

## 19<sup>th</sup> SEPTEMBER, FRIDAY

11h30 – 12h50

SEMINAR SESSION 3 - Participants will be asked to select one of these 6 parallel seminars

### Seminar 14: Health and Homelessness (Room: X) - Chair: Nóra Teller, HU

#### Michela Tinelli and Joanne Coombes, UK: Evaluating the Economic Impact of Intermediate Care for People Experiencing Homelessness: Lessons from Implementation in England

##### Background

Individuals experiencing homelessness often face complex health and social care challenges requiring coordinated, multidisciplinary support. Out-of-hospital care (OOHC) models, such as intermediate care services, aim to address these needs. However, evidence on their effectiveness and cost-effectiveness in real-world settings remains limited. This study evaluates the implementation of England's Out-of-Hospital Care Models (OOHCM) programme, funded by the Department of Health and Social Care (2021–2023). The programme tested housing-led intermediate care models to support individuals experiencing homelessness.

##### Methods

A mixed-methods evaluation was conducted using a before-and-after design across 17 test sites that implemented service delivery. Quantitative data sources included national audits, monitoring forms, Hospital Episode Statistics, and self-reported questionnaires on outcomes, preferences, and resource use (n=907). Service delivery implementation costs were calculated using government audit data, while NHS costs were derived from hospital statistics where available. Impacts on public budgets in health, social care, mental health, drug misuse, housing, and criminal justice were assessed primarily through self-reported service utilisation due to limited local authority data. Qualitative case studies contextualised findings and addressed gaps in quantitative data. Peer researchers with lived experience of homelessness contributed to recruitment, data collection, and analysis. A cost-consequence analysis framework was employed, supported by infographics and dashboards for visualisation.

##### Results and Comments

The OOCHM programme showed positive trends in patient experience, safety, clinical outcomes, and economic impacts. For instance, step-down care reduced A&E visits by 56% within one year. Economic insights provided actionable evidence for practitioners and commissioners where available. Challenges included poor-quality data, lack of standardisation, variations in service models, disconnect and poor sharing of information, and limited integration of peer researchers into evaluation processes. Future research should explore longitudinal designs, alternative data sources, real-time analytics, and participatory methods to strengthen evidence on OOHC effectiveness and cost-effectiveness for this vulnerable population.



**Dr Michela Tinelli**, a health and care economist at LSE, has been working to improve coordination between services that help individuals who are homeless rebuild their lives. **Joanne Coombes**, who has personal experience of homelessness, joined the research team and became the first full-time peer researcher at King's College London. Their collaboration has been crucial in developing more effective research methodologies. Coombes's lived experience allows Dr Tinelli to connect with individuals who are homeless in ways that academic researchers often cannot, providing invaluable insights and data collection opportunities.

#### Martin Simon, CZ: Health Equity Failure We Allow: Evaluation Study of Joint Social Work and Healthcare Provision

##### Background

Homelessness as an extreme form of poverty perpetuates and exacerbates health inequalities. People experiencing homelessness face a mortality rate 10 times higher than that of the general population, with an average age of death at 45. There is a significant disconnect between the mainstream healthcare system and the specific health needs of people experiencing homelessness, leading to substantial human and economic costs.

##### Objective

The objective of this evaluation study is to assess the impact of an intervention in nurse-led healthcare outreach services to people experiencing homelessness on their utilization of healthcare services.

## Design

This study is a part of a research program aimed at assuring health equity of most vulnerable members of a society. Detailed understanding of barriers to care is a necessary precondition for improvements in healthcare use.

## Data

The study analyzes data on hospitalization and emergency department visits by people experiencing homelessness across three cities in Czechia from 2014 to 2021.

## Methods

A quantitative difference-in-differences approach is complemented by insights from field studies in these three cities.

## Results

The intervention in people experiencing homelessness outreach led to a reduction in both hospital admissions and the emergency visits by people experiencing homelessness, alleviating pressure on health service capacity and reducing associated healthcare costs. Enhanced primary nurse-led healthcare outreach, along with cross-sectoral integration and activation, has lowered the barriers to accessing essential healthcare services.

## Conclusion

A pivotal policy outcome of this study is the establishment of an insurance provision that allows medical doctors to claim additional costs incurred in treating people experiencing homelessness from a public insurance system.



**Martin Šimon** is a geographer with research interests in population mobilities and inequalities. His research includes projects on demographic change, homelessness, elections, crime and social exclusion. Martin Šimon is a senior researcher at the Institute of Sociology of the Czech Academy of Sciences and researcher of Urban and Regional Laboratory at Charles University. (Authors: Martin Šimon, Barbora Latečková, Oto Potluka)

## Fernando Fajardo-Bullón, Igor Esnaola and Paul Lambert, ES/UK: Situation of Homeless People in Spain. Analysing the Evolution Between 2012 and 2022 Through the Spanish Survey on homeless people

In 2022, a total of 28,552 homeless individuals received assistance in Spain, with an average of 86.6 homeless people per 100,000 inhabitants. The latest Spanish Homeless Survey (2022) reports a 24.5% increase in the number of homeless individuals receiving support in accommodation and catering care centres, compared to the previous survey conducted in 2012. This study aims to analyse changes in the health conditions, addictions, and social support of the Spanish homeless population surveyed in 2012 and 2022, alongside other general socio-demographic variables. Data will be collected from 3,600 respondents in 2022 (75.2% male; mean age: 42.8 years; SD = 14.99) and 3,433 respondents in 2012 (78.2% male; mean age: 41.3 years; SD = 13.86) in both Spanish Homeless Survey. Health status will be measured through self-rated health (SRH), a measure commonly used in European and Spanish surveys, addictions will be measured through use of alcohol, tobacco, gambling and other substance use, and perceived social support will be measured through contact and support with friends, family and perceived help from social services. Using multinomial logistic regression models, this study will not only compare the situation in 2012 and 2022 but also explore the relationships between these variables and their impact on the health of homeless individuals. This analysis will allow us to know the evolution of these conditions, and which factors have a greater weight on the health of Spanish homeless people. Through the results we will be able to suggest to the Spanish public social services and social sector entities which are those conditions of homeless people that most affect their health and how these conditions have changed in recent years in Spain. We hope that this study can contribute to the debate and evolution on health and social policies in Spain and Europe.



**Fernando Fajardo-Bullón** is a Senior Lecturer in the Department of Psychology at the University of Extremadura (Spain). He was representative of Spain in the European Action CA15218 - Measuring homelessness in Europe and a current member of the observatory of the social reality of the NGO Caritas Mérida-Badajoz. He has been part of the experts committee in collaborations with the Ministry of Social Rights, Consumption and Agenda 2030 and has published several publications on homelessness in high impact journals with colleagues from different countries such as Belgium, United Kingdom, Sweden or Finland. His field of study is physical and mental well-being, addictions and stressful events experienced by homeless people along their vital life.



**Igor Esnaola** is a full psychology professor at the University of the Basque Country (UPV/EHU). I have supervised six doctoral theses and I have participated in nineteen research projects in total. Likewise I have participated in two European projects (COST actions): one entitled "Measuring homelessness in Europe" and the other one "Researcher Mental Health". In the field of management, I have been editor (2008-2012), deputy editor (2012-2013) and director (2013-continued) of *Revista de Psicodidáctica*. Finally, I am the director of the department of Developmental and Educational Psychology since 2020.



**Paul Lambert** is a Professor of Sociology in the Faculty of Social Sciences, University of Stirling, where he publishes research on social stratification and inequality and on social research methodology. Within his department he is research group lead of the Social Surveys and Social Statistics research group and programme director of the MSc Applied Social Research and MSc Social Statistics and Social Research.