

# Housing First: How to radically reduce rough sleeping this parliament

BRIEFING PAPER

September 2025

SMF

Social Market  
Foundation

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This briefing is an attack. It is an attack on those who argue that ending rough sleeping is unrealistic, or assume its solutions are impossible or unclear. It is also an attack on recent policies which failed to make lasting progress. These strategies have been expensive and ineffective, and have reinforced an impression among the public that England's leaders are incapable of improving the lives of their most vulnerable constituents. In reality, rough sleeping is a markedly tractable problem which is amenable to rapid reductions so long as it is taken seriously. This briefing therefore provides a cross-government agenda that would radically reduce rough sleeping in this parliament through cost-saving, Housing First policies that have already proven successful both at home and abroad.

## KEY POINTS

- Rough sleeping in England has more than doubled in the past five years
- This trend is reversible, and recent history shows rough sleeping is amenable to government interventions:
  - Since 1990, rough sleeping has risen and fallen in direct response to central government policy
- Housing First is designed to be more efficient and cost-effective than current interventions by offering individuals experiencing rough sleeping a home of their own without conditions while providing optional support
- Housing First has been proven to be more effective at accommodating those with complex needs and encourages more durable tenancies than other interventions
  - In Finland, Housing First has halved the country's rough sleeping population
  - In Scotland, 80% of Housing First recipients remained in their home after two years
  - In pilot schemes in Manchester, Birmingham and Liverpool, 92% of tenancies remained in place over the long term, and led to improvements in safety, health, and involvement with the criminal justice system
- Housing First also costs less than existing interventions, with pilots in Scotland and England saving between £8,000 and £10,000 per benefiting person per year
- Providing Housing First to everyone sleeping rough in England would cost ~£75 million in its first year and fall to ~£45 million going forward. Over five years, savings from lower service demand would generate nearly £200 million in net fiscal benefits.

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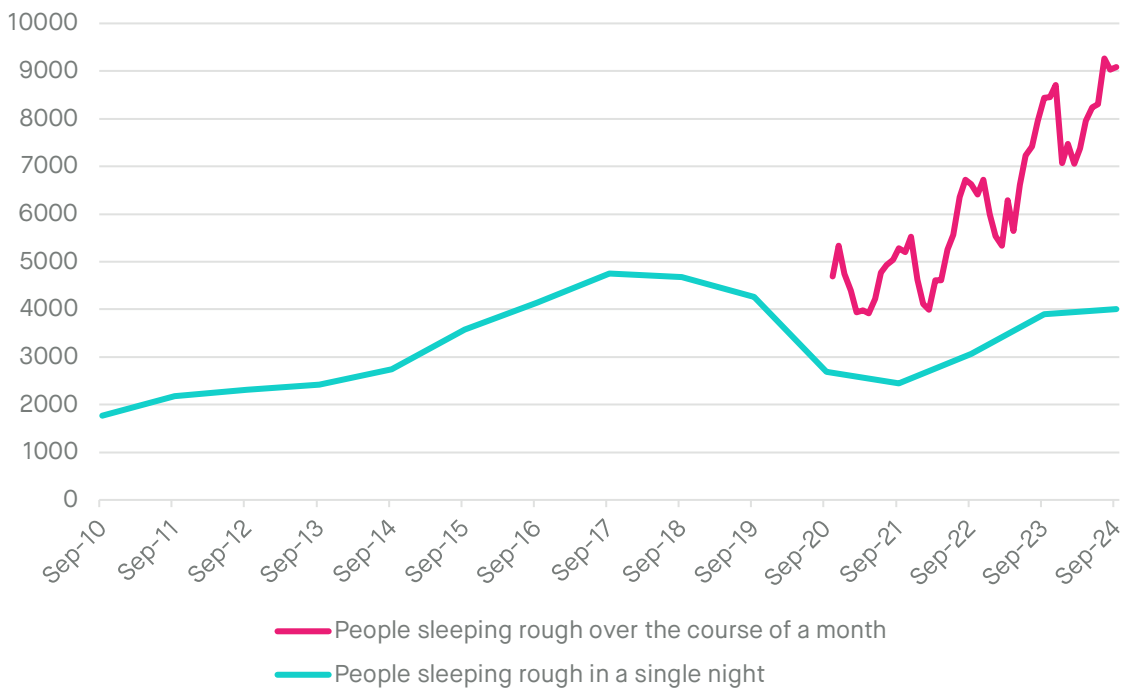
This project was advised by and owes thanks to Prof. Beth Watts-Cobbe at the Institute for Social Policy, Housing and Equalities Research at Heriot-Watt University.

## THE STATE OF ROUGH SLEEPING IN ENGLAND

Current policies are failing to prevent homelessness in England. The Government's 2024 party manifesto included a central pledge to introduce a cross-government strategy to end homelessness.<sup>1</sup> Yet in the UK, one in every 200 households experience homelessness, and rough sleeping – when those who are homeless are forced to sleep outside, in cars, or other places not designed for it – has risen.<sup>2</sup>

4,667 people were sleeping rough on a single night in Autumn 2024, equating to 8.1 people per 100,000.<sup>3</sup> This was 20% higher than the year before, and 164% higher than in 2010 when the snapshot approach was introduced, in which local authorities count those sleeping rough in a single night. These numbers are known to underestimate the problem, however, with monthly data indicating that there were 2.2 times as many people sleeping rough over the course of a month than on a single night.<sup>4</sup> The number of rough sleepers has grown over the past three years in every region and in 54% of local authorities. London and the South East, however, see particularly high numbers, holding 45% of those sleeping rough in England, which has increased by 17% over the past year.<sup>5</sup>

**Figure 1:** Rough sleeping in England over time



Source: MHCLG<sup>6</sup> Note that monthly analyses of rough sleeping only began in October 2020

Separately, researchers at Heriot-Watt University have combined government and survey data to get a fuller picture of the scale of rough sleeping in England, estimating that number of people experiencing it increased from 7,900 during 2012, falling to 6,300 in 2020 due to measures put in place during the COVID-19 pandemic, before rising rapidly to an estimated 11,700 in 2022.<sup>7</sup>

Data produced by CHAIN focusses on rough sleeping in London. While their data is limited geographically, London sees the highest rates of rough sleeping in the country. Further, CHAIN provides more reliable findings than the snapshot counts run by local authorities. CHAIN found that about half (47%) of rough sleepers are new to rough sleeping, with the rest made up of those who live on the streets or do so intermittently.<sup>8</sup> CHAIN research also noted the presence of those who had recently left institutions, finding they make up 37% of rough sleepers, including 28% who had left prison, 8% who had left care facilities, and 3% who had left the armed forces.

A majority of those sleeping rough (62%) are from the UK, with the rest either from abroad (27%) or unknown (11%), though CHAIN found the number born in the UK to be lower, between 47% and 49%.<sup>9</sup> Services are currently prevented from being able to effectively support this demographic as many have no recourse to public funds (NRPF).

Many experiencing rough sleeping require support beyond immediate housing, combining accommodation with holistic support related to addiction, mental health, justice, and employment. In terms of support needs, researchers in 2015 estimated that of 186,000 individuals who experience homelessness each year in England, 33,000 struggle with substance abuse at the same time, 31,000 have contact with the criminal justice system alongside their homelessness, and 58,000 were experiencing a combination of all three forms of disadvantage.<sup>10</sup> Just 34% of the homeless population were classed as “homeless only.” The combination of homelessness with other problems indicates a need for interventions that provide accommodation alongside other forms of support. Researchers in London recently found that 50% of those sleeping rough need mental health support, while around a third (34%) require help with drugs and 29% with alcohol. 35% require more than one type of support, while 31% have no alcohol, drugs, or mental health support needs.<sup>11</sup>

Those who find themselves sleeping rough often share similar routes onto the street, having left state institutions, especially prison, with nowhere to go or having been evicted from a mainstream tenancy, hostel, or other accommodation.<sup>12</sup>

This leads to a ‘revolving door’ in which someone experiencing rough sleeping is given accommodation, yet later returns to the streets. Gaps in the Homelessness Reduction Act and further enforce this problem. Despite important expansions to the legal safety net for homeless households in 2017, and the introduction of ‘universal’ prevention and relief duties on local authorities, single people sleeping rough can still fall through the gaps of statutory support and (unlike in Scotland and Wales) are usually owed no rehousing duty if prevention and relief efforts fail.

### **Rough sleeping is amenable to policy interventions – history proves it**

Rough sleeping is an extremely tractable problem, with the number of rough sleepers in England closely tied to the policies set by the central government. Recent history shows how ending rough sleeping is achievable through the rollout of evidence-based policies. This section breaks it down:

### **1991 – 2010: Conservative and New Labour Governments decreased rough sleeping through combining resources and regulations to provide accommodation and support**

After seeing rough sleeping grow in the 1980s, the Rough Sleepers Initiative (RSI) was established in 1990 to fund an umbrella of local services including outreach workers, hostel places, move-on accommodation, and resettlement aid.<sup>13</sup> The combination of new services as well as the procedural changes they introduced led to significant reductions in street homelessness through the early 1990s.

After numbers began to rise again, the new Labour government announced a target to reduce rough sleeping by two-thirds in 2002, establishing a cross-departmental body to invest in accommodation as well as resettlement support, mental health and addiction workers, and street outreach services. The Government saw rapid reductions, and their goal was met ahead of schedule in 2001.<sup>14</sup>

Building on their success, the Labour government contrived new policies designed to affect the wider homeless population. This began by establishing a new target to halve the number of statutorily homeless households staying in temporary housing by introducing new responsibilities for local councils and offering support for a range of services to those at risk of homelessness.<sup>15</sup> The preventative approach, known as Housing Options after the range of services authorities offered, led to a 70% decline in statutory homelessness between 2003 and 2010,<sup>16</sup> though it is acknowledged that this reduction reflected both effective prevention activity as well as at least some “gatekeeping” by local authorities.<sup>17</sup>

These strategies operationalized a growing understanding of the interrelationship between homelessness and complex support needs like substance misuse, parental violence, mental health, and experience with the criminal justice system.<sup>18</sup>

### **2010 – 2017: When Coalition and Conservative Governments decreased support for homelessness, they quickly saw a spike in rough sleeping.**

The Coalition Government elected in 2010 abruptly halted national programmes related to homelessness and passed the burden to local authorities. The retreat of the central state from the homelessness sphere led to critical failures when it came to sharing best practices and providing adequate resources, ultimately undermining the same local authorities that ministers were demanding take the lead. In the context of wider budget cuts for local authorities, homelessness prevention and response programmes cratered, with rough sleeping more than doubling between 2010 and 2017.

The increase in the number of people sleeping rough has been attributed in part to the decline of resources provided by central policymakers.<sup>19</sup> Local authorities tend to cite the withdrawal of public funds, including welfare reforms over the 2010s which reduced money in the pockets of low income households, austerity which restrained the ability of local authorities to respond, and localism, which saw the central government absolve itself of responsibility for the issue.<sup>20</sup> This increased pressure on wider homelessness services, and decreased the availability of suitable housing.<sup>21</sup>

### **2017 – 2020: After Theresa May’s government prioritised homelessness programmes they quickly began to reverse rising rough sleeping rates.**

By 2017 problems in homelessness services had led to widespread public concerns as well as official criticisms from the National Audit Office.<sup>22</sup> The 2017 Conservative Manifesto promised to halve rough sleeping over the course of the parliament and to eliminate it within ten years. Its subsequent Rough Sleeping Strategy brought in new funding for homelessness services and was coupled with the first Housing First pilots that were rolled out in Birmingham, Liverpool, and Manchester.

The new Rough Sleeping Initiative (RSI2) funded responsive interventions to help those sleeping rough into appropriate mainstream and supported accommodation. Local authorities which received funding saw a 19% drop in rough sleeping numbers compared to national drop of just 2%. Later interventions, particularly the Homelessness Reduction Act, required local authorities to take steps to prevent and relieve any eligible households experiencing or at risk of homelessness, expanding coverage to include single people who had previously been excluded from material assistance (though the vast majority remain excluded from the main rehousing duty if such prevention and relief efforts failed).

### **2020 – 2024: A rapid and radical change in approach developed in response to the COVID-19 pandemic radically reduced the rough sleeping population, but supports were later withdrawn.**

On the 26<sup>th</sup> of March, 2020, the Ministry for Housing, Communities and Local Government instructed England’s local authorities to move all rough sleepers into private accommodation where social distancing was possible.<sup>23</sup> £3.2 million was provided to local authorities to support people sleeping rough as well as £4.6 billion to cope with general financial pressures. The Government estimated that because of this strategy roughly 30,000 people who had been sleeping rough or were at risk of doing so had been assisted into emergency accommodation, and over 90% of rough sleepers familiar to councils had been offered accommodation.<sup>24</sup>

These resources in combination with benefits and preventative measures led to a 35% drop in the number of households judged to be threatened with homelessness between the first and second quarters of that year. Overall, between 2019 and 2021, rough sleeping fell by 43 percentage points.<sup>25</sup>

However, the short-term nature of the “Everyone In” initiative made its successes short-lived. Within days of sending the original letter, the MHCLG wrote to councils asking them to plan how to help people move on from emergency accommodation. Funding was not guaranteed over the long term, limiting the time over which councils could make progress.<sup>26</sup> Since resources and requirements were withdrawn in 2021, rough sleeping has nearly doubled, growing by 91 percentage points, and now sits above its pre-COVID-19 level<sup>27</sup> Baseline forecasts project it to rise further in the immediate future.<sup>28</sup> Unfortunately, the opportunity and political will that the COVID-19 pandemic presented to sustainably lower rough sleeping levels has not yet been grasped.

## **WHAT IS HOUSING FIRST?**

Housing First is an intervention strategy aimed at reducing rough sleeping, providing access to permanent housing as a foundation upon which residents can tackle associated challenges, such as addiction, mental health, or employment.<sup>29</sup> It contrasts with “linear,” or “stairway,” approaches that make permanent housing conditional on these non-housing issues. As stated in a report on Finland’s policy, “In the Housing First model, a dwelling is not a reward that a homeless person receives once their life is back on track. Instead, a dwelling is the foundation on which the rest of life is put back together.”<sup>30</sup> Pilots and evaluations in England and internationally have proven Housing First to be more effective than the Government’s current approaches, and less costly. This section therefore provides an introduction to the policy which could radically reduce rough sleeping in this parliament.

The Housing First model was developed in New York in 1992, and supports homeless people by providing them with permanent independent housing. The Government’s pilot programmes are based on seven key principles adopted from Housing First England:<sup>31</sup>

## Housing First principles

1. People have a right to a home
2. Flexible support is provided for as long as it is needed
3. Housing and support are separated
4. Individuals have choice and control
5. An engagement approach is used
6. The service is based on people's strengths, goals and aspirations
7. A harm reduction approach is used

Housing First does not impose conditionality, and provides housing *before* and *regardless of* the applicant demonstrating their ability to live in accommodations, contrasting with England’s current approach. It does not impose preconditions for sobriety, abstinence, or engagement in treatment and support. This may be done through social housing or through agreements made with the private rented sector.

As stated in Housing First Europe’s final report:

*“Support is provided to those homeless persons who need it, but sobriety and/or motivation to change are not requirements for getting access to permanent and self-contained housing, nor can a failure to comply with support services lead to an eviction. Compliance with normal residential tenancy laws is the only requirement.”<sup>32</sup>*

The report goes on to outline a new interactive relationship between state services and people who are sleeping rough, with the latter no longer needing to meet conditions to gain support from the former.

*“The Housing First approach is innovative as it opposes the notion that homeless people require any “preparation” outside the regular housing market and it favours quick allocation of permanent housing with on-going support even to people with the most serious and complex problems such as mental illness and co-occurring substance abuse.”*

In the Housing First model, housing is provided not as a reward but a foundation to address other issues. This leads it to be particularly effective in assisting those most vulnerable to rough sleeping, including those with long term mental health and addiction issues.

This is not to say that treatment is not made available. The second distinct element of Housing First is its individualised support structure.

In addition to providing housing, support workers are made available to recipients to help them tackle mental health problems, addiction, disabilities, trauma, employment, and other issues. These services are meant to be provided with no fixed end-date, varying between high and low intensity on a case-by-case basis. Support is meant to be individualised, and led by the recipient who has a choice over what services they choose to engage with, if any, and the extent to which they wish to engage. This is meant to be coordinated by staff workers with low case-loads to ensure individualised engagement. Staff also link to services across sectors, and are meant to provide pathways into and out of Housing First according to the recipient’s desires.

Another distinction Housing First has to traditional approaches is its longevity. Recipients of Housing First support are provided with long term stable housing, allowing them to integrate into permanent social and economic ties that help them move forward. This includes ensuring individuals will not lose their housing if they disengage with services or no longer require state support. Assurances like these replace confusing and counterproductive temporary or emergency accommodation that often forces people experiencing rough sleeping into a seemingly endless series of relocations.<sup>33</sup> This unstable lifestyle makes it difficult for people to find stable employment, form social connections, or access addiction and health treatments, undermining their ability to get off the streets.

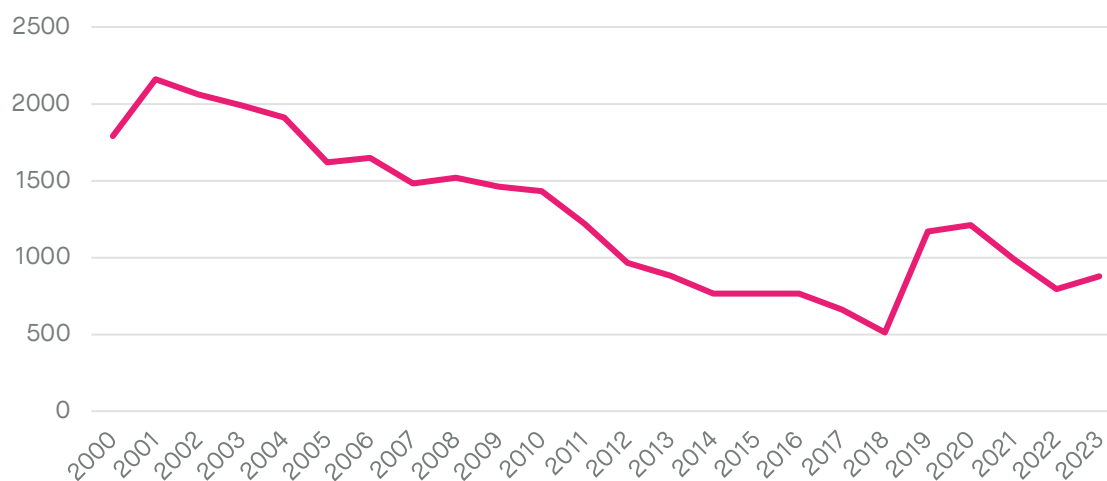
In practice, commitment to this element varies. In some cases, antisocial behaviour or a failure to live up to a tenancy agreement may result in a persons’ eviction. But even in this case, support workers and resources are expected to stay with the person, helping them to acquire and maintain a new home.

### **Housing First methods have proven successful at home and abroad**

**Finland** has seen remarkable success following its prioritisation of Housing First policy in 2008. Homeless people can now receive apartments without any preconditions, and without a requirement that they solve social or health issues beforehand.<sup>34</sup> Recipients receive a normal tenancy agreement and are required to

pay rent and operating costs, but can apply for housing allowance to help afford rent if required. This is meant to provide residents a sense of permanence and control.<sup>35</sup> Services are made available and support workers often operate within residential buildings.<sup>36</sup>

**Figure 2: Individuals experiencing rough sleeping in Finland over time**



Source: Housing Finance and Development Centre of Finland. Includes those sleeping outdoors, in temporary shelters and dormitories etc.

Since 2009, homelessness has fallen from over 8,000 to approximately 3,800. Those who are considered long-term homeless<sup>ii</sup> declined from approximately 3,500 to 1,000.<sup>37</sup> This was the most significant drop in the EU and the only country to experience a sustained decrease in homelessness.<sup>38</sup> On average, 80% of homeless people in Finland have accessed housing through the programme.

At the same time, it saved public money. In 2008 there were almost 600 temporary accommodation beds in Helsinki, yet in 2019, the provision of alternatives had successfully cut this number to just 52.<sup>39</sup> A 2011 study on the Finnish experience found that each person who benefited from Housing First saved the public between EUR €15,000 (£13,000) and €52,000 (£45,187) per year compared to business as usual approaches.<sup>40</sup>

Finland's policy has also been credited as politically sensible, arousing no major opposition, and supported by politicians, the public, civil servants, and advocates in the housing space.<sup>41</sup> This has partly been credited to the success of the policy, clear communications on the benefits, and the integration of multiple actors in design and delivery.<sup>42</sup> It has also been deployed in other Scandinavian countries, particularly

<sup>ii</sup> According to the Finnish definition, a long-term homeless person “has a significant social or a health problem, such as debt, substance abuse, or mental health problems, and whose homelessness has been prolonged or is in danger of being prolonged due to a lack of conventional housing solutions and appropriate support services. Homelessness is considered long-term if it has lasted for at least one year or if the individual has repeatedly experienced homelessness over the last three years. In cases of long-term homelessness, the emphasis is on the need for assistance and treatment—the length of time is of secondary importance.”

Norway and Denmark, which also saw high housing retention rates in most programmes.

Housing First has worked in conjunction with other Finnish policies to reduce homelessness since the 1980s, notably the construction and maintenance of social housing stock, and alongside well-resourced services including health and welfare. The Y-Foundation, a non-profit landlord, is a keystone in the policy space, renting homes for people experiencing rough sleeping and receiving discounted state loans to purchase their properties.<sup>43</sup> Over ten years between 2008 and 2019, this cost the Finnish government €270million (£234million).<sup>44</sup>

However, more recent Finnish experience provide concerning lessons. Last year, Finnish government statistics noted the first increase in homelessness and rough sleeping in eleven years. The change follows cuts to public funding for housing advice, as the current government seeks to balance the national budget, while rising rents have fuelled an increase in demand for housing services.<sup>45</sup> At the same time, researchers have noted a decreasing number of available affordable units, pushing more people into temporary accommodation.<sup>46</sup> Finland shows that, even following enviable success, delivering solutions to rough sleeping through interventions based on Housing First requires committing and sustaining resources over the long term.

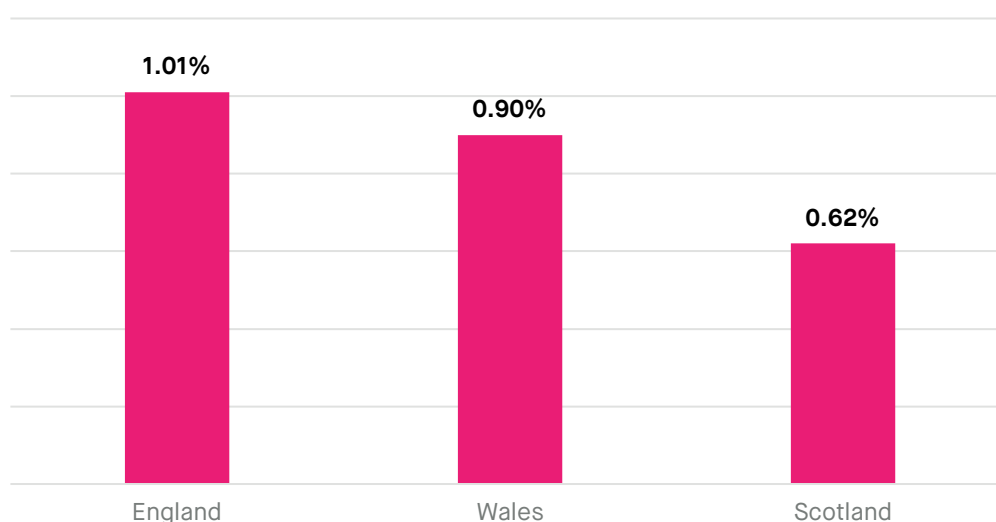
**Scotland** also shows the success of a Housing First approach. Between 2019 and 2022, the three year Pathfinder programme scaled up Scotland's Housing First provision across five regions, providing over £8 million to house 579 individuals with complex needs. A "scatter-site" approach was used to disperse recipients across neighbourhoods rather than concentrate them in particular tenements or apartment blocks. Rents were covered by a person's Housing Benefit or the housing component of Universal Credit. Support was provided to these individuals with support workers engaging with an average of just seven clients, supplemented by 24/7 access to telephone helplines. These were led by voluntary sector support providers, funded by both the Scottish Government and charitable organisations.

88% of tenancies were sustained after one year and 80% were sustained after two – a level commensurate with those recorded for Housing First interventions elsewhere.<sup>47</sup> These rates were particularly impressive considering the later years were affected by the COVID-19 pandemic, which placed pressure on vulnerable residents by increasing social isolation, limiting job opportunities, and closing community facilities. No evictions were recorded, and instead those tenancies which ended saw tenants pass away, return to temporary accommodation, return to other supported accommodation, abandon tenancies, or receive longer prison sentences than they were originally given.

**Regional breakdowns of rough sleeping across the UK further show that it is amenable to policy interventions.**

England's core homelessness rate is 1.01% - noticeably higher than other countries in Great Britain.<sup>48</sup> Rates in Wales are 0.9% and in Scotland they are just 0.62% (Figure ).<sup>49</sup> Further, these gaps are expected to widen. While core homelessness is expected to increase to 1.2% by 2040 in England, it is expected to decrease in Scotland and Wales.<sup>50</sup> These are not inevitable divergences but the result of policy decisions made by central and devolved governments.

**Figure 3: Core homelessness rate in the UK (excludes NI)**



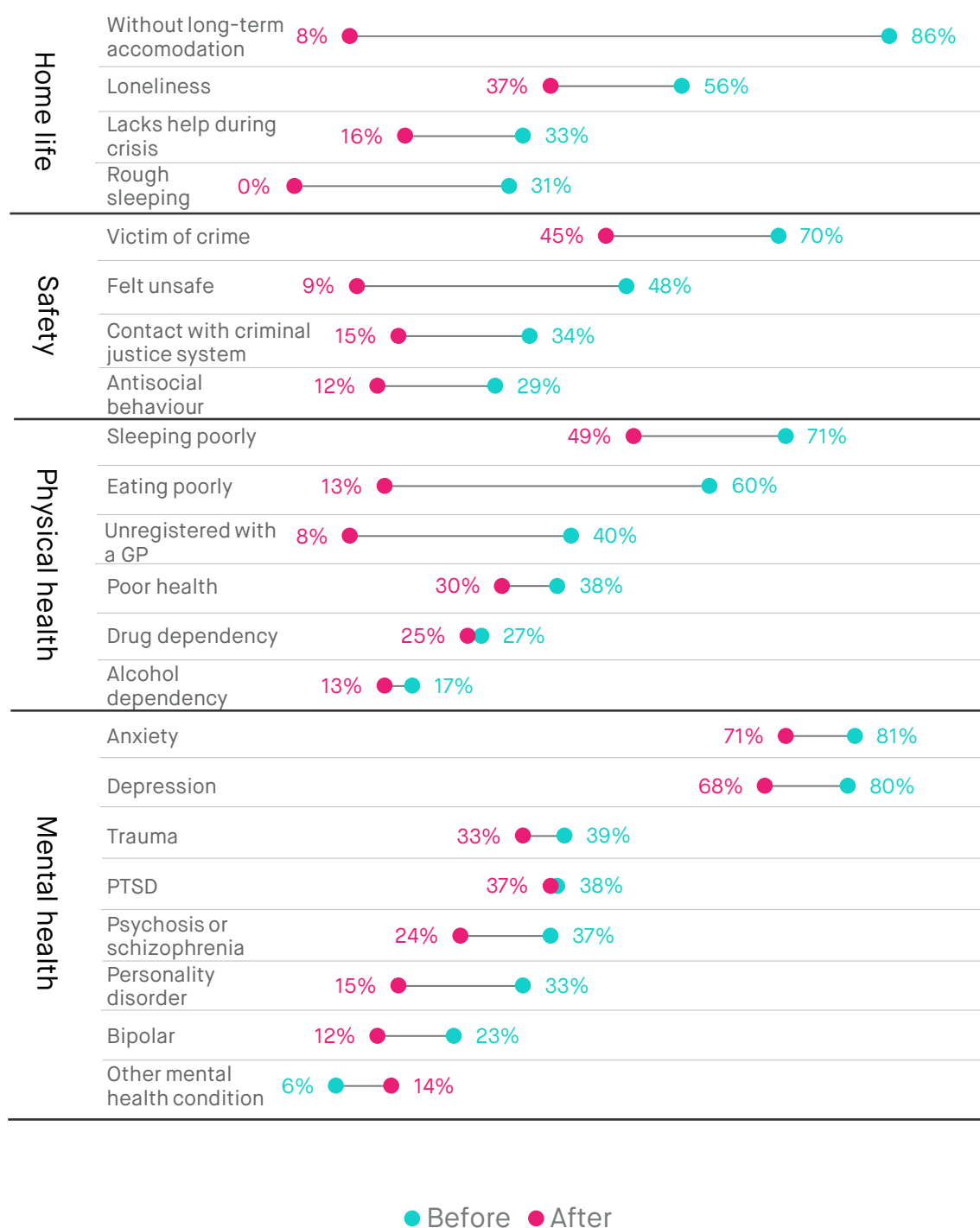
Source: Crisis<sup>51</sup>

**Manchester, Birmingham, and Liverpool pilots** were launched in 2018 and lasted five years. £28 million was allocated to allow and analyse the delivery of Housing First across the three combined authorities.<sup>52</sup>

31% of those who used the scheme had been sleeping rough. None were doing so after a year and 92% were in long term accommodation. At the same time, other improvements were seen across the cohort.<sup>53</sup>

The mental and physical health of participants improved markedly, decreasing the need and cost of health interventions. Participants reported eating and sleeping better, which may partially explain why anxiety, depression, loneliness and other mental health disorders all fell considerably. They also found easier access to support structures. Just 8% were unregistered with a GP by the end of the pilot, compared to 40% at the start, while the number who reported lacking help during a crisis fell by over half (33% to 16%).<sup>54</sup>



**Figure 4: Improvements among Housing First pilot beneficiaries after one year**

Source: Ministry of Housing, Communities and Local Government

The pilots also evidenced improvements in law and order, decreasing the need for police intervention. The number who regularly felt unsafe fell from 48% to an astonishing 9%. This was for good reason. Those who reported being the victim of crime fell from 70% to 45%, while contact with the criminal justice system halved, from 34% to 15%. Antisocial behaviour decreased from 29% to 12%.<sup>55</sup>

### Case study: Manchester's *A Bed Every Night* programme has led to a massive reduction in rough sleeping

Since its inception, A Bed Every Night has supported more than 3,000 people and been credited for restraining Greater Manchester's rough sleeping growth.<sup>56</sup> Initially much of the accommodation was in dormitory-style night shelters and shared rooms, but since then quality has improved and single-rooms are often offered. This has been especially significant as Greater Manchester had seen rough sleeping rise even faster than the rest of England, more than quintupling between 2010 and 2018.<sup>57</sup> However, following the introduction of the programme, these numbers were reduced. In November 2018, 241 people were estimated to be sleeping rough in Greater Manchester, yet two years later, this had been reduced to 115.<sup>58</sup>

Importantly, support was offered to those who are often ignored by policy for various reasons, including that they are not considered to be in priority need, considered to be homeless intentionally, or have No Recourse to Public Funds due to their migration status.<sup>59</sup> In fact, the programme was designed to act as a "service of last resort" for those for whom routine responses have failed.<sup>60</sup>

Reasons cited for Greater Manchester's success include high prioritization of the problem from leadership, bringing resources to the table from the local authority, charities, and public sector bodies.<sup>61</sup> This also involved closely coordinating with voluntary and faith-based organisations, health sectors, and criminal justice partners.

Housing First pilots played a role in Greater Manchester's success, accounting for hundreds of individuals being accommodated. But even beyond these cases, it is worth recognizing the elements of Housing First programming within A Bed Every Night, including the low barriers to access accommodation and the combined support to address wider needs.<sup>62</sup> While other issues remain, such as a challenging referral process, understaffed support structures, and a lack of move-on accommodation, A Bed Every Night signals the potential of public sector interventions to quickly and radically reduce rough sleeping.<sup>63</sup>

## HOUSING FIRST IS NOT ONLY MORE EFFECTIVE THAN EXISTING APPROACHES – IT COSTS LESS

Each of the above examples testifies to the ability of Housing First to provide shelter to those experiencing rough sleeping more efficiently than traditional approaches. But it also saves public money.

In 2024, 126,040 households were in temporary accommodation, though Shelter estimates that the true extent may be double that number.<sup>64</sup> Councils spent nearly

£2.3 billion over the 2023-24 financial year, with costs doubling over the last five years, and with more than one third of that total being spent on emergency B&Bs and hostels that tend to be overcrowded and lack basic facilities.<sup>65</sup> Net expenditure on these low quality accommodation has increased more than fivefold over five years, from £135 million to £732 million.<sup>66</sup> While this is already expensive, spending on emergency accommodation is expected to nearly double to £1.2 billion by 2027. The concurrent social costs, including those on health, criminal justice, education, and substance misuse was estimated to be £3.1 billion in 2023-24 alongside £733 million in productivity losses.<sup>67</sup> Despite rising costs, last year councils received just £400million in grant funding to spend on domestic homelessness and temporary accommodation, and while future grants are set to increase, they pale in comparison to the need.<sup>68</sup>

Any homelessness intervention will require funding, yet this can be redistributed from elsewhere in the budget. The UK spends a relatively small amount on homelessness responses, resulting in high costs related to health, law and order, and social security and assistance. External costs related to homelessness are difficult to quantify, but most studies estimate that they could be reduced and outcomes improved by focusing on providing people with permanent housing over the long term.<sup>69</sup> Providing long term assurances can allow local authorities to pursue more strategic approaches, and more efficiently deploy public money. These interventions have the added benefit of decreasing net spending on welfare by lowering pressure elsewhere on health services, police, housing, and emergency service interventions.

In the Manchester, Birmingham and Liverpool Housing First pilots, cost-benefit analysis revealed savings for local authorities as a result of the scheme. The cost of delivering pilots averaged £7,700 per person per year to the end of 2022. The benefits, meanwhile, are expected to amount to £15,880 per person per year through improved well-being and reduced public service costs. The costs of homelessness are calculated using the lower-end costs from a range identified by PWC, indicating that, if anything, the cost-effectiveness of the pilots are likely to be greater.<sup>70</sup> Importantly, more than half the value of these benefits was estimated to be realised within the first year of participants entering the programme, meaning even immediate benefits equal the annual programme costs. The benefit-cost ratio is estimated at 2:1 over the long term and 1:1 after twelve months.

These cost-savings correspond with other Housing First policies. Scotland's Pathfinder programme cost £13,349 per person, compared to pre-existing annual costs of homelessness estimated to be £23,000 per person, reaching a ratio of benefit-cost ratio of 1.7:1.<sup>71</sup> Evaluations of Housing First projects in the US, find similar ratios ranging from 1.3:1 to 1.8:1.<sup>72</sup>

Even without testing for returns related to quality of life, health outcomes, or productivity impacts, foreign evaluations show Housing First interventions costing less than traditional approaches. In Canada, a scheme supporting those with moderate mental illnesses found Housing First saved 34% of the cost of interventions, resulting in an average net cost offset of CAD \$4849 (£2,611) per

participant per year.<sup>73</sup> Finland's ongoing programme was found to save more than EUR €15,000 (£12,770) per person per year.<sup>74</sup>

Determining total fiscal costs and savings available through housing first depends on the total population expected to receive benefits. Many who experience rough sleeping will not require services as broad or intensive as Housing First provides. Others may not be from the UK and have no recourse to public funds (a topic to which we will return later). For the moment, let us take the maximum potential cost. Providing Housing First to the total number of people sleeping rough over the course of a month in Summer (the peak time in the year) means approximately 9,300 would benefit. Based on average cost of delivering pilot Housing First schemes in England, serving them would cost £72 million, and generate £147 million in benefits, with net savings for the government amounting to £76 million. Applying these numbers to Crisis' estimated rough sleeping population of 11,200, the programme would cost £86 million and generate savings of £178 million, resulting in net fiscal savings of £92 million per year. Of course, if fewer people are provided with Housing First, costs will fall, but so too will net fiscal savings.

It is unclear how much funding the programme would require following an initial wave. The number receiving Housing First will vary depending on the overall flow of individuals into rough sleeping and the proportion of them that require individualised care. As those new to rough sleeping are less likely to require intense support than those who have been on the streets long term, funding likely will not need to keep pace. Again, however, let us take the worst-case scenario. Data produced by CHAIN this year estimated that between 46% and 49% of people on the streets in London are new to rough sleeping. This would indicate that Housing First would need to be provided to between 4,200 and 5,500 additional individuals per year assuming London's experience is representative of net rough sleeping flows in England.<sup>iii75</sup> Providing all of them with Housing First would cost between £32 million and £43 million per year and generate savings worth between £66 million and £88 million per year.

While Housing First can and should be prioritised to those experiencing rough sleeping, it can also be made available to decrease local authority spending on temporary accommodation. Savings here would be more difficult to estimate given that the social cost of individuals and families in temporary accommodation tend to be lower than those who are experiencing rough sleeping, so the benefit-cost ratio would be lower.

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<sup>iii</sup> These numbers differ as the lower number is based on official statistics which claim 9,300 rough sleepers, and multiplies this by the lower CHAIN estimate of proportion of rough sleepers at 46%. The higher number is based on Crisis which estimated that 11,200 people are sleeping rough, and multiplies it by the higher CHAIN estimate of 49%.

## RECOMMENDATIONS

### The Government should allocate £44 million per year for local authorities to provide Housing First based on existing pilots

Serving the 9,300 people currently experiencing rough sleeping at its peak in summer would cost the government £72 million and generate £147 million in savings, based on data from Housing First pilots. To be clear, this is likely an overestimate, as many in this category are new to rough sleeping and only doing so temporarily. However, it provides a maximum scenario. Following this, half that total, £36 million, would be required to meet future demand annually, generating savings between £66 and £88 million per year. In total, this would cost £216 million over the next five years or £43.2 million per year, and generate cost-savings of £441 million over five years, with net fiscal benefits worth £195 million. Based on pilots already held in England, doing so would have a benefit-cost ratio of 2:1 over the long term and pay for itself within a year through savings on welfare, healthcare, and public safety.

Although Housing First has been proven to be more cost-effective than interventions currently in place, cost savings are often felt more by the central government rather than local authorities. Savings enjoyed by the NHS, criminal justice services, and portions of homelessness services all filter through to central government funding, while local authorities foot the bill for Housing First. This reduces incentives for local authorities to intervene and has up until now obstructed many from introducing worthwhile homelessness interventions. For this reason, and as Councils are already expected to see their finances squeezed, funding will have to come from the central government.<sup>76</sup>

Liverpool, Birmingham and Manchester pilot schemes should serve as an example of best practices to be replicated by local authorities. This would see the Ministry for Housing, Communities and Local Government (MHCLG) require local authorities take the following steps:

- Secure accommodation agreements and partnerships to provide adequate homes either in supported housing or in the private sector
- Establish simple and rapid referral pathways to access Housing First
- Hire and administer team capable of maintaining tenancies and responding to problems
- Build relationships with voluntary and faith-based organisations, health partners, and the criminal justice sector to feed into Housing First programmes
- Hire a sufficient number of support workers such that they can provide individualised support with small caseloads not exceeding 7 people
- Develop multi-disciplinary teams to join up service responses such as health, drug and alcohol services
- Other necessities as outlined in the final report on the Housing First pilots<sup>77</sup>

In order to support a sufficient proportion of people experiencing rough sleeping, Housing First support should be available to those who are not deemed to be in priority need or deemed intentionally homeless under homelessness legislation. Further, without including people with No Recourse to Public Funds, such a programme- especially in London- would be limited to the proportion of individuals with access to housing benefits. While providing Housing First to migrants might seem politically unviable, Greater Manchester has decreased rough sleeping numbers without excluding this demographic. Including those with No Recourse to Public Funds will likely lower benefit-cost ratios by adding the additional cost of housing benefits, to which such migrants are not currently entitled, yet is essential to decrease rough sleeping where non-UK nationals make up a high proportion of the population.

Following the pilot scheme timelines, local authorities would have two years to implement Housing First programmes and regulations capable of responding to their rough sleeping population. This would be used to establish a Housing First team, including staff to find, develop, and manage accommodations, social work staff, and administrators. Funding should be provided based on the rough sleeping population, according to the latest snapshot data, with a proportionate share going to each council. Where housing support is provided by mayors and combined authorities, funding and responsibility may be provided through their offices.

### **A Housing First director should be appointed at MHCLG to lead a team with the capacity and resources to advise local governments on best practices**

Liverpool, Birmingham, and Manchester benefited from being large local authorities with staff capacity for cross-sectoral learning and coordination. The same cannot be said for smaller local authorities. While these see lower numbers of people experiencing rough sleeping than denser urban counterparts, they will also have less capacity to apply best practices learned from elsewhere.

Civil servants are best placed to learn and share best practices across local authorities. This would be most important as local authorities roll out Housing First packages but would remain a necessity as tweaks are inevitably required to respond to local conditions. For instance, some local authorities may be able to provide Housing First through social housing while others may need to work with landlords in the private rented sector to find adequate accommodation. The team would therefore act as a “one-stop-shop” to discuss and develop plans related to Housing First provision.

In addition, this team would be appointed to report annually on the success and challenges of rolling out the Housing First programme. Reports would use snapshot and monthly rough sleeping data to gauge the success of Housing First in combination with other homelessness strategies at reducing rough sleeping. Like reports on England’s pilot schemes, it would also document the impact of Housing First provision on wellbeing, and social issues, such as mental health, physical health, home life, loneliness, and safety. Finally, it would look at existing challenges to the rollout of Housing First, as well as what is needed at a local and central level.

Previous successes at decreasing rough sleeping in England showed the importance of collaboration between local and central government. This team would act as a vital go-between, connecting ministers with local leaders to better understand the regulations and resourcing needed to radically reduce rough sleeping.

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