease by more than 90% to stop their over-representation in these statistics.⁴¹ Being a care leaver can also contribute indirectly to a higher risk of homelessness through higher levels of substance abuse and poverty, and lower levels of educational attainment.⁴²

Criminal Record

The US Prison Policy Initiative found that people who have been jailed only once experience homelessness at 7 times the rate of the general population; for those jailed more than once, this multiplier almost doubles.⁴³ This remains statistically significant once relevant factors are controlled for.⁴⁴ A partial explanation for this is that **over half of prison leavers in the UK are released without accommodation** in place,⁴⁵ which in 2021-22 amounted to at least 24,000 people in England and Wales alone.⁴⁶ Previously incarcerated people are most likely to be homeless just after their release, and gender and race interact to make formerly jailed Black women nearly four times more likely to experience sheltered homelessness than formerly jailed White men.⁴⁷

Homelessness Rates Among Formerly Incarcerated People



Source: Prison Policy Initiative, 2018

⁴¹ Sanders, Jones and Whelan, 2021

⁴² Clare et al, 2017

⁴³ Peiffer, 2020

⁴⁴ Bramley and Fitzpatrick, 2017

⁴⁵ Murphy, 2022

⁴⁶ Ministry of Justice, 2022. Only accounts for releases from sentences, not remands.

⁴⁷ Policy Prison Initiative, 2018

The effect of a criminal record can also be transmitted across generations - it has been estimated that having an incarcerated biological father increases the likelihood of homelessness by 45%.⁴⁸

The Costs of Homelessness

It is widely acknowledged that homelessness costs the state dearly, but the associated level of public expenditure cannot be straightforwardly assessed. There is no central homelessness budget in the UK, and even if there were, the costs of homelessness also manifest in health services, the justice system, and social services, to name a few. Although the indirect costs of homelessness are difficult to estimate, it is clear they are very high.

“ Homelessness is not just the absence of shelter; it is also fundamentally about the impact of long-standing poverty, of domestic violence, mental health conditions, employment barriers, drug and alcohol dependence, self-esteem issues and poor quality of life outcomes. ”

(Flatau and Zaretsky, 2008)

Since the effects of homelessness are so far-reaching, the vast majority of attempts to estimate its costs fall far short of reality.⁴⁹ Complications arise when trying to combine measures for disparate areas of life (for example justice costs and life satisfaction) into one measure of utility, and **it is often the case that relevant outcomes will be neglected from a calculation of the costs of homelessness, making it an underestimate.**⁵⁰ In 2007, local authorities' estimates for the cost of 48 weeks in temporary accommodation ranged from £3,564 to £17,094, with the variation in price dependent on which factors were accounted for.⁵¹

The most common omissions from cost calculations are estimations of the human impact of homelessness which are prolific and detrimental. On average, **having ever been homeless lowers one's life satisfaction measure by 13%, implying that being homeless inflicts long-term damage which lasts significantly beyond the experience itself.**⁵² Placing a monetary value on this deterioration in life satisfaction is very difficult; there is nowhere near a consensus on the societal willingness to pay for a unit of life satisfaction. However, it is uncontroversial to say that the associated cost would be very high. One study found that people were willing to pay £472⁵³ to avoid a day of extreme fatigue. Crudely comparing the



⁴⁸ Shelton et al, 2009

⁴⁹ Berry et al, 2003

⁵⁰ Flatau and Zaretsky, 2008

⁵¹ Aldridge, 2008

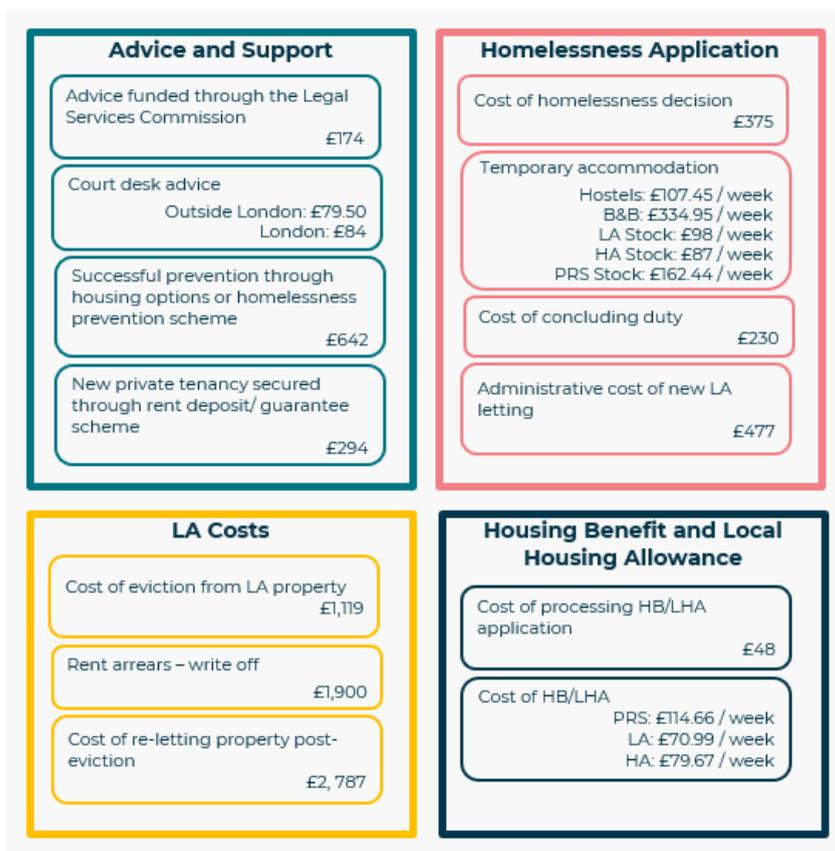
⁵² Smith et al, 2019

⁵³ 2022 inflation-adjusted dollars, converted to pounds using 2022 exchange rate

disutility of this to a day of homelessness yields the estimate that **60 days of homelessness has a quality-of-life-related cost of £28,300 per person.**⁵⁴ Hence there is considerable potential for homelessness-prevention programmes to be cost-effective on the basis of improved welfare alone.

Support Services

The direct costs of homelessness include those related to assessing, financially assisting, and accommodating homeless households; these alone are substantial. Below is a ‘menu’ produced by Shelter in 2012 outlining some of these costs. These prices are from 2012 so will have grown significantly since.



Source: Shelter, 2012

In 2005, the National Audit Office estimated that the direct costs of homelessness totalled £1 billion annually.⁵⁵ 12 years later, London local authorities alone spent almost **£1 billion in direct expenditure on homelessness**, a figure which is expected to grow substantially as rates of homelessness and costs rise, even as councils’ budgets decrease.⁵⁶

Much of the direct cost burden is a result of underemployment of homeless people. In England, **there is an inflation-adjusted cost saving of £14,000 to the**

⁵⁴ Rosenheck, 2000

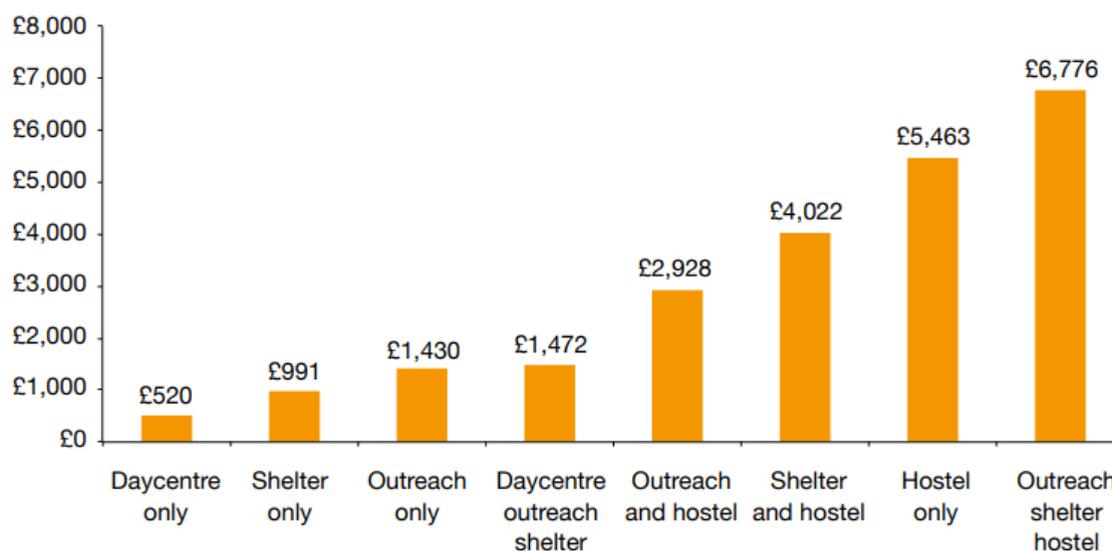
⁵⁵ Department for Communities and Local Government, 2012

⁵⁶ Scanlon et al, 2019

state associated with providing 2 years of Housing Benefit to one young person threatened with homelessness.⁵⁷ The saving is solely attributable to increased taxable income and reduced unemployment benefits.

Furthermore, one UK study found that the average cost of homelessness service use for 90 days was £3702, in 2015 prices.⁵⁸ As seen below, this varies widely by the type of service accessed. **In 2022 prices, these costs amount to an average of £18,500 per person, per year.**

The Estimated Average Homelessness Service Use Costs for 90 Days, by Service Trajectory



Source: Pleace and Culhane, 2016

In England it has been demonstrated that, on average, three years of support from Housing First programmes costs less than one year in homelessness services,⁵⁹ suggesting that **the rental costs of settled housing are easily covered by the removal of these support service costs.** What's more, there is an additional wellbeing value associated with a move from rough sleeping to temporary accommodation of around £10,000 per person, and from rough sleeping to settled housing at over £30,000 per person.⁶⁰ This strongly suggests the cost-effectiveness of a housing intervention.

Health Services

People who were once homeless, but no longer are, experience long-term diminishment in health outcomes, including 60% lower physical activity, around 300% higher rates of both limiting long-standing illnesses and depression, and higher rates of loneliness.⁶¹

⁵⁷ Berry et al, 2003

⁵⁸ Pleace and Culhane, 2016

⁵⁹ Pleace and Brotherton, 2019

⁶⁰ Fujiwara and Vine, 2015

⁶¹ Smith et al, 2019

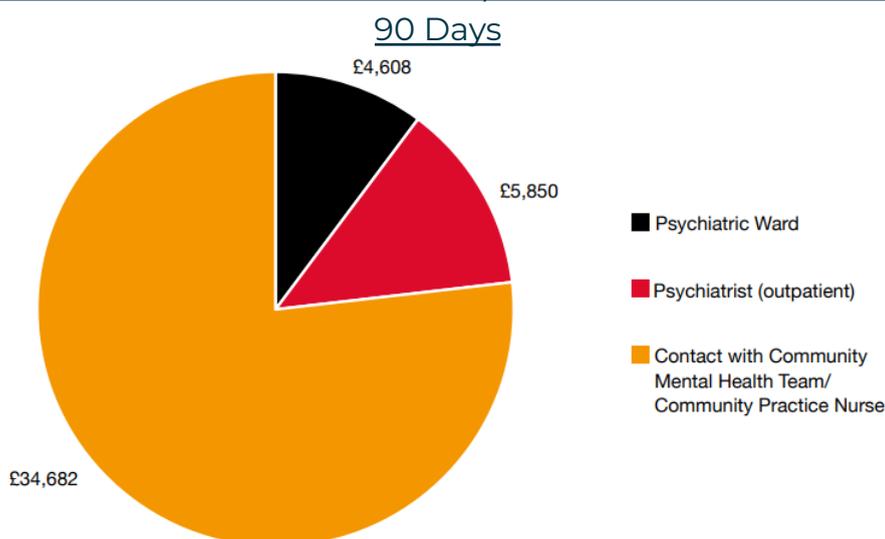
Mental Health Services

Homeless people, especially homeless women,⁶² are disproportionately affected by mental health problems. The extent to which these mental health issues are caused by homelessness is unclear, but the difference in mental health service use between a homeless person and their counterpart is informative. **Homelessness is independently correlated with a 45% rise in the length of stay of psychiatric admissions,⁶³ and homeless youth are 11 times likelier to be readmitted to a mental health inpatient ward than non-homeless youth.⁶⁴**



The estimated costs associated with this usage are substantial. Crisis found that, over 90 days, the total cost for 86 homeless people’s mental health service use was £45,140, which **amounts to an average annual cost of £11,528 per person in 2022 prices.⁶⁵** One study suggests that the net costs of mental health service use are 57% of the gross costs.⁶⁶ **This puts the annual net cost at £6570.96 per person.**

The Estimated Cost of 86 Homeless People’s Mental Health Service Use for 90 Days



Source: Pleace and Culhane, 2016

Physical Health Services

41% of homeless people in the UK have a long-term physical health problem, and the rate of traumatic brain injuries among homeless people is at least 5.4 times higher than in the general population.⁶⁷ It seems that a significant proportion of this disparity is due to becoming homeless, as **the homeless population are far**



⁶² Box, Flatau and Lester, 2022

⁶³ Khan, McCrone and Koehne, 2020

⁶⁴ Russell et al, 2020

⁶⁵ Pleace and Culhane, 2016

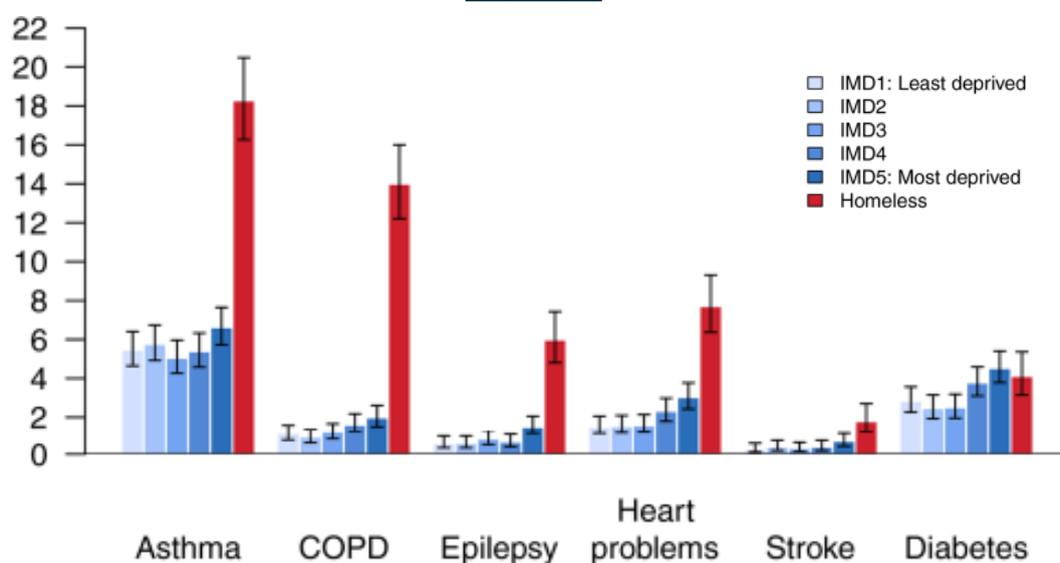
⁶⁶ Culhane, Metraux and Hadley, 2002

⁶⁷ Stone, Dowling and Cameron, 2018

likelier to have a variety of debilitating health conditions than even the most deprived housed group. The often unhygienic and unsuitable condition of temporary accommodation plays a role: **nearly 60% of people said their health had deteriorated as a result of living in temporary accommodation.**⁶⁸

The graph below points to the overwhelming effect of homelessness on health outcomes, as distinct from general social deprivation. For example, **only 2% of the most deprived index of multiple deprivation has chronic obstructive pulmonary disease, compared to 14% of the homeless group.**

The Prevalence (%) of Long-Term Health Conditions, with 95% Confidence Intervals



Source: Lewer et al, 2019

What’s more, the negative health effects of homelessness can be inherited, exacerbating the damage caused. Low-income women in housing are nearly three times less likely than homeless women to experience a complication with their pregnancy, and are half as likely to go into preterm labour or have a haemorrhage, both of which may have long-term consequences for the child.⁶⁹ In addition, children are most likely to experience homelessness before they are 6, and stressful or unpredictable events at this age can alter brain structure at a genetic level.⁷⁰ In part as a result, homeless children have a 25% greater risk of disability and severe ill health across their life course.⁷¹

These figures help to explain the much higher rate of mortality among homeless people. In 2018, the Office for National Statistics reported that **the mean age of death was 44 for homeless men and 42 for homeless women,**⁷² the equivalent statistics for the UK’s



⁶⁸ Credland, Lewis and Radebe, 2004

⁶⁹ Clark et al, 2019

⁷⁰ Anthony, Vincent and Shin, 2017

⁷¹ Barnes et al, 2013

⁷² Khan, McCrone and Koehne, 2020

general population are 79 and 83 respectively.⁷³ **The benefits of avoiding homelessness associated solely with reduced mortality have been estimated at £17,000⁷⁴ per person**, when the age-adjusted mortality rate for homeless people is taken to be twice what it is for the general population.⁷⁵ This is very likely an underestimate, since there is UK research suggesting that mortality risk is 5 times higher for rough sleepers or those staying in a homeless shelter, 6 times higher for squatters, and 3 times higher for those sofa-surfing or staying in a low-cost hostel.⁷⁶

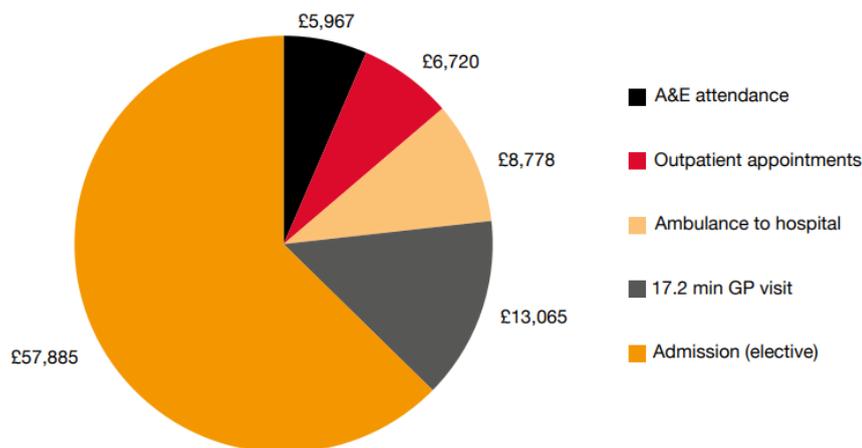
Despite their significantly heightened need for healthcare, people experiencing homelessness have very limited access to it. Difficulties registering with a GP, transportation barriers, and avoidance due to negative experiences are just some of the contributing factors. Illustratively, homeless people in the UK were 60% less likely to have had a Coronavirus vaccination by the end of 2021, remaining unvaccinated on average 55 days longer than the most deprived group of housed people.⁷⁷ This leads to a significantly elevated use of emergency health services,⁷⁸ which is not only much more expensive, but also has major human costs. One study found that **nearly one in three deaths among homeless people were due to causes amenable to timely healthcare.**⁷⁹



a significantly elevated use of emergency health services,⁷⁸ which is not only much more expensive, but also has major human costs. One study found that **nearly one in three deaths among homeless people were due to causes amenable to timely healthcare.**⁷⁹

Putting a financial figure on all of these effects is very challenging. One study found that 86 homeless respondents used the NHS 359 times over 90 days with a total estimated expenditure of £92,415, the equivalent in 2022 prices of £11,537 per person per year.⁸⁰

The Estimated Cost of 86 Homeless People’s Healthcare Use for 90 Days



Source: Pleace and Culhane, 2016

⁷³ Office for National Statistics, 2021
⁷⁴ Calculated in 2022 prices by adjusting the US Environmental Protection Agency value of statistical life for inflation, then converting to pounds using 2022 exchange rates.
⁷⁵ Evans, Sullivan and Wallskog, 2021
⁷⁶ White et al, 2021
⁷⁷ Thomas, 2022
⁷⁸ McNeill, O'Donovan and Hart, 2022
⁷⁹ Aldridge, 2020
⁸⁰ Pleace and Culhane, 2016

Following one study which assumes that people would use NHS services 24% less if they were not homeless,⁸¹ **the reduction in healthcare costs associated with preventing one person from becoming homeless is around £2800 per year.** There is evidence that those who have slept rough for a long time, those with chronic diseases, and those with diagnosed mental health disorders, especially serious mental illnesses, have much higher healthcare costs than other homeless people.⁸² **This appears to be the lower bound of the cost benefit possible when preventing one person from becoming homeless.** One study found that a homeless person's annual healthcare costs are £8000 net of a non-homeless person's, in 2022 prices.⁸³

Substance Use Support Services



St Mungo's estimates that 32% of homeless people have an alcohol dependency, and 63% have a drug problem.⁸⁴ There is evidence of a cyclical effect: as discussed previously, a substance use problem raises one's odds of becoming homeless, and it also appears to reduce the chances of exiting homelessness by 30%.⁸⁵ One study finds that **the costs of substance use support services totals roughly £4600 per person per year in 2022 prices.**⁸⁶

Domestic Abuse

There is an acute lack of shelter and support for victims of domestic violence which can lead them to remain in abusive environments. There are few dedicated women's refuge spaces, and even fewer which are equipped to meet the complex needs of victims with substance use problems or mental health issues.⁸⁷ In one study, **46% of homeless women surveyed reported having previously remained in an abusive relationship because they had no alternative shelter.**⁸⁸ Women who do leave can become vulnerable to different forms of violence: **homeless people are 17 times more likely to be kicked, urinated on, or sexually assaulted.**⁸⁹ The scarcity of available support means that some victims of domestic abuse face an impossible choice between violence at home and vulnerability on the streets.

⁸¹ Pleace and Culhane, 2016

⁸² Zaretsky et al, 2017

⁸³ Zaretsky, Flatau and Brady, 2008

⁸⁴ Department of Communities and Local Government, 2012

⁸⁵ Nilsson, Nordentoft and Hjorthoj, 2019

⁸⁶ Pleace and Culhane, 2016

⁸⁷ European Federation of National Organisations working with the Homeless, 2019

⁸⁸ ACLU, 2006

⁸⁹ Simon on the Streets, 2022

Education

Homeless children are far likelier to miss out on education than their peers. **Up to half of all homeless children do not attend school,**⁹⁰ with reasons including children's and parent's health problems, the costs associated with transport, and the reluctance of some schools to enrol students without proof of residence. Although Local Educational Authorities (LEAs) have a statutory obligation to ensure that all school-age children within their jurisdiction have access to education, administrative complications mean that homeless children often slip through the cracks. For instance, one study found that **Local Housing Authorities informed LEAs of the placement of a homeless child in temporary accommodation within their jurisdiction in only 6% of cases.**⁹¹



When homeless children are able to attend school, they suffer from lower levels of educational achievement. **Pupils who are homeless have been found to underperform in reading and maths by six percentile points relative to their peers, controlling for ability prior to becoming homeless.**⁹² Moreover, they are twice as likely to be diagnosed with a learning difficulty and to repeat a year of school.⁹³ This shortfall in achievement is attributable in part to the difficulty concentrating caused by the fatigue, hunger, and stress which children in temporary accommodation experience.⁹⁴

Beyond the obvious costs to children deprived of the opportunity to fulfil their potential through education, the impact of homelessness on education negatively affects public finances. **People who first experience homelessness before the age of 15 are approximately 10% less likely to be employed as adults than those who experience homelessness later in life,** and the effect of dropping out of school explains between a quarter and a half of this discrepancy.⁹⁵ Moreover, as limited educational attainment is itself a predictor of homelessness, homeless children are more likely to rely on state support as adults, contributing to a vicious cycle of homelessness costs.



Social Services

Homelessness can cause children to enter the care system, though it is hard to calculate the extent to which this occurs in the UK because 'homelessness' is not a recorded reason for care admittance. Having said this, based on the responses of one third of English councils to a freedom of information request in 2015,⁹⁶ an

⁹⁰ DeVilbiss, 2014

⁹¹ Power et al, 1995

⁹² Rafferty, Shinn, and Weitzman, 2004

⁹³ Evans, Sullivan and Wallskog, 2016

⁹⁴ Scanlon and McKenna, 2018

⁹⁵ Cobb-Clark and Zhu, 2017

⁹⁶ Hilditch, 2016

estimated 600 children end up in care every year as a result of homelessness in England alone. **Even if all of these children leave care after just one year, this is an annual cost to English local authorities of over £7 million** (using a government figure adjusted to 2022 prices).⁹⁷



One estimate has the rate of childhood foster care among homeless families as 34 times higher than average.⁹⁸ In combination with the strength of foster care as a predictor for homelessness, it is again easy to see how a cycle of homelessness develops. Preventing one case of homelessness not only reduces foster care costs for that generation, but it lowers the chance of costs in future generations too.

Criminal Justice System



Homeless people in the UK have a 47-fold higher risk of being victims of theft⁹⁹ and 77% of non-statutory rough sleepers have been victims of violence or anti-social behaviour in the last year.¹⁰⁰ Homeless people also have higher odds of imprisonment and conviction than others, and it seems to be the case that becoming homeless increases criminal activity.^{101 102}

Those experiencing homelessness may become trapped in a pernicious cycle of homelessness and offending. Illustratively, **prisoners released into homelessness are nearly 3 times more likely to reoffend than other prisoners**,¹⁰³ and, as discussed above, offending increases one's risk of homelessness.

It is not surprising that this staggering human cost is accompanied by a significant financial one. In 2016, the total justice costs associated with 86 homeless people over 90 days were £257,818, which comes in at almost £15,000 per person per year in 2022 prices.¹⁰⁴ **Estimates for the annual additional criminal justice costs per person connected with homelessness are in the order of £9300 in 2022 prices.**¹⁰⁵

⁹⁷ Department for Communities and Local Government, 2012

⁹⁸ Institute for Children, Poverty & Homelessness, 2017

⁹⁹ Martin, 2014

¹⁰⁰ Dore, 2019

¹⁰¹ Department for Communities and Local Government, 2012

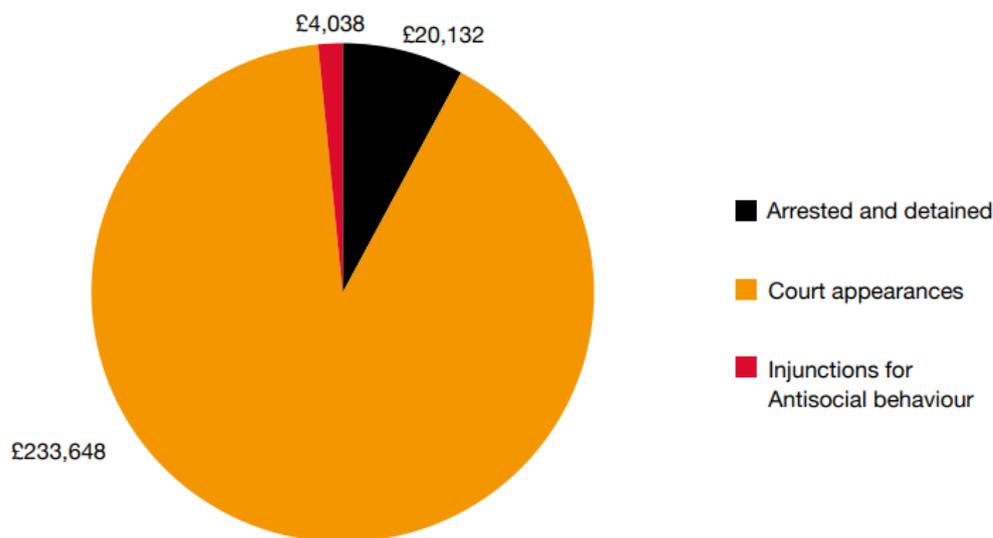
¹⁰² Flatau et al, 2019

¹⁰³ Pleace and Culhane, 2016

¹⁰⁴ Pleace and Culhane, 2016

¹⁰⁵ Peiffer, 2020

The Estimated Justice Costs for 86 Homeless People Over 90 Days



Source: Peplace and Culhane, 2016

These costs are not distributed uniformly across the homeless population. Having a diagnosed mental health condition, being high-risk in relation to one or more drugs, and having experience in the care system when younger than 18 all correspond to twice the mean justice costs for homelessness, and this rises to a multiplier of three for those who had slept rough before the age of 18.¹⁰⁶



Conclusions

The Estimated Annual Net Cost of Homelessness in England, using 2022 Prices

Cost area	Annual net cost per homeless person (£)*	Annual net cost in England (£)***
Quality-of-Life-Related	172,158	35,016,937,200
Lowered Taxable Income and Higher Unemployment Benefits	7,000	1,423,800,000
Homelessness Services	18,500	3,762,900,000
Mental Health Services	6,571	1,336,541,400
Physical Health Services	2,800	569,520,000
Substance Use Support Services	1,978**	402,325,200

¹⁰⁶ Flatau et al, 2019

Social Services	–	7,000,000
Criminal Justice System	9,300	1,891,620,000
Total excluding quality-of-life costs		£9,393,706,600
Total		£44,410,643,800

*Inflation-adjusted to 2022 prices.

**0.43 times the gross costs displayed in earlier sections. Relatively crude estimate calculated by averaging the proportion of gross healthcare costs that were net costs (0.24), and gross criminal costs that were net costs (0.62).

***Calculated by multiplying the annual net cost per homeless person by the 2020 Crisis estimate of core homeless households in England (203,400).

Combining the costs compiled in previous sections, we reach the estimate that **the annual net cost of homelessness in England is £44.4 billion, or £9.4 billion excluding the quality-of-life related costs.** Since this figure encompasses only the households experiencing the most acute forms of homelessness, since 2020 is a year that had lower numbers of homeless households than average, since ‘hidden’ homeless people are likely not accounted for, and since there are more homeless people than homeless households, **this estimate of net costs almost certainly falls short of the actual figure.** Furthermore, homelessness produces significant costs in areas not included in this estimate, such as education and domestic abuse, discussed above, for which no cost figure was calculated. The fixed cost per homeless person associated with higher mortality was also not included as the annual estimate could not be calculated.

This finding is corroborated by widespread evidence that preventing homelessness yields extensive savings. **Maidstone Borough Council and Xantura used data analytics to reduce homelessness by 40%, producing more than a 600% return on investment,**¹⁰⁷ and a feasibility study in Liverpool of a Housing First model has estimated potential annual savings of £3-5 million.¹⁰⁸ Beyond what can be captured financially, being homeless can be completely devastating. Rapidly increasing numbers of people in England are exposed to its destructive effects. It is clear that the prevention of homelessness must be prioritised urgently to save money, and most importantly, lives.

¹⁰⁷ Xantura Ltd, 2020

¹⁰⁸ Fransham and Dorling, 2018

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