

LONDON BOROUGH OF HAMMERSMITH & FULHAM HOMELESS HEALTH FACTSHEET



Ill health is both a cause and effect of homelessness. People experiencing homelessness are particularly vulnerable to illness, injury, and unhealthy lifestyles and often struggle to access health services, leading to some of the poorest health outcomes, including life expectancy, in the population.



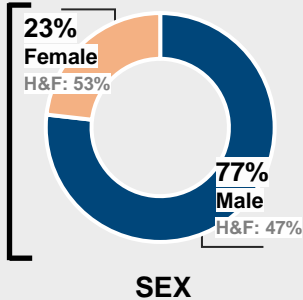
CONTEXT

This factsheet offers a snapshot of the health of people experiencing homelessness in Hammersmith & Fulham, summarising responses to a questionnaire sent out to 125 people in the supported accommodation pathway for rough sleepers, as of mid-December 2023. This includes people in hostels and semi-independent housing. Data may not fully reflect the health of the current rough sleeping population, of which there are 3 to 7 individuals on any given night in the borough.^{1, a} However, given the fluidity of this population, and efficient engagement with support accommodation, significant overlap between the surveyed group in terms of health status is expected.

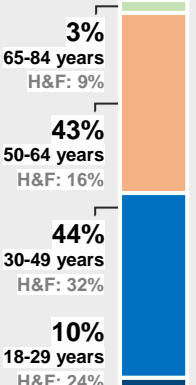


SURVEY DEMOGRAPHICS

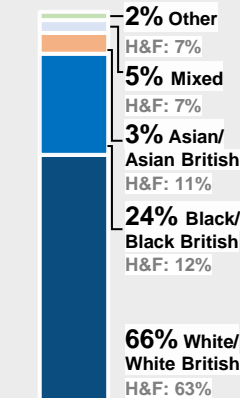
People in H&F supported accommodation are predominately **white, male** and aged **30-49 years old**.²



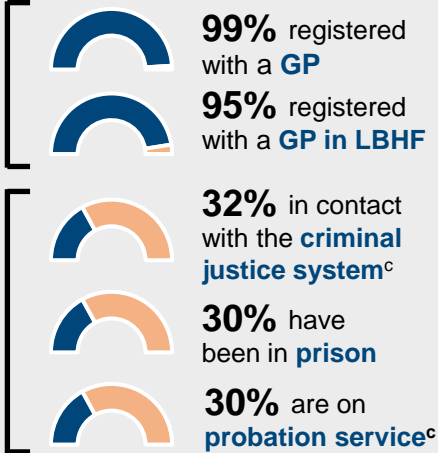
SEX



AGE^b



ETHNICITY



LONG-TERM CONDITIONS

79% of people in H&F supported accommodation have at least one long-term condition (including both physical and mental conditions and disabilities), compared to 35% of GP registered patients residing within LBHF.³

PHYSICAL HEALTH



53% have one or more **physical health condition**



23% have two or more **physical health conditions**



76% of those with a **physical health condition** also have a **mental health condition**

Prevalence of the most common physical health conditions:^{3,4}



9.6% Asthma
H&F: 4.2%



6.4% COPD
H&F: 1.3%



5.6% Hepatitis C
England: 0.14%^d



5.6% Epilepsy
H&F: 0.2%

■ Significant

The symptom joint pain was reported by 6.4% of people in H&F supported accommodation, of which 25% was reported alongside the condition arthritis (prevalence: 4.8%).

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MENTAL HEALTH

Prevalence of mental health conditions:



67% in H&F supported accommodation population



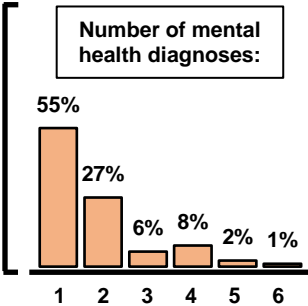
25% of GP registered patients residing within LBHF³

Of those in H&F supported accommodation with a mental health condition:

34% are under the care of a community mental health team^c

20% have a history of being a mental health inpatient

59% of those with a mental health condition also have a physical health condition



Prevalence of the most common mental health conditions:^{3,5,6}



38% Depression
H&F: 11.4%



23% Anxiety
H&F: 12.1%



12% Personality disorders
H&F: 5.7%



10% Schizophrenia
England: 0.5%^d

■ Significant ■ Not significant

9% of people in H&F supported accommodation additionally reported suicidal ideation and/or self-harm.



SUBSTANCE MISUSE

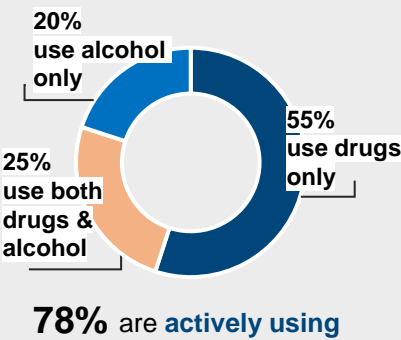
In the H&F supported accommodation population:

84% have a known substance misuse issue

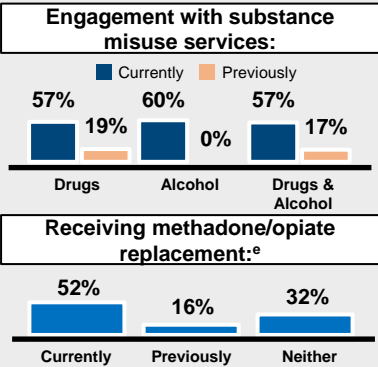
5% have a history of a substance misuse issue

11% have no substance misuse issue

Of those with a known substance misuse issue:



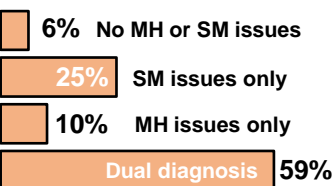
Of those with a substance misuse issue who are still using:



OTHER

DUAL DIAGNOSIS

Dual diagnosis refers to co-occurring mental health and substance misuse issues. Often, the two are entangled and feed into one another.



ADULT SOCIAL CARE

8% are receiving support from adult social care

7% are awaiting for an assessment from adult social care

Of those receiving ASC support:

