



Centre for
Homelessness Impact

The SHARE framework:

a smarter way
to end homelessness

Dr. Lígia Teixeira, Rachel McSweeney,
Stina Jönsson, Dave Russell and Andrea Lacey

VERSION 2

What
Works
Network 

The Centre for
Homelessness
Impact champions
the creation and
use of better
evidence for a
world without
homelessness.

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About the Centre for Homelessness Impact

The Centre for Homelessness Impact champions the creation and use of better data and evidence for a world without homelessness. We are a member of the UK What Works Network and launched in 2018 to act as a catalyst for evidence led change to enable people working in and around homelessness to achieve breakthrough results.

Acknowledgements

We'd like to thank everyone who offered their views and expertise to support us with our research and development. Thanks also to the hundreds of people who took part in the consultation in person or online.

The SHARE framework: a smarter way to end homelessness

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Foreword

At the Office for National Statistics, we aim to provide an evidence base that shines a light across the whole of society, including the most vulnerable and often least visible. We do this to inform the public, and so policy makers are able to make evidence-based decisions and drive change. Our priority is to provide better statistics with the greatest impact on the core issues facing society today.

Homelessness statistics are collected and published by each of the four nations of the United Kingdom according to their own legislative framework for housing. In response to user need, last year we worked across the Government Statistical Service to begin building a UK-wide picture of homelessness. This highlighted some key trends and characteristics of homeless people, whilst also discussing comparability and coherence across the data.

Homelessness remains one of the most pressing issues that society faces. There is a need to build on existing data and statistics to develop a clearer understanding of the multiple and often complex drivers that lead to homelessness. Our current understanding suggests factors including, but not limited to; private tenancy costs, poverty, job losses, family breakdowns and domestic abuse. It is important that we look at all potential indicators of those who are at risk, to provide a better evidence base that helps policy makers, local authorities and charities recognise these signs early on.

The consequences of homelessness can also be severe. Not just the absence of a stable place to live, but poorer social, economic and health outcomes. Data is also crucial in evaluating policies, interventions and support that will be required to reduce the numbers who are homeless and help improve outcomes.

Over the past 6 months, with the Centre for Homelessness Impact, we have looked deeper into these causes of homelessness. As a What Works Centre, CHI have drawn on a range of expertise from academics, practitioners and international evidence and best practice. Together, we have consulted with over 500 users who have experience of working in and around homelessness and they've given us valuable insights into what the key indicators relating to homelessness should be. In consultation with data experts within each of the nations of the UK, we have assessed and selected the best available data sources for the measures and drawn on the expertise of leaders in the indicators field.

This work has identified an initial set of homelessness indicators and measures, and this report outlines the research findings that informed its ongoing development. We hope that this framework and the development of the reporting platform will inform policy to help create lasting change.

Liz McKeown

Director of Public Policy Analysis
Office for National Statistics



Executive summary

This report introduces V2 of the SHARE framework, the latest phase of an initiative being developed by the Centre for Homelessness Impact, in collaboration with the Office for National Statistics (ONS), with input from Ministry of Housing, Communities and Local Government (MHCLG), Scottish Government, Welsh Government and the Northern Ireland Housing Executive (NIHE). It is intended to be a living document that will continue to evolve over the coming months and years.

To be confident that we are working towards ending homelessness - instead of simply managing the issue - attention must be focussed on what really matters, to achieve better results with the resources available. We developed this framework to help guide ongoing efforts. It provides a common vision and identifies five action areas that span a whole system-level view of homelessness and its causes, summarised in the word SHARE.



Based on current evidence, these action areas will allow us to collectively make significant and long-lasting changes by adhering to them over time. We know they are interconnected: one area in isolation can't achieve the

impact we need but progress on one leads to improvement in the others.

‘To end homelessness for good, we need to address the root causes rather than the symptoms’.

The framework draws on a review of the literature, an online consultation, stakeholder engagement events and a series of inputs from our partners and a wide range of stakeholders.

This report introduces SHARE, a simple, timely, and flexible framework developed by CHI that is grounded on the best existing evidence. In this new edition, the report now includes a set of homelessness indicators. CHI and ONS have also created a reporting platform which will allow users to explore the data and is available on CHI's website.

We joined forces with the ONS on this initiative because of their commitment to improving data and evidence to help the most vulnerable in our society and their expertise in developing and reporting indicator frameworks.

Because we learn by doing, the framework does not seek to be fully developed. As such it remains a work in progress with further indicators and measures under development. Over the coming months we will continue to engage with users to ensure it is useful and ‘fit for purpose’. For example, we will user test the functionality of the BETA version of the reporting platform, explore how current gaps in the data might be filled, and try to include local level data in the reporting platform. We also want to find examples of SHARE being used to reframe success or achieve better results.

Our hypothesis is that by reframing the challenge, taking care to ensure we're counting what counts, and taking advantage of the great expansion in the availability of data and technological developments, we will give ourselves the best chance of succeeding in our shared goal of ending homelessness for good.



01

Introduction: begin with the end in mind

Imagine your goal is to build a society where homelessness, when it cannot be prevented, is only ever rare, brief and non recurrent. Based on current evidence on how to prevent homelessness, five action areas – summarised in the word SHARE – offer the best chance of demonstrating significant progress towards, and achieving, this end.



Ending homelessness means: a society in which any experience of homelessness is prevented or rare, brief and non-recurring.



Smart policy

Design smart policies and programmes



Housing system

Create a housing system that leaves no one behind



All in it together

Make ending homelessness a shared priority



Relational

Connect people with place and each other



Ecosystem of services

Grow a person-centred ecosystem of services

The foundation of the framework is **resources and leadership**: a limited amount of resources are available to address these issues and leadership is crucial in ensuring that resources are used effectively.

SHARE was developed in response to the need for a simple, memorable framework to help policy-makers, independent funders, practitioners and the wider public prevent and tackle homelessness at population level.

In 2020 homelessness is firmly on the political agenda in each country of the UK, but without a common understanding of the end goal and what needs to happen to reach it, there is a risk the existing momentum will not be enough to move the dial on homelessness.



Ensuring any efforts are underpinned by an evidence-based framework could also help restore confidence amongst a public that is at present deeply sceptical about our ability to end or significantly reduce homelessness.¹

Homelessness is a multifaceted issue. With each success comes a new wave of challenges. Great strides have been made toward getting the right commitments in place. But the next obstacle to tackle — delivering on those commitments and ensuring change is long lasting — is much more complex. Having a common framework can help.

Also critical to success is good data. Poor data weakens our ability to respond in a timely manner and undermines critical Government and cross-sector efforts. Often the causes of homelessness are interconnected and complex; a rigorous set of indicators can provide a comprehensive picture of what we know and identify pressing gaps.

We joined forces with ONS on this initiative because of their commitment to improving data and evidence to help the most vulnerable in our society,² and the ONS expertise in developing and reporting indicator frameworks.³ It is intended to be a living document that will continue to evolve over the coming months and years.

Better statistics should be the cornerstone of better decisions. But reaching and understanding those most vulnerable is challenging as they are often the least visible. The latest ONS figures showing there were 726 deaths of homeless people in England and Wales in 2018, is a sombre reminder of what can be the most tragic consequence of homelessness.⁴ But this newly developed statistic also shows the

power of data to shine a light on an important issue so steps can be taken to prevent future deaths.⁵

This report introduces SHARE, a simple, timely, and flexible framework that is grounded on the best existing evidence. The framework draws on a review of the literature, an online consultation, stakeholder engagement events and a series of inputs from our collaborators and stakeholders.

In this new edition, the report now includes a set of homelessness indicators and core measures developed in collaboration with the ONS. We have also created a reporting platform which will allow users to explore the data.

Because we learn by doing, the framework does not seek to be fully developed. As such it remains a work in progress with further indicators and measures under development. Over coming months we will continue to engage with users to ensure it is useful and ‘fit for purpose’. For example, we will user test the functionality of the BETA version of the reporting platform, explore how current gaps in the data might be filled, and try to include local level data in the reporting platform. We also want to find examples of SHARE being used to reframe success or achieve better results.

We envisage SHARE continuing to be used in multiple ways to structure discussions and facilitate ideas generation. For instance, a local authority might use it when refreshing their homelessness or housing strategy, a trust or foundation might use it when developing their investment plans, or the Government might use it when designing their plans to track the impact of specific programmes. It is intended to be applied alongside a wider approach that draws on bodies of knowledge, the rigorous use of evaluation for capturing ‘what works’, and the unique experiences of the individuals, local areas or agencies using it.

¹ Teixeira, L. (2017) *Ending Homelessness Faster By Focusing on What Works*. London; and Teixeira, L. (2017), ‘*Why we need to change how we talk about homelessness*’ European Journal of Homelessness, 11:2 (December) FEANTSA.

² See for example ONS (2019), ‘*Improving homelessness and rough sleeping statistics across the UK*’.

³ See for example the ONS indicator frameworks ‘*National Well-being*’ and ‘*Sustainable Development Goals*’ which both achieved widespread commendation. The same internationally recognised best practice has been drawn on for the SHARE framework.

⁴ A rise of 22% in one year. See ONS (2019) *Deaths of homeless people in England and Wales*. 2018.

⁵ *UCL news* (2019) ‘A third of homeless deaths are from treatable conditions’.

02

Reframing the challenge

Since homelessness first made it into the national consciousness in the late 1960s, there has been a tendency to define success in the reduction of homelessness by the number of people affected and the amount of money secured for homelessness interventions.⁶

If the numbers go up there's indignation, if they go down there's celebration.⁷ Historically periods of low numbers have not been long-lasting, and in time the numbers rise again. At such times homelessness returns to the public's attention, leading to renewed political action and the provision of more resources. For lasting impact, we need to break this cycle. It is not enough to reduce numbers if we cannot sustain the gains. To do so we need to focus on ending homelessness at population level, rather than individual by individual.

⁶ Teixeira, L. (2017) [Ending homelessness by focusing on what works](#) London: Crisis.

⁷ O'Neil, M. et al. (2017) [Finding a Better Frame](#). London: Crisis. For specific tools on how to communicate effectively about homelessness see FrameWorks Institute, [Reframing homelessness in the UK: A message memo](#).



Historically, periods of low numbers have not been long-lasting, and in time the numbers rise again. For lasting impact, we need to break this cycle.

We know this, yet change has been slow. Despite our collective efforts and the fact that our best programmes help many individuals and families affected by homelessness, their impact hasn't changed much in the past 50 years. To build a strong and healthy society we must leave no one behind.

Renewed efforts to end homelessness are proliferating among a diverse set of stakeholders, some led by local or national governments,⁸ and others spearheaded by the media or the third sector.⁹ These developments have generated the demand for a common framework to frame and track progress. The SHARE framework offers a simple and flexible launchpad for these efforts.

Adopting a bird's eye view

Evidence suggests that, in the UK and elsewhere, the struggle for stable housing both shapes and is shaped by numerous factors such as financial stability, housing market dynamics, access to health care and involvement with the care system.¹⁰

So to drive lasting change we must take a bird's-eye view of homelessness; one that considers the bigger picture of the drivers and root causes of the issue. A systems-thinking approach is required: viewing homelessness as a complex and adaptive system. This is because changes to one part of the system will likely have knock-on effects on other parts.

⁸ See for example MHCLG (2018) [Rough sleeping strategy: delivery plan](#); NIHE (2017) [Homelessness strategy](#); Scottish Government (2018) [Ending homelessness and rough sleeping: action plan](#); and Welsh Government (2019) [Strategy for preventing and ending homelessness](#).

⁹ See for example Crisis (2018) [Everybody In: How to End Homelessness in Great Britain](#). London: Crisis.

¹⁰ Fitzpatrick, S. et al (2012) [Multiple Exclusion Homelessness in the UK](#); Bramley, G. & Fitzpatrick, S. (2015) [Hard Edges](#). LanKelly Chase; Evans, W. et al (2019) [Evidence Review: Reducing and Preventing Homelessness: Lessons from Randomized Evaluations](#), J-Pal.



To be confident that we are working towards ending — as opposed to managing — homelessness, we also need to ensure we are counting what counts and continually strive to achieve better results with the resources available.

The SHARE framework builds on and seeks to enhance current efforts that seek to define the population we are trying to reach, identify the outcomes we are trying to improve, and use data and analysis throughout the policy-making and service delivery chain to drive the systems re-engineering and continuous improvement attempts necessary to achieve better outcomes.

At its simplest, it provides a tool that anyone working in and around homelessness can use to frame discussions and direct efforts more positively towards the ultimate goal. Data is not yet available for all aspects of the framework. In subsequent phases of this work we will begin working towards filling the gaps in the data.

To help understand the complex systemic nature of homelessness we are also in the process of developing a systems-oriented overview of homelessness — a qualitative causal loop diagram similar to the example below — that in time might be integrated with the SHARE framework. This will shed light on the complex and inter-related structure of homelessness and provide a tool that helps decision-makers in the definition and testing of possible responses.





Tackling Obesities: Future Choices

The aim of the Foresight Tackling Obesities project was to 'produce a long term vision of how we can deliver a sustainable response to obesity in the UK over the next 40 years'. As part of the project visual representations of the obesity system map were developed to understand the wide range of different factors that influence levels of obesity and how they interact.¹¹

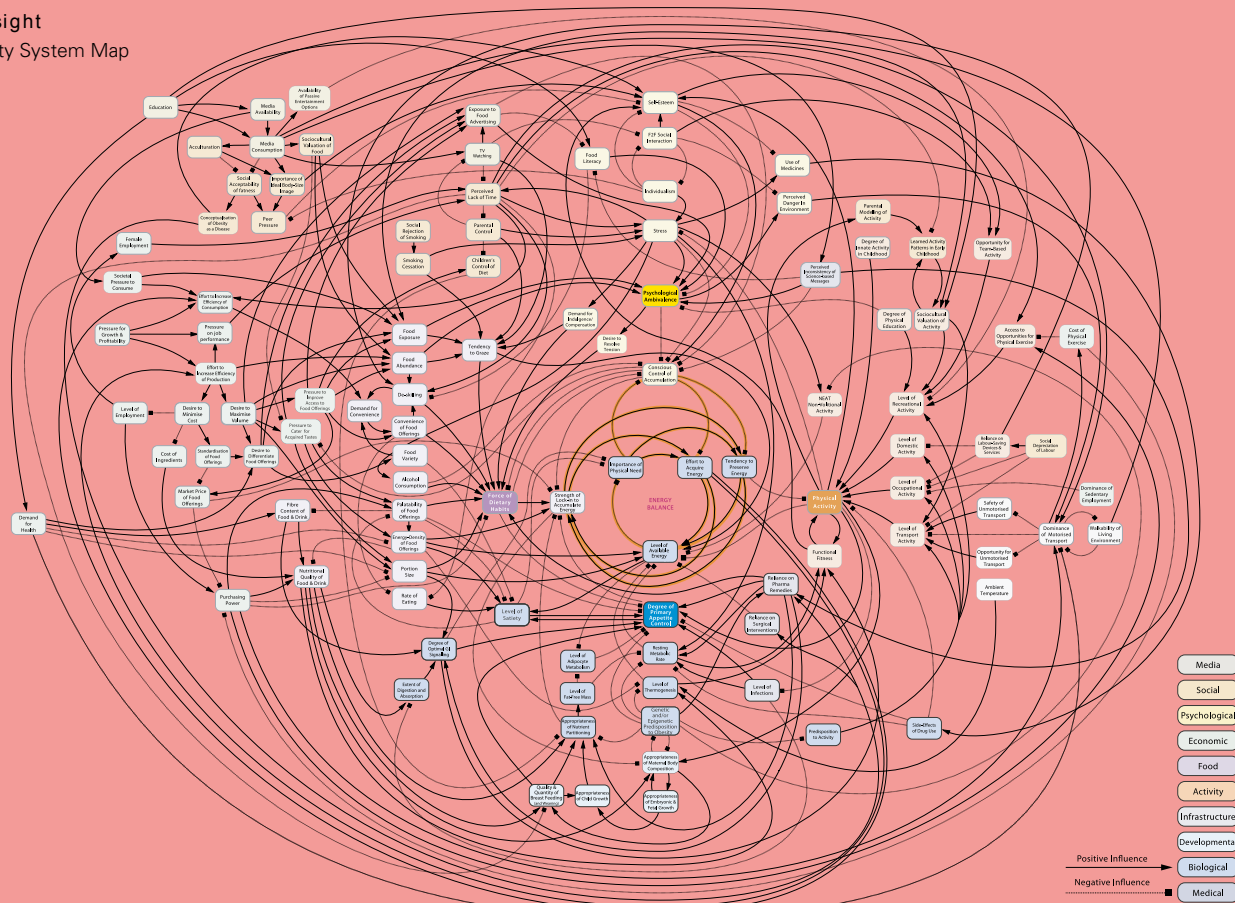
Obesity System Map

Figure 1a: Obesity System Map

(see the full map here: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/296290/obesity-map-full-hi-res.pdf)

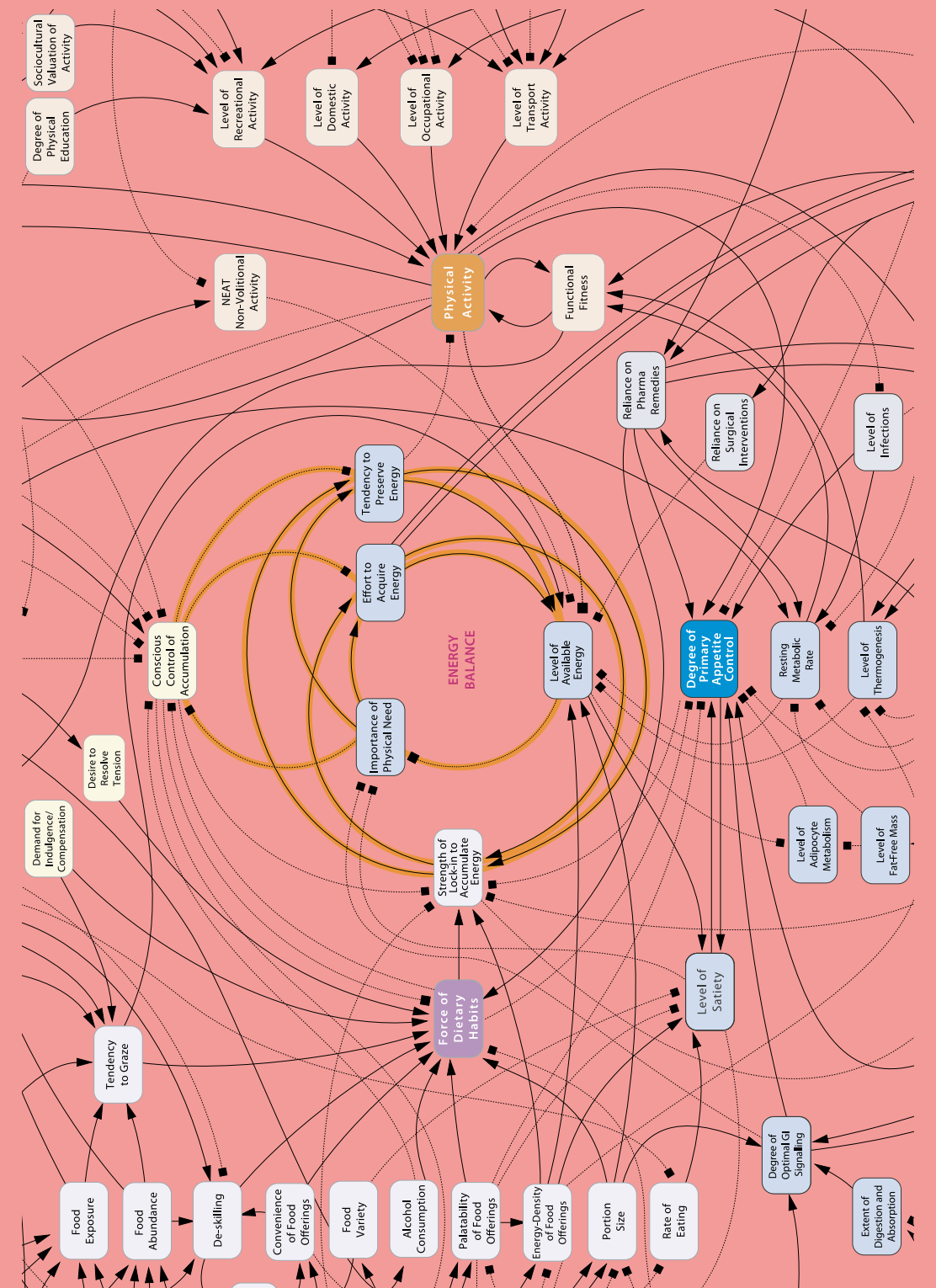
Foresight
Obesity System Map

24



¹¹ For more information about the Foresight Tackling Obesities Project, see <https://www.gov.uk/government/collections/tackling-obesities-future-choices>.

Figure 1b: Obesity System Map (detail)



25



03

The Framework

To be confident that we are working towards ending homelessness, we need to ensure that our attentions are focussed on what really matters to achieve better results with the resources available. SHARE was developed to help guide ongoing efforts. It provides a common vision and identifies five areas that span a whole system-level view of homelessness and its causes, summarised in the word SHARE.



Figure 2: SHARE Framework



The vision –

‘Ending homelessness for good’

By this we mean to create a society where homelessness, when it cannot be prevented, is only ever rare, brief and non recurrent.

– is intended to serve as a North Star or unifying goal.

With this in mind, current evidence suggests that the following five action areas will allow us to collectively make significant and long-lasting changes by adhering to them over time:

- S Smart policy**
Design smart policies and programmes
- H Housing system**
Create a housing system that leaves no one behind
- A All in it together**
Make ending homelessness a shared priority
- R Relational**
Connect people with place and each other
- E Ecosystem of services**
Grow a person-centred ecosystem of services

The foundation of the framework is **resources** and **leadership**: a limited amount of resources are available to address homelessness at population level and leadership plays a crucial role in ensuring their effective use.

We also know these areas are interconnected: one area in isolation can’t achieve the step change required but progress on one leads to improvement in the others.



S

Smart policy

Design smart policies and programmes

Public policies and programmes affect homelessness both directly and indirectly, offering opportunities for maximising impact. Greater use of evidence and data by policymakers, independent funders and practitioners has the potential to dramatically improve policy outcomes and contribute to homelessness reduction and prevention.

H

Housing system

Create a housing system that leaves no one behind

Good quality and secure housing is central to ending homelessness, yet many across the country struggle to afford a home that is safe, and meets their needs. For sustainable long-term solutions, people need to feel a sense of control and ownership over their accommodation—that it is more than simply a roof over their heads.

A

All in it together

Make ending homelessness a shared priority

Evidence suggests that until ending homelessness is a shared value for the whole of society, progress will be slow. Communicating more effectively and improving the general public's understanding that homelessness is not inevitable would create more public support for the policies and actions required for ending homelessness for good.

R

Relational

Connect people with place and each other

This includes strengthening relationships among family members and neighbours, among people and places, and between individuals within and between organisations. Stronger, more resilient communities also have lower levels of homelessness.

E

Ecosystem of services

Grow a person-centred ecosystem of services

Only through a coordinated system that integrates housing, healthcare, homelessness and social services and systems that work collaboratively with people at risk of, or experiencing homelessness can we ensure that efforts are tailored to the individual and that they are always treated with dignity, compassion and respect.



Co-designed with users and a wide range of partners, drawing on SHARE contains three main elements:

Action areas:

High-level areas that suggest where efforts could be focused to improve outcomes at population level.

Goals:

Conditions which provide confidence that progress is being made towards reaching ultimate vision.

Indicators:

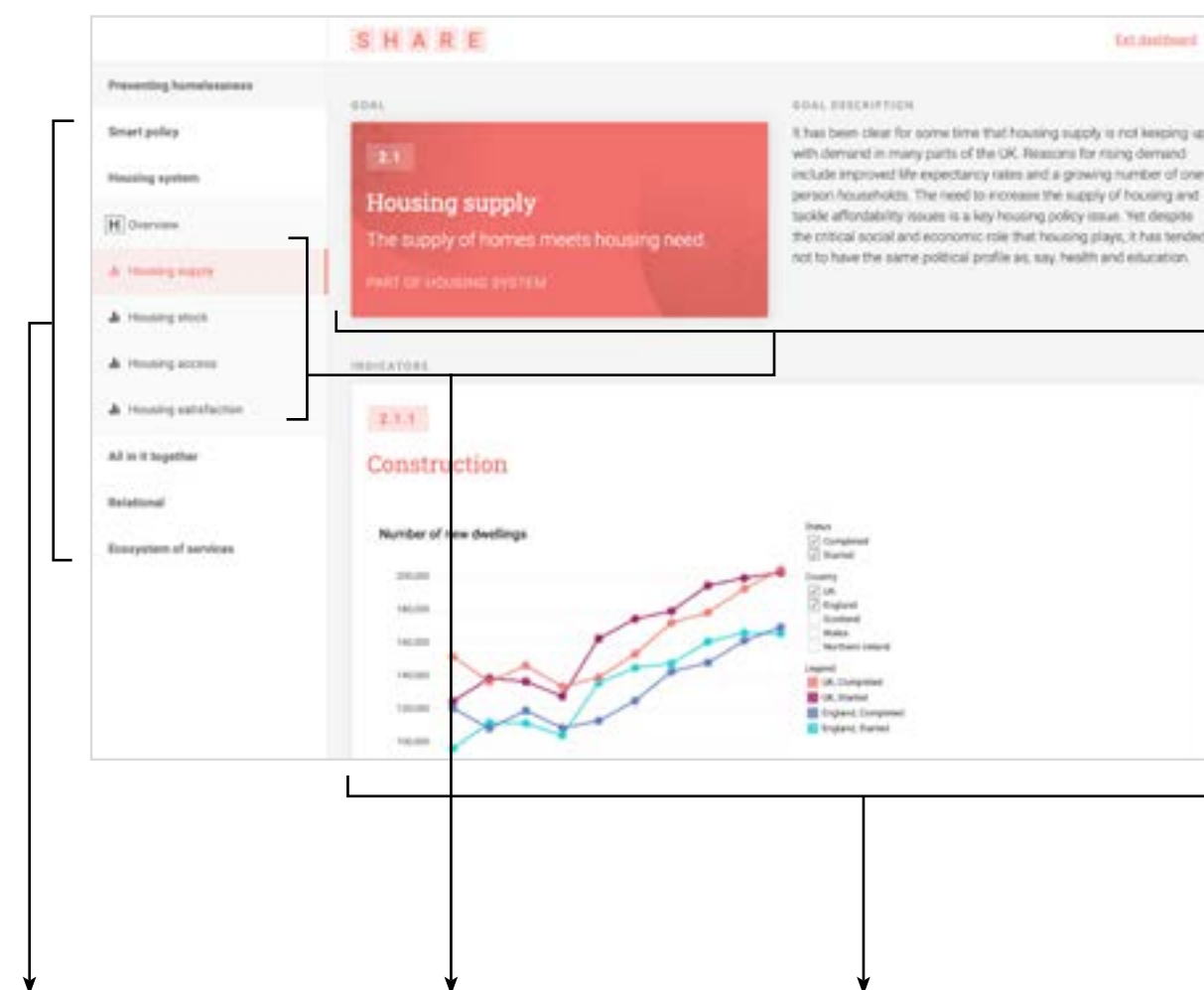
Measures to assess the progress being made against each goal and end vision.

These elements combined contribute to the total fabric of the ultimate vision - ending homelessness for good. Both the end goal and action areas are accompanied by a set of indicators to track progress at both UK and national levels, where possible. The framework will continue to evolve in the coming months as we work to refine it and address the gaps.

However, when considering data sources, it is important to remember that housing and homelessness are devolved policy areas. This means it is often not possible to make direct comparisons between the four nations of the UK due to differences in reporting categories, definitions and timeframes.

We worked with the ONS and data providers in Welsh Government, Scottish Government, Northern Ireland and the Ministry of Housing, Communities and Local Government (MHCLG) in England to make it clear where there are differences between data sources used in the indicators.

Figure 3: Anatomy of the SHARE framework as it appears in the below version of the reporting platform



Action areas:
High-level areas that suggest where efforts could be focused to improve outcomes at population level.

Goals:
Conditions which provide confidence that progress is being made towards reaching ultimate vision.

Indicators:
Measures to assess the progress being made against each goal and end vision.



04

The Indicator Set

Here we outline the first draft of the indicator set, which is the product of extensive consultations across the UK. Data is available for some but not all aspects of the framework. Given data gaps affects our ability to tackle and prevent homelessness, in the next phase of this work we will begin working towards filling the gaps in the data.



We believe that to be useful, an evidence-based framework needs to be co-created.

VISION					
Ending homelessness for good					
To create a society where homelessness, when it cannot be prevented, is only ever rare, brief and non recurrent					
S — H — A — R — E					
Action areas	Smart Policy	Housing System	All in it together	Relational	Ecosystem of services
Goal	Evidence-based practice No data yet	Housing supply 4 indicators	Public No data yet	Decent work 4 indicators	Person-centred No data yet
Goal	Value for money No data yet	Housing stock 3 indicators	Social stigma 1 indicator	Quality relationships 3 indicators	Evidence-based service design No data yet
Goal	Funding allocation No data yet	Housing access 5 indicators	Financial wellbeing 5 indicators	Value-based care 2 indicators	Systems approach No data yet
Goal	Co-creation No data yet	Housing satisfaction 1 indicator	Discharge planning 4 indicators	Victim support 2 indicators	Data integration and quality No data yet

CHI and ONS received nearly 100 online responses and spoke to over 400 stakeholders at events and meetings across the 4 nations. As a result of the feedback, we adapted the SHARE framework. This provided a solid foundation to source data and propose statistical indicators to produce.

This report outlines the first iteration of the indicators, which will be under continuous review, as data is not yet available for all aspects of the framework. In subsequent phases of this work we will begin working towards filling the gaps in the data.



The vision

Ending homelessness for good

The ultimate vision is ending homelessness sustainably. By this we mean that a society with a system in place that ensures homelessness is prevented whenever possible or is otherwise a rare, brief and non-recurring experience. 93% of consultation respondents agreed that we should measure progress against this vision.

Three goals are critical for ensuring this happens:

1. Make homelessness rare

Prevent homelessness from happening in the first place, making it a rare occurrence.

2. Make homelessness brief

When homelessness does occur, people are quickly connected to housing.

3. Make homelessness non-recurring

Where homelessness cannot be prevented, people do not experience multiple episodes of homelessness.

1. Make homelessness rare

Goal: Prevent homelessness from happening in the first place, making it a rare occurrence.

We know that prevention is better than cure. Local authorities have a general legal duty to prevent homelessness. Legislation offers a welcome, but limited, safety net. To achieve step change we must move from a crisis-driven approach to prevention to an even more strategic and targeted approach. By quickly identifying and engaging with people at risk, we can intervene to prevent the loss of housing and divert people from entering the homelessness system.

‘Rare’ can be measured through collecting data on the number of households who present as homeless or at risk. We will use homelessness applications/presentations as our indicator because it is most representative of the homeless population.

Indicator	Measure	Geographical coverage
Rare	Total decisions on homelessness applications	GB
	Total presentations for homelessness	Northern Ireland



2. Make homelessness brief

Goal: When homelessness does occur, people are quickly connected to housing.

If homelessness cannot be prevented, the priority is then to ensure people are given immediate access to crisis services, without barriers to entry, while permanent housing and appropriate support are being secured. Transitional housing should only be provided in limited instances.

‘Brief’ can be measured through collecting data on the duration (days) that an individual is statutory homeless. We will use ‘length of time in temporary accommodation’ as our indicator. Length of time rough sleeping is not collected and length of time homeless for homeless applicants/presentations is currently not produced. We will work with MHCLG and Scottish Government to explore the potential of producing length of time figures with case-level data.

Indicator	Measure	Geographical coverage
Brief	Length of time in temporary accommodation	UK

3. Make homelessness non-recurring

Goal: Where homelessness cannot be prevented, people do not experience multiple episodes of homelessness.

Episodes of homelessness result in individual and social consequences. Current evidence suggests they are detrimental to individual well-being and can also negatively affect communities. Local areas should have resources, plans, and system capacity in place to stop households becoming homeless in the future.

‘Recurrence’ can be measured through collecting data on the number of instances that an individual becomes homeless. In England, a similar measure is the number of households seeking homelessness relief with a history of homelessness. We’re working with other devolved administrations and MHCLG to understand the possibilities with measuring repeat homelessness.

Indicator	Measure	Geographical coverage
Non-recurring	Number of households seeking homelessness relief with a history of homelessness	England
	Number of households re-assessed as homeless within same year	Scotland



Data considerations

CHI and ONS, investigated the available data sources on the homeless population. When considering data sources it is important to remember that there is a complex picture of data collection in the UK, both across countries, and across homelessness types. Much work has been done by the ONS to investigate the feasibility of harmonising homelessness, to allow for greater comparability and aggregation across the UK¹² but some challenges remain. Differences in reporting categories, category definitions and reporting timeframes are key barriers to comparability across all areas of homelessness statistics.

Currently, each country in the UK is responsible for producing homelessness statistics according to their own legislative framework for housing. This means that definitions of homelessness and the data collected vary between nations.

Homelessness affects a wide range of people, covering not just people who are street homeless, but also those in temporary accommodation, sleeping at friends' houses or sofa surfing, living in unfit dwellings or people who are soon to be without a permanent home. These types of homelessness are collected using a variety of data collection mechanisms, for example:

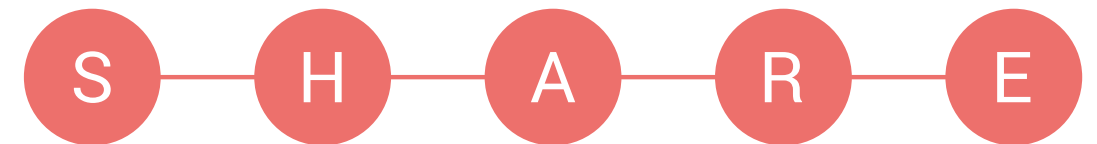
- Homelessness reporting: the number of households seeking help with housing problems from local authorities. Collected by local authorities;
- Temporary accommodation: the number of households placed in temporary accommodation. Collected by local authorities;
- Street homelessness: the number of people counted rough sleeping on a given night. Collected by Point in Time counts by some of the devolved administrations and MHCLG.

¹² See ONS (2019) <https://gss.civilservice.gov.uk/wp-content/uploads/2019/02/GSS-homelessness-report-1.pdf>



Action areas

Current evidence suggests that focusing on the five interconnected action areas below will allow us to collectively make significant and long-lasting progress towards the overall vision. One area in isolation can't achieve the step change required but progress on one leads to improvement in the others.





VISION

Ending homelessness for good

To create a society where homelessness, when it cannot be prevented, is only ever rare, brief and non recurrent

S — H — A — R — E

Smart Policy

Public policies and programmes affect homelessness both directly and indirectly, offering opportunities for maximising impact.¹³ We envisage a future where homelessness policies and programmes are underpinned by rigorous evidence and outline clear strategies and funding allocations.

Four goals are critical for ensuring this happens:

1. Evidence-based practice

Policy-makers are open to evidence and there is an institutional grounding for evidence-based practice.

2. Value for money

Ensure maximum value is delivered for every pound spent on homelessness programmes.

3. Funding allocation

Rigorous evidence informs and improves funding decisions.

4. Co-creation

Co-creation is firmly embedded in daily working practice and in the development of policies and programmes.

Please note that, while reporting against this action area would be critical to showing progress towards ending homelessness, no data is currently collected for this action area. CHI and ONS will explore how to address this gap.

¹³ See Fitzpatrick, S. et al (2011-18) *The homelessness monitor series*. Crisis and JRF; Bramley, G. & Fitzpatrick, S. (2017) *'Homelessness in the UK: Who is most at risk?'*, Housing Studies Jul 2017.



1. Evidence-based practice

Goal : Policy-makers are open to evidence and there is an institutional grounding for evidence-based practice.

Adopting evidence-based practice (EBP) has the potential to significantly improve policy outcomes and contribute to homelessness reduction and enhance societal wellbeing.¹⁴ But we know adopting EBP is not easy. It requires us to be sceptical, to question our knowledge and beliefs, to identify the key questions, and to not be afraid to admit we do not have all the answers. It also requires giving as much importance to evidence, as to professional's knowledge and experience, and the value and preferences of those affected, or at risk of, homelessness – the intersection of this Venn diagram being EBP.

User needs:

Consultation respondents placed 'evidence-based practice' as the most important goal under 'Smart Policy.' They strongly agreed policies should be underpinned by rigorous evidence of 'what works'. Consultation respondents also believed it will be important to improve people's capacity to take a whole system approach and their understanding of the evidence landscape in homelessness. Many were concerned about rigorous evidence on the impact of new policies/ interventions being captured as a matter of course.

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators will include measures of strategies grounded on rigorous evidence and strategies that embed policy evaluation.

Data considerations:

This is an area where no data is currently collected, and this holds for the remaining indicators in this section. Given the overwhelming consensus about the importance of this action area they are a top priority.

Work done so far suggests that government reporting against a transparency framework, such as the framework proposed by the Institute for Government¹⁵, might be an effective and low burden data collection mechanism. A transparency framework for homelessness could set out expectations for how policies and public services should be developed. We also explored data collection of policy-maker capabilities, but a survey in this area would be costly and burdensome.

¹⁴ Teixeira, L. (2017) *Ending homelessness by focusing on what works*. London: Crisis. See also Barber, M. (2017) *Delivering better outcomes for citizens: practical steps for unlocking public value*; and Nichols, N. (2016) *Exploring Effective Responses to Homelessness*. Canadian Homelessness Hub.

¹⁵ IFG (2015) *Evidence Transparency Framework*. London.



Respondents
want to see
policies
underpinned
by authoritative
evidence of
'what works'

2. Value for money

Goal: Ensure maximum value is delivered for every pound spent on homelessness programmes.

Current evidence suggests that to achieve step change in efforts to end homelessness for good it will be vital to ensure government and others deliver maximum value with every pound spent on homelessness programmes.¹⁶ This action area is about ensuring that those responsible for spending money in homelessness do so with an understanding of how to maximise its impact.

User needs:

There was overwhelming support for measuring 'value for money' despite the clear challenges of agreeing an operational definition and indicators.

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators will include measures of service and prevention spend, e.g. median spend per thousand households on housing-led homelessness programmes and the cost of prevention.

¹⁶ Barber, M. (2017) [Delivering better outcomes for citizens: practical steps for unlocking public value](#). HM Treasury.



3. Funding allocation

Goal: Rigorous evidence informs and improves funding decisions.

Linking evidence-based information to funding decisions is crucial in homelessness to ensure the effective and efficient use of limited resources. This is even more important due to the need to reimagine our approach to funding allocations to strive more effectively for long term outcomes.

"The most important drivers of homelessness and therefore should be indicators under smart policy are... funding and delivery of housing-led homelessness services."

User needs:

Funding mechanisms were highlighted as an important indicator by many of our respondents when they considered Smart Policy.

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators will include measures of mechanisms that encourage the use of rigorous evidence in decision-making for funding allocations.

4. Co-creation

Goal: Co-creation is firmly embedded in daily working practice and in the development of policies and programmes.

The need to do more with less requires a profound transformation of the role of both the public and non-profit sectors. The practice of co-creation can provide a powerful response to this challenge by enabling agencies to migrate from a process-centric operating model to a people-centric model.¹⁷ Sector leaders must overcome significant obstacles in order to develop and sustain effective co-creation platforms. Ultimately, however, when leaders are able to embark on a joint quest for the creation of new value, there is no limit to what they can accomplish.

User needs:

Consultation respondents found 'co-ordinated' or 'co-produced' policies/strategies more meaningful than our original proposed goal of 'systems level integration and collaboration.'

"Policies must be integrated and collaborative in order to achieve desired outcomes."

"Co-production would be a helpful additional driver to smart policy."

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators will include measures of different dimensions of co-creation in the development of homelessness strategies and plans.

¹⁷ Deloitte (2019) [Cocreation for Impact](#).



VISION

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Housing System

We envisage a housing system that leaves no one behind. Good quality and secure housing is central to ending homelessness for good, yet many across the country struggle to afford a home that is safe, and meets their needs.¹⁸ To achieve step change, everyone in society needs access to suitable accommodation, which is more than simply a roof over their heads.

Four goals are critical for ensuring that housing remains on top of the political agenda and meets need:

1. Housing supply

The supply of homes meets housing need.

2. Housing stock

Housing is available and of good quality.

3. Housing access

Everyone has access to adequate housing.

4. Housing satisfaction

A high level of satisfaction with accommodation.

¹⁸ Stephens, M. et al (2018) *UK Housing Review* 2018. CIH; Croucher, K. et al (2018) *Housing and Life Experiences: Making a Home on Low Income*. JRF; Smith, M. et al (2013) *Sustain: a longitudinal study of housing outcomes and wellbeing in the private rented sector*. Shelter & Crisis.



1. Housing supply

Goal: The supply of homes meets housing need.

It has been clear for some time that housing supply is not keeping up with demand in many parts of the UK. Reasons for rising demand include improved life expectancy rates and a growing number of one-person households. The need to increase the supply of housing and tackle affordability issues is a key housing policy issue. Yet despite the critical social and economic role that housing plays, it has tended not to have the same political profile as, say, health and education.¹⁹

User needs:

Consultation respondents felt that the broad indicator of ‘housing supply’ was more meaningful than ‘land for development.’ They suggested measuring: planning permissions, construction, and empty homes. Some were particularly interested in the construction of social housing, and concerned about planning favouring construction of homes for owner occupation rather than affordable rented housing.

“It comes down to inadequate supply and a warped housing/planning system that favours market development of homes for owner-occupation.”

“Need to build more housing or renovate empty properties.”

The indicators:

Indicator	Measure	Geographical coverage
Construction	Number of new dwellings completed	UK
Planning	Number of planning applications and permissions submitted	UK
Conversions	Number of conversions	England, Scotland
Vacant dwellings	Number of vacant dwellings	UK

¹⁹ See e.g. [‘Key issues for Parliament: Housing Supply - Where will we live?’](#).

2. Housing stock

Goal: Housing is available and of good quality.

Everyone deserves to live in high-quality, sustainable homes that they can afford and that meets their needs. Evidence suggests this goal is widely supported, but that there is not enough good quality housing for people with experiences, or at risk of, homelessness.

User needs:

Consultation respondents felt that the quality of housing stock was an important indicator. They were interested in the provision of housing by type, e.g.: social housing, affordable rents, refuges, owned homes, private rental homes. ‘Housing quality’ was identified as more meaningful than ‘adequate housing’, and they were interested in measuring: safe, decent, minimum space requirements, damp, and hazards.

“Housing quality should be stated as a key driver”

“Housing should be safe, decent, and meet minimum space/ bedroom requirements”

The indicators:

Indicator	Measure	Geographical coverage
Dwelling stock	Number of dwellings available, by type	UK
Housing quality	% of houses that meet respective national quality standards	UK
Acceptance criteria	% of landlords who would rent to people claiming benefits	England



3. Housing access

Goal: Everyone has access to adequate housing.

Current evidence suggests that access to housing is a fundamental part of solving homelessness. An inability to access affordable and suitable housing causes homelessness as well as sustaining it. Increased access to and investment in affordable housing could ensure homelessness is prevented for many.

User needs:

Consultation respondents highlighted the importance of measuring the housing needs of the population across a range of characteristics: disability, family size, those on benefits. Many agreed affordability is an important indicator, suggesting measuring local housing allowance>income ratios and rent>income ratios. Social waiting lists were identified as an important indicator of demand.

"The right type of affordable property that people can feel safe and secure in the long term would stop the cycle of homelessness."

"We need lifetime tenancies and low rents for vulnerable people who might be out of work for a long period or unable to work due to disability/incapacity."

The indicators:

Indicator	Measure	Geographical coverage
Household projections	Projected number of households	UK
Housing need	Number of additional houses needed	Wales
Rental affordability	Affordability ratio of local housing allowance > rent	Scotland
Social housing waiting lists	Number of people on social housing waiting list	England, Northern Ireland, Scotland
Contract types	% of landlords and letting agents that offer long-term contracts (12 months+)	England

Data considerations:

The number of people on social housing waiting lists is not collected centrally in Wales, as people can be contained on multiple lists leading to duplication. We will work with the Welsh Government and Northern Ireland Housing Executive to understand data collection options relating to long term contracts. In Scotland, due to differing policies, long term contracts are not applicable. Wales currently produce estimates of additional housing need. We will investigate whether a similar measure can be produced in England, Scotland or Northern Ireland.



4. Housing satisfaction

Goal: A high level of satisfaction with accommodation.

Current evidence suggests that residential satisfaction, defined as the feeling of contentment when one has or achieves what one needs or desires in a house, is an important indicator to assess a well functioning housing system.

User needs:

Many consultation respondents felt that ‘housing satisfaction’ was more meaningful than ‘security of tenure.’ It was suggested that instances of eviction are measured, as it is a common reason to ask for homelessness relief.

“Housing satisfaction is not just about affordable accommodation, but support to maintain it too.”

The indicators:

Indicator	Measure	Geographical coverage
Tenancy security	Loss of housing by reason	UK
Feelings of home	No data available	

Data considerations:

We will explore social survey attitudinal question options to understand the proportion of individuals who feel like their house is their home.

“I feel it comes down to inadequate supply and a warped housing/ planning system that favours market development of homes for owner- occupation.”

Consultation respondent



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All in it together

We envisage a society in which the public understand homelessness and its causes, and believe it is a problem that can be solved. Evidence suggests that until ending homelessness is a shared value for the whole of society, progress will be slow. Communicating more effectively and improving the general public's understanding that homelessness is not inevitable could create more public support for the policies and actions required for ending homelessness for good.²⁰

Four goals are vital for ensuring that ending homelessness is a shared value:

1. Public understanding

Public perception of homelessness is accurate.

2. Social stigma

Eliminate the stigma associated with homelessness.

3. Financial wellbeing

Everyone has the resources required to satisfy their needs.

4. Discharge planning

Effective discharge planning prevents homelessness.

²⁰ Teixeira, L. (2017) *'Why We Need to Change the Way We Talk about Homelessness'*, European Journal of Homelessness 11:2.



1. Public understanding

Goal: Public perception of homelessness is accurate.

Public understanding of homelessness means the understanding of the root causes and solutions to homelessness by non-experts. It may also include awareness of current data limitations, the evidence landscape and its implications.

User needs:

Consultation respondents felt that public understanding should cover more than just understanding causes and educating future generations. They proposed measuring language and terminology used around homelessness e.g. homelessness often being seen as simply rough sleeping. It was proposed measuring positive sentiment that homelessness can be ended and solved, and that prevention is the most effective strategy for ending homelessness.

"Add a driver to change the language and terminology used around homelessness. For most of the general public, homelessness = rough sleepers = alcoholics & drug addicts."

"Until more is published about [the causes of homelessness], alongside the solutions, there will not be enough public pressure to change the underlying systems causing homelessness to spiral."

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. We are exploring the possibility of adding questions to an ONS survey²¹ to measure people's understanding of homelessness and its root causes.

2. Social stigma

Goal: Eliminate the stigma associated with homelessness

Current evidence shows that those experiencing homelessness not only experience personal and economic hardship they also frequently face discrimination and exclusion because of their housing status. And those that also experience mental health or substance use disorders are often impacted by multi-layered stigma. Initiatives that seek to reduce stigma can therefore play an important role in improving outcomes.

User needs:

Consultation respondents proposed social stigma as an indicator. It was proposed that positive attitudes towards people who are homeless are measured, meaning less victimisation and stigmatisation. It was also suggested we measure public attitudes to welfare recipients.

"I think that improving the positive regard the public have for homelessness is vital."

"There should be non-discriminatory legal entitlements to access prevention measures"

The indicators:

Indicator	Measure	Geographical coverage
Deservingness	No data available	
Equality	% who think differences in income are too large	GB

²¹ For more information see: <https://www.ons.gov.uk/surveys/informationforhouseholdsandindividuals/householdandindividualsurveys/opinionsandlifestylesurvey>.



3. Financial wellbeing

Goal: Everyone has the resources required to satisfy their needs.

Income and wealth are essential components of the well-being of individuals and societies. Evidence suggests that poverty, particularly childhood poverty, is the most powerful predictor of homelessness in young adulthood. Health and support needs, such as serious drug use, also contribute to homelessness risks, but their explanatory power is less than that of poverty.²²

We also know that policies and programmes designed to assist low-income households increase their income are critical to supporting housing stability. A reduction in work hours, a lost job, an illness or an unexpected expense can spiral into an inability to pay the rent, an eviction or reliance on extended family for a place to stay.

User needs:

Consultation respondents felt that poverty prevention and income security are important indicators given the links between poverty and homelessness.

“Poverty drives homelessness, as the economy declines the helpless and those without hope drop off the end.”

“The most important policies that reduce risk of homelessness go beyond homelessness and include poverty prevention and labour market security”

²² Bramley, G & Fitzpatrick (2017) *Homelessness in the UK: who is most at risk?* Housing Studies.

The indicators:

Indicator	Measure	Geographical coverage
Low income	% of individuals who live in relative low income (before and after housing costs)	UK
Poverty level	% of people experiencing persistent poverty	UK
Financial stress	% of population that report their income is enough to meet the costs of their everyday outgoings	GB
Debt burden	% of people who find their debts to be a heavy burden	GB
Income fragility	% of people able to make ends meet for 3 months or more after loss of income	GB



4. Discharge planning

Goal: Effective discharge planning prevents homelessness

People who have spent time in an institutional setting, such as prison or in-patient health services, may be at risk of homelessness upon discharge from the institution.²³ This might be because they were homeless before entering an institutional setting or because previous accommodation arrangements have broken down or are now unsuitable.

Those leaving institutional settings are likely to have existing challenges to their health and wellbeing and so this population is especially at risk of poor outcomes if discharged into homelessness, unstable housing or accommodation that is no longer suitable for their needs.

Programmes aimed at preventing or reducing risk of homelessness for people leaving institutional settings are important. However, the discharge process is complex and involves setting specific challenges that limit the generalisability of solutions.²⁴

User needs:

Some consultation respondents highlighted that institutional leavers – prison, hospital, care, army, asylum – are more likely to become homeless, so indicators should reflect this.

“Offenders and those discharged from ... Armed Forces are particularly vulnerable. Institutionalisation and disconnect from civil society are key factors.”

The indicators:

Indicator	Measure	Geographical coverage
Prison leavers	% of households seeking homelessness relief who have recently left prison	England, Wales
Care home leavers	Number of households (aged 21+) seeking homelessness relief due to leaving care	England
Hospital leavers	% of households seeking homelessness relief who have recently left hospital	England
Young care leavers at risk	% of care leavers (aged 19-21) that have no fixed abode/homeless	England, Wales

²³ Tsai, J., & Rosenheck, R. A. (2015) *‘Risk Factors for Homelessness Among US Veterans’*, Epidemiologic Reviews, 37(1), 177-195.

²⁴ Miller, S. et al (forthcoming) *Discharge programmes for individuals experiencing, or at risk of experiencing, homelessness: A systematic review*. London: Centre for Homelessness Impact.



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Relational

We envisage a society in which people connect with place and each other. This includes strengthening relationships among family members and neighbours, among people and places, and between individuals within and between organisations. Resilient communities cope better with, and recover from, crises.²⁵ However, communities need to be sufficiently resourced to carry out their vital role.

Four goals are critical for ensuring this happens:

- 1. Decent work
People everywhere have access to decent work.
- 2. Quality relationships
People have the time and resource to nurture quality relationships.
- 3. Value-based care
Access to value-based, quality healthcare services.
- 4. Victim support
Victims feel listened to and are supported.

²⁵ GCPH (2014) *Resilience for public health Supporting transformation in people and communities*. Glasgow; Gartland, D. et al (2019) 'What factors are associated with resilient outcomes in children exposed to social adversity? A systematic review' BMJ Jan 2019.



1. Decent work

Goal: People everywhere have access to decent work.

Productive employment and decent work are key elements to achieving poverty reduction and ending homelessness for good. Decent work sums up the aspirations of people, including those experiencing or at risk of homelessness, in their working lives. It involves opportunities for work that is productive and delivers a fair income, security in the workplace and social protection for families, better prospects for personal development and social integration, freedom for people to express their concerns, organise and participate in the decisions that affect their lives and equality of opportunity and treatment.²⁶

User needs:

Consultation respondents highlighted decent work as an important indicator. Suggested measures included: skill gaps, secure contract, and employment status.

The indicators:

Indicator	Measure	Geographical coverage
Meets needs	% of employed population looking for replacement job, by reason	UK
Contract type	% of working population on zero-hours contracts	UK
Employment rate	% of working age population employed	UK
Underemployment	% of working population that are underemployed and want more hours	UK

²⁶ See ILO's ['Decent Work Agenda'](#).

2. Quality relationships

Goal: People have the time and resource to nurture quality relationships.

People who are more socially connected to family, friends, or their community are happier, physically healthier and live longer, with fewer mental health problems than people who are less well connected. Social relationships—both quantity and quality—affect mental health, health behaviour, physical health, and mortality risk.²⁷ It is also the case that relationship breakdown is a leading cause of homelessness.

User needs:

Consultation respondents highlighted quality relationships are extremely important to ending homelessness sustainably, and suggested measuring social capital, loneliness, relationship conflict, and support networks.

"[Relationship breakdown] is often the main reason for homelessness among males who form the largest single group who are likely to be homeless and non- priority need."

The indicators:

Indicator	Measure	Geographical coverage
Someone to rely on	% of population who report not having someone to rely on in case of serious problem, by relationship	UK
Loneliness	% of population who report feeling lonely	UK
Relationship conflict	% of population (aged 10-15) who report arguing with parents every week	UK

²⁷ The most striking evidence comes from prospective studies of mortality across industrialised nations. These studies consistently show that individuals with the lowest level of involvement in social relationships are more likely to die than those with greater involvement. See e.g. Umberson, D. et al (2010) ['Social Relationships and Health: A Flashpoint for Health Policy'](#), Journal of Health Soc Behav.



3. Value-based care

Goal: Access to value-based, quality healthcare services

It’s vital that those experiencing homelessness not only get help with accommodation but are also able to access the health and care they need.²⁸ Ensuring that available resources are used for interventions that provide outcomes that patient’s most value, may help to ensure that resources are used optimally.²⁹

Homeless people can access mainstream health care provision, but many feel uncomfortable, for a variety of reasons, including that homeless people feel like they negatively ‘stand out’ and often feel they are not treated as equally as the general population in certain health care settings.³⁰

User needs:

Consultation respondents suggested healthcare provision for substance misuse and mental health as an important indicator. Service provision should include support for individuals who have experienced trauma or adverse childhood experiences. Some highlighted that for people who experience homelessness for long periods, issues of trauma (either childhood or adult) and the coping mechanisms people employ to deal with it are key to addressing homelessness.

The indicators:

Indicator	Measure	Geographical coverage
Mental health services	% who reported NHS mental health services met their needs	England
Substance misuse services	% who successfully completed their treatment, free from dependence	England

²⁸ Leng, G. (2017) *The Impact of Homelessness on Health: A Guide for Local Authorities*. LGA: London.

²⁹ Gentry, S. et al (2017) *Defining Health in the Era of Value-based Care: Lessons from England of Relevance to Other Health Systems*, Cureus Mar 2017.

³⁰ If not given appropriate access to healthcare services they are one of the most costly populations that the NHS provides provision for (eight times that of the housed population), with ‘homelessness’ being an independent risk factor for experiencing emergency department and inpatient admissions high usage status. *Faculty for Homeless and Inclusion of Health* (2013), Standards for Commissioners and Service Providers. Pathway: London.



4. Victim support

Goal: Victims of crime feel listened to and are supported.

Many people experiencing or at risk of homelessness do not have everyday experience of the justice system. When they do, it is often because they have been a victim of crime. When this happens, their experience with the justice system can, unfortunately, be stressful and confusing.³¹

Many people have to leave their home because of violence, abuse or threatening behaviour. People who are street homeless are more likely to be victims of crime, including violent assault, abuse and intimidation, compared to the general public.

User needs:

Consultation respondents believe that lack of victim support is an issue that should be measured. They highlighted that people often live in properties that aren't safe or secure, and that additional support to legally challenge evictions is required. It was also emphasised that homeless people who are victims of crime might need support, e.g. reporting abuse by a carer, service provider, or family member.

"Tenants' rights need to be increased and protected, and access to legal advice available."

"Many people live in properties that aren't legally safe or they're illegally evicted and they lack support to legally challenge"

The indicators:

Indicator	Measure	Geographical coverage
Legal advice	% of victims of crime who sought and received legal advice	England, Wales
Post crime support	% of victims who wanted and received support	England, Wales

³¹ HM Government (2018) Victims Strategy. London.



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Ecosystem of services

We envisage building a person-centred ecosystem to improve the UK's homelessness 'response system'. This action area highlights the need for cross-sector collaboration and systems integration³² to optimise the contributions of multiple sectors by linking housing with health, justice, education and social care systems, but also with sectors like transport, business and faith.

Four goals are critical for growing this ecosystem of services:

1. Systems approach

Flexible networks are leveraged to deliver coordinated responses focussed on prevention.

2. Evidence-based service design

The design of new interventions is informed by rigorous evidence of 'what works'.

3. Data integration and quality

Relevant data is collected and shared responsibly.

4. Person-centred

Person-centred care within and across services.

Please note that, while we believe reporting against this action area would be critical to showing progress to ending homelessness, no data is currently collected for this action area.

³² Wilson, S. et al. [Local public service reform](#). Institute for Government. For more information see Robert Wood Johnson Foundation (2015).



1. Systems approach

Goal: Flexible networks are leveraged to deliver coordinated responses focussed on prevention.

To achieve broad and sustainable reductions in housing insecurity, homelessness prevention must be fully integrated into existing service networks.³³ Prevention-oriented policies that ensure timely responses to housing insecurity extend the housing led solutions and leverage the considerable capacity of mainstream services.

A systems approach can also usefully help organise and deliver services, housing, and programmes, within and across communities, cities and wider geographical areas to improve responses and maximise resources.

User needs:

Consultation respondents highlighted the importance of prevention and greater service responsiveness and integration. Suggestions including measuring the existence of multi-agency forums within and across LAs, shared strategies across services and cities, and better funding and commissioning mechanisms.

The majority placed this as their most important indicator under Ecosystem of Services. Strategic collaboration between LAs was said to be lacking, and that requirements to collaborate and share data should be written into service commissioning contracts.

"Multi-level governance and policy coherence indicators could be part of the indicators"

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators might include measures for whole system integration from the perspective of people with lived experiences or at risk.

³³ Fowler, P. et al (2019) 'Solving Homelessness from a Complex Systems Perspective: Insights for Prevention Responses', Annual Review of Public Health 2019. 40:465–86.

2. Evidence-based service design

Goal: The design of new interventions is informed by rigorous evidence of 'what works'.

Evidence suggests there is an opportunity to improve outcomes for homeless people by focusing on what works and pushing for interventions to be evaluated.³⁴

User needs:

Consultation respondents comments emphasised the importance of implementing evidence-based interventions wherever possible.

"Understand and accept complexity, understand and ... link to authoritative evidence of what works."

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators will include measures of programmes that include evidence-based interventions and programmes including evaluation plans.

³⁴ Teixeira, L. (2017) [Ending homelessness by focusing on what works](#). London: Crisis.



3. Data integration and quality

Goal: Relevant data is collected and shared responsibly.

Making better use of data offers huge benefits, in helping us provide the best possible services to the people we serve.³⁵ Currently poor data quality greatly affects our ability to respond quickly to prevent or stop homelessness. Improving data quality and data integration will help us maximise the value of data whilst also setting the highest standards for transparency and accountability when building or buying new data technology.

User needs:

Respondents' comments supported this indicator and emphasised that improving data quality and data integration will help to enhance services and increase efficiency.

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work to date suggests indicators might include measures of programmes that include data sharing standards and commitments.

4. Person-centred

Goal: Person-centred care within and across services.

People experiencing homelessness or at risk play a key role in the design of services that seek to address their needs. In person-centred care, professionals work collaboratively with people who use services.³⁶ Person-centred care supports people to develop the knowledge, skills and confidence they need to more effectively manage and make informed decisions about their own housing, health and health care. It is coordinated and tailored to the needs of the individual. And, crucially, it ensures that people are always treated with dignity, compassion and respect.

User needs:

Consultation respondents agreed person-centred approaches are important. Respondents suggested measuring it through: whether users were included in the process and if there was a clear referral pathway/user journey. The people affected or at risk are experts in their own right and can develop their own goals and solutions. It was mentioned that services should be trauma-informed, understanding a person's needs for this and how it can be delivered.

"It's important to listen to people who experience homelessness and the communities who live around it to find the solution together."

"We must work in a way that has the freedom to generate truly bespoke solutions to individual complexity."

The indicators:

These indicators are under development, and we're exploring potential data sources for inclusion in the next version of the framework. Work so far suggests indicators might include measures of programmes that include problem scoping, programmes that include user needs/ experience research, and those that include prototype development and testing.

³⁵ UK Government (2018) Data Ethics Framework. London.

³⁶ The Health Foundation (2016) Patient Centred Care Made Easy. London.



05

How we got here

The SHARE framework draws on current evidence on homelessness, outcomes frameworks from relevant fields, wider literature on effective public service reform, and structured discussion with experts and other stakeholder engagement.



Our starting point: the conceptual framework

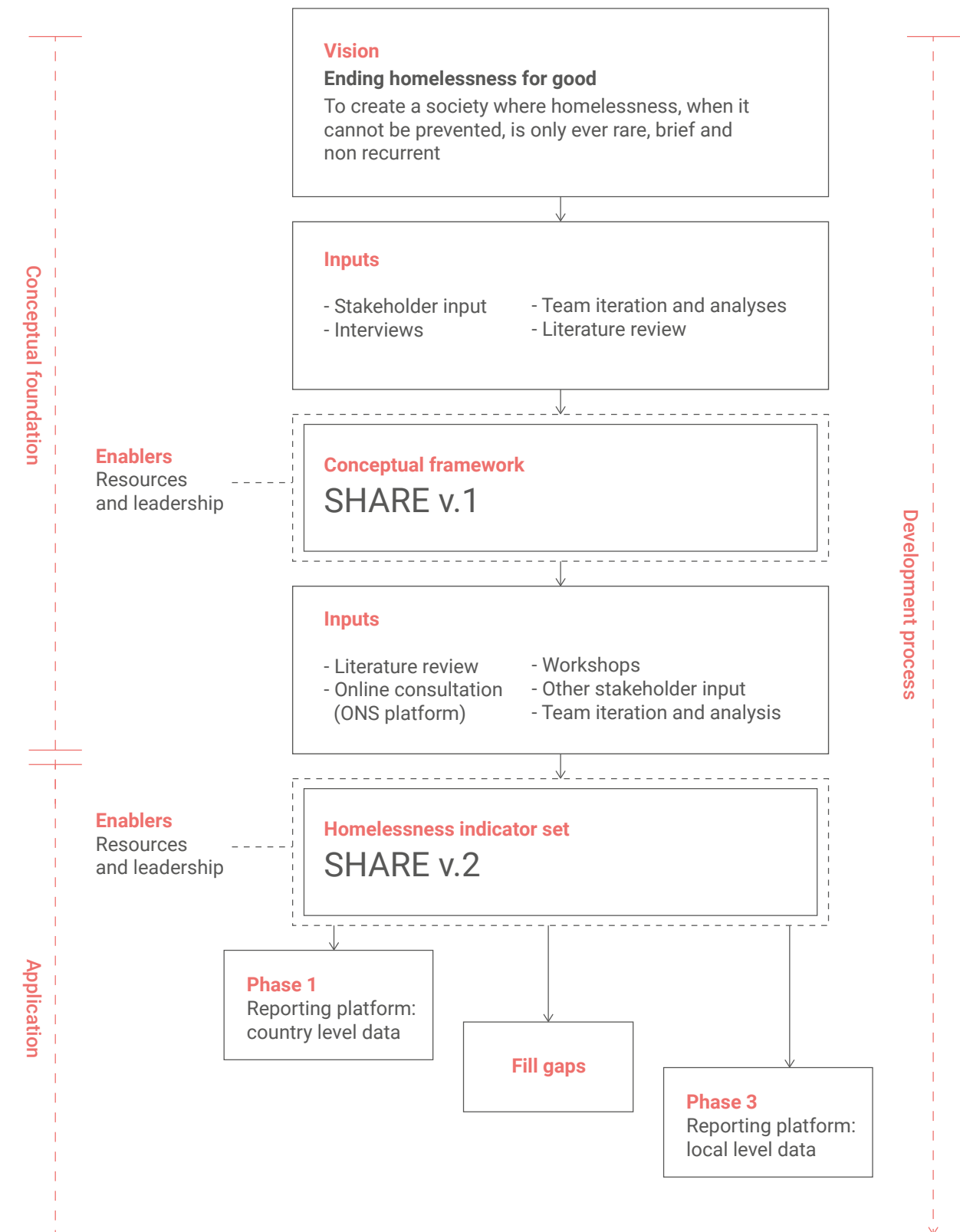
Ending homelessness for good was our starting point. A number of analytical steps were used to move from this vision to the ‘brief, rare and non recurrent’ definition and the rest of the SHARE framework.

To begin we carried out a rapid review of the literature, which included a review of websites, peer-reviewed and grey literature, and other materials on the causes, consequences and solutions to homelessness as well as of frameworks developed at either home or abroad in homelessness or relevant fields, such as health and early years.

The results of this rapid literature review and additional insight from interviews and engagement with stakeholders helped identify a number of basic building blocks which together formed the genesis of the five strategies in the SHARE framework.

Ideation within and outside the team was then used to identify draft indicators for each SHARE action area. It also ensured that the choice of groupings were conceptually aligned. The assumptions about the strategies were also checked with a wide set of collaborators and stakeholders at events and individual meetings – to make sure the conceptual groupings put forward are useful and understood.

Figure 4: Process for Share framework development





A Culture of Health

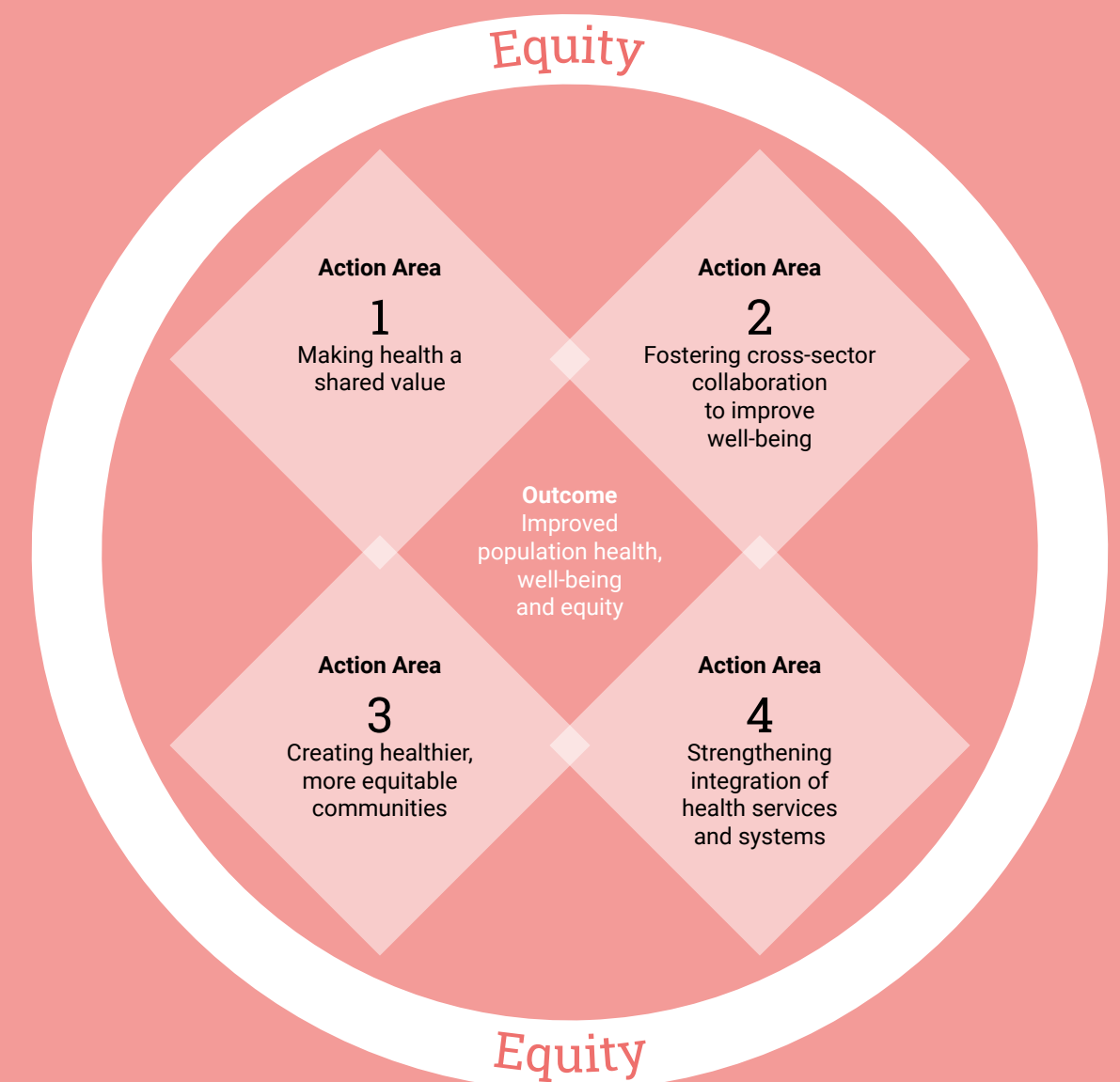
The SHARE framework was inspired in part by a Culture of Health's Action Framework. The Action Framework was developed by The Robert Wood Johnson Foundation in the United States as a response to the perceived need for an outcomes framework that took a systems view of public health, to highlight that being healthy should not simply be defined as not needing to seek health care.

As can be seen in the model, the Culture of Health demonstrates that the end goal will not be achieved by focusing on each action area alone, but by recognising the interdependence of each area.

It is intended to mobilise an integrated course of action by many individuals, communities, and organisations. The Action Framework is also explicitly intended to make smarter use of existing resources, encourage partnerships across sectors, and reduce national health care costs over time.

The Action Framework underpins the Foundation's grant making and strategic collaborations, but is also being used by others to create a Culture of Health in local areas. When it comes to implementation, their plan builds on WHO's model of 'sentinel surveillance' to explore development of what they call 'Culture of Health' through deliberate selection of sites ('sentinel communities') – that are not demonstration or place-based communities, but rather sites for naturalistically testing local Culture of Health measurement and overall progress.

Figure 5:
Culture of Health Action Framework





Drawing on indicator best practice

This new version of the report outlines the first iteration of the indicators, which will be under continuous review, as data is not yet available for all aspects of the framework. In subsequent phases of this work we will begin working towards filling the gaps in the data.

Drawing on the OECD model, ONS developed an indicator assessment framework. The data selection process can be quite subjective, as there may be no definitive indicator. This subjectivity can be mitigated with an ‘Indicator Assessment Framework’. Our framework sets out a methodological underpinning of indicator selection. It is also helpful with shortlisting when numerous indicators are available, and justifying indicator selection.

Indicator Assessment Framework:

Assessment category	Assessment criteria
Policy related	Policy-related targets established
Statistical quality	Standardised methods and definitions Consider data source characteristics and limitations.
Disaggregation and comparability	Comparable across geographical areas Comparable across devolved nations Disaggregation by protected characteristics Distribution of outcomes Comparable internationally Measures change over time
Relevance to SHARE framework	Measures goals Available for the UK

Delivering a consultation

We engaged the public through a variety of means on the potential of our indicators to serve the public good (UKSA Code of Practice, Principle V1.4, 2018). To achieve maximum engagement and collaboration with our partners we:

- Ran an online consultation on ONS’ Consultation Hub on the indicator framework;
- Held sessions at our Impact Forums in each of the four nations to encourage public engagement;
- Worked with policy officials at MHCLG, Welsh Government, Scottish Government and the Department for Communities in Northern Ireland;
- Engaged with statistical analysts at MHCLG, Welsh Government, Scottish Government and the Department for Communities in Northern Ireland.

Across our consultation our key questions were:

1. What are the key drivers of homelessness that we should measure?
2. What’s the most helpful way for us to communicate our indicators?

We received nearly 100 online responses and spoke to over 400 stakeholders at events and meetings across the four nations. As a result of the feedback, we adapted the SHARE framework. This provided us with a solid foundation to source data and propose statistical indicators to produce.



Reviewing the literature

Working with ONS, we compared the drivers of homelessness supported by our consultation respondents against the current evidence base.

We wanted to affirm that these were proven drivers, as well as helpful indicators for our users. We know that misinformation abounds the homelessness field, as the Frameworks study for Crisis identified,³⁸ so we wanted to be sure that these indicators were well-evidenced.

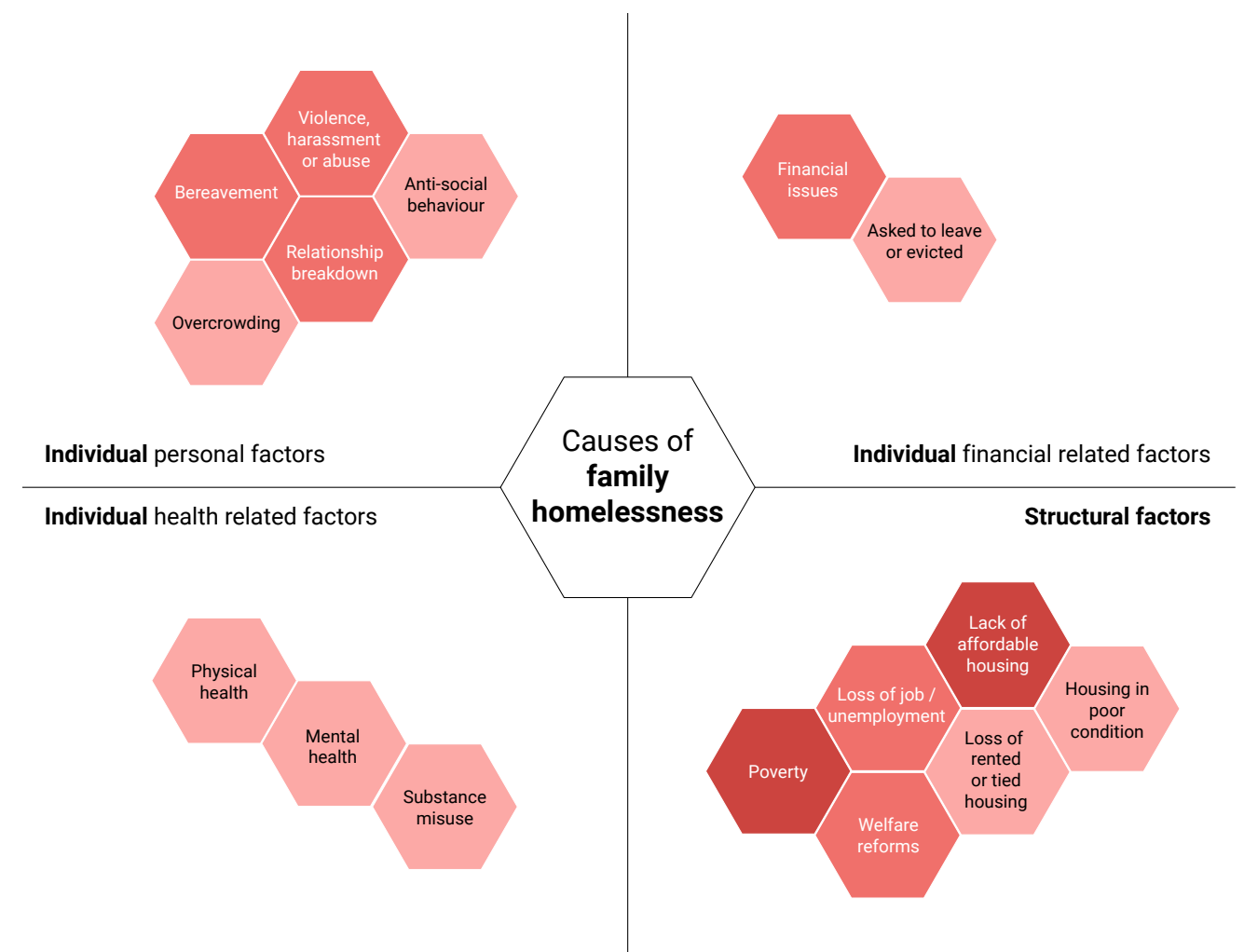
We built on the literature review that informed SHARE Version 0.1, and worked with ONS to expand the literature search to include statistical causal models. As recommended by OECD, we prioritised studies that included logistic regression models that identify causes, and survey/admin data that asked for reasons for homelessness. This was followed by regression models and data in areas relating to homelessness e.g. youth homelessness and poverty. Our secondary sources were quantitative studies relating to homelessness.

The MHCLG Alma Economics review of homelessness causal models was particularly helpful in informing this research stage.³⁹ Overleaf are the most widely evidenced causes of homelessness. All of these causes were suggested by our consultation users too. Based on this evidence, we decided to add these factors to our indicator framework.

Key



Family homelessness



³⁸ See Frameworks Institute, [Reframing Homelessness](#) in the UK. London: Crisis.

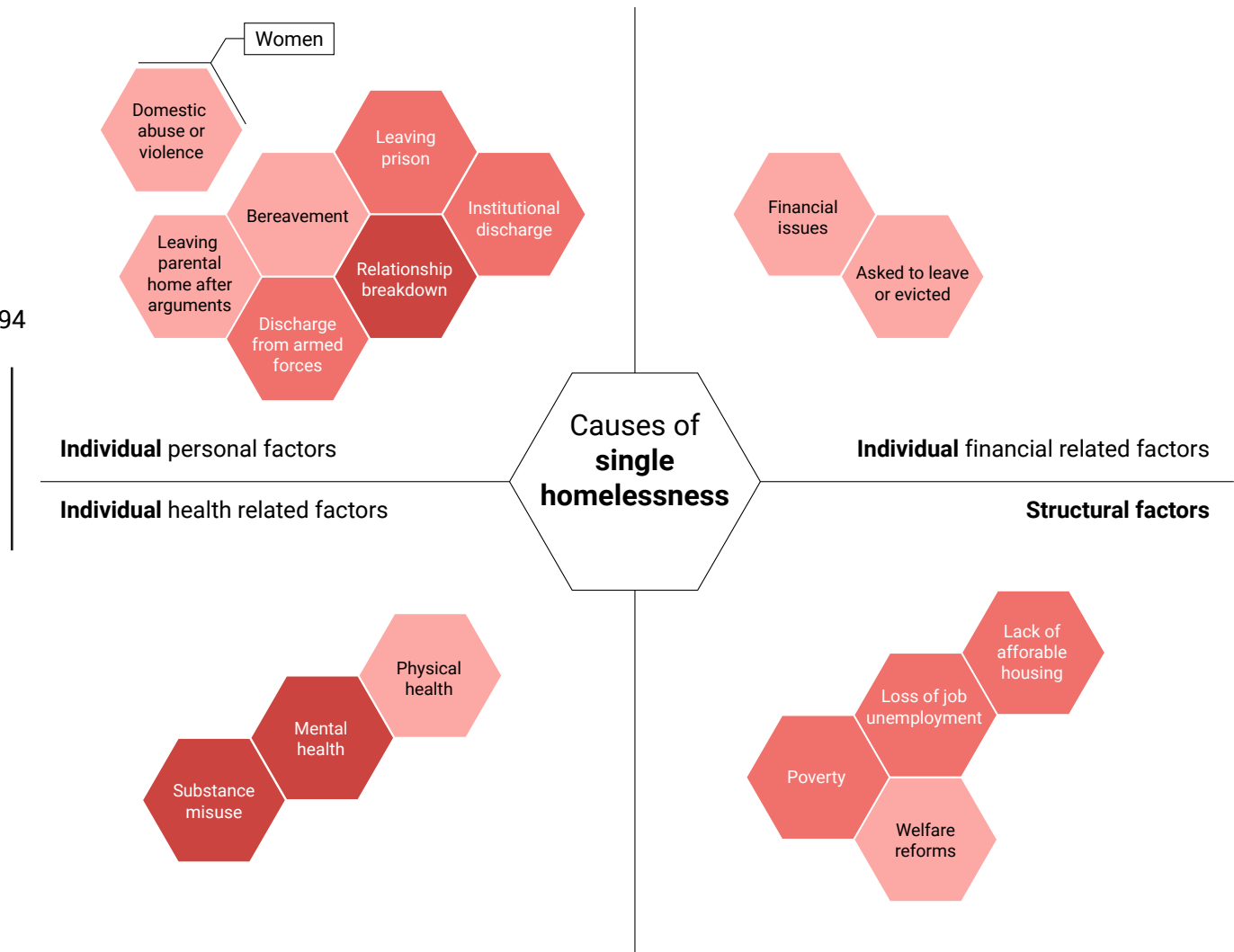
³⁹ The MHCLG Alma Economics review of homelessness causal models was particularly helpful in informing this research stage. See [Homelessness: Rapid Evidence Assessment](#). MHCLG 2019.



Key

- Strong evidence
- Medium evidence
- Weak evidence

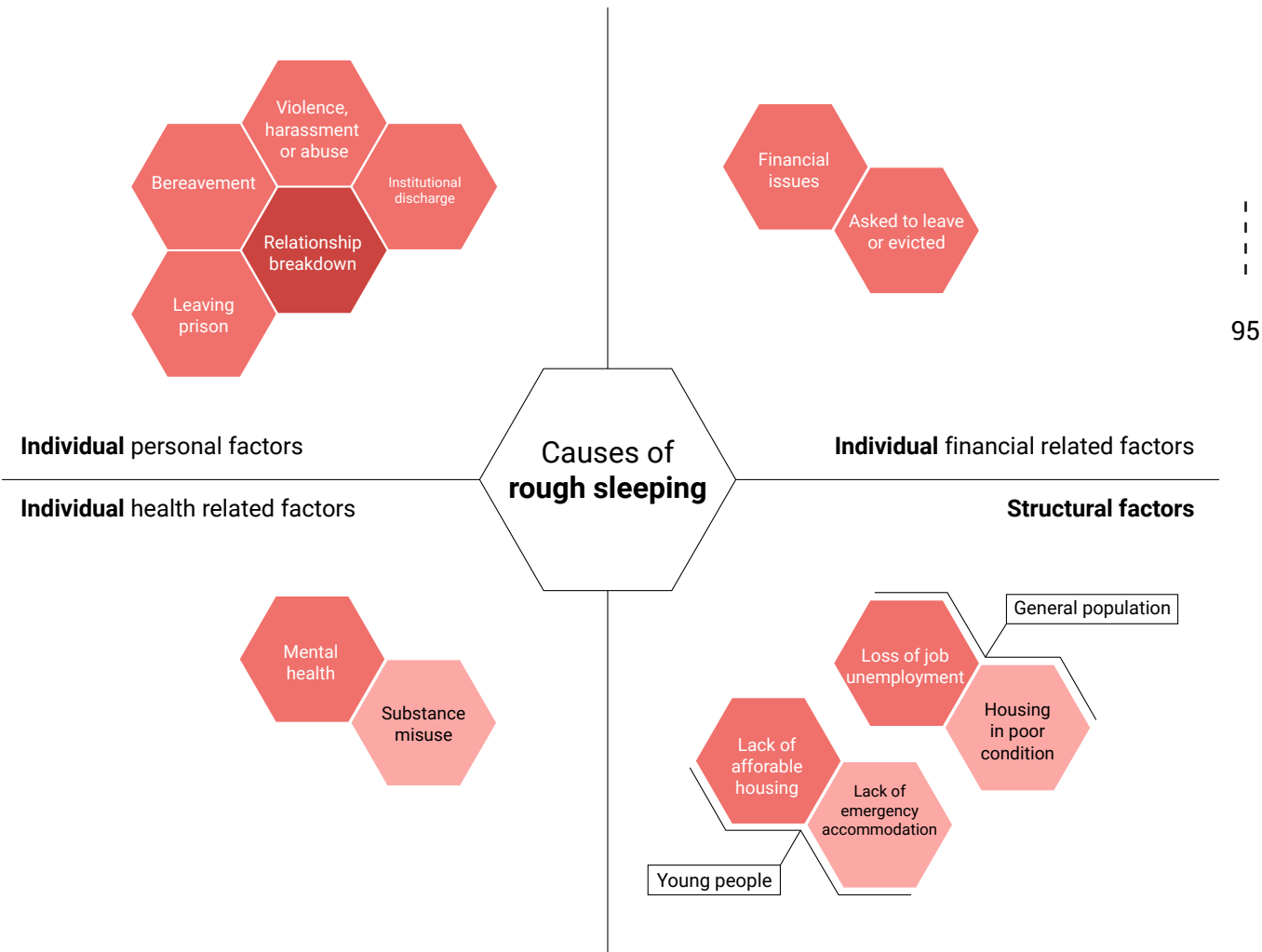
Single Homelessness:



Key

- Strong evidence
- Medium evidence
- Weak evidence

Rough Sleeping:





Researching existing data sources

Once we reviewed the consultation findings, and matched it with the academic evidence base, we worked with the ONS to research data sources that could be used in order to measure the indicators. Many consultation respondents were helpful in suggesting data sources, which gave us a good starting point. We chose to use the UK Data Service as our primary search mechanism for data sources, coupled with ONS' internal knowledge of available data sources.

We searched the key words relating to the indicators and assessed the quality of the data sources against the 'indicator assessment criteria' that we set out at the start of the research project. We also assessed the characteristics of the data, limitations, causes and extent to which they can be overcome. We consulted with data source owners and experts to affirm that they were the most appropriate sources to utilise.

Where there were data gaps, we worked with ONS to consider whether to produce new statistics, outlining the constraints, options, and reasons for pursuing (UKSA Code of Practice, Principle V1.5, 2018). We drew on ONS' expertise to identify opportunities for data sharing, data linkage, proxy measures, and the reuse of data (UKSA Code of Practice, Principle V5.1/3, 2018).





06

What Happens Next

The Centre for Homelessness Impact and ONS, in collaboration with MHCLG, Scottish Government, Welsh Government and NIH are releasing an indicator reporting platform in Winter 2020, to coincide with the publication of the report.



In order to publish the platform, we did the following:

1. Produce indicator data tables

Through our intensive data research, we identified and produced approximately 40 data tables. Some of these tables were already published and needed re-formatting for the platform, whilst others were brand new pieces of analysis. These data tables produced the statistical measures needed for the indicator reporting platform.

We worked closely with senior statisticians at the ONS to produce these measures. We collaborated with data providers to provide a comprehensive and coherent narrative for each indicator (UKSA Code of Practice, Principle V3.5, 2018). We will be working together to set out a process for updating our platform regularly, so that the measures are timely for our users.

2. Release reporting platform

We have developed a cutting edge reporting platform, based on user feedback from the consultation and best practice in the indicators field.

We know that the users want to use the platform to:

1. Track and measure progress against homelessness-related goals;
2. Develop homelessness strategies or plans;
3. Find areas to implement interventions;
4. Improve data quality.



Following an Agile process, we built an initial simple BETA version of the online platform that offers access to the five strategies, the 20 goals and data from the 34 indicators included in the SHARE platform. Where available, users can filter the data e.g. by geographical areas to customise their view and to interrogate the data based on their current need.

In addition, users expressed the desire for certain features and functionality, some of which will be available in the initial BETA version of the platform whereas others will be considered for subsequent versions after further prototyping and user testing.

Examples of these are:

- Clear definitions relating to the indicators;
- Quality markers against each indicator;
- To compare performance with geographical areas 'like me.';
- Charts, commentary and the option to download the data;
- Links to best practice in 'What Works' for under-performing areas.

Data and metadata will be provided at the greatest level of detail that is practicable to meet user needs, consistent with data standards. In line with the UKSA Code of Practice (Principle V2.3 and V2.4) we are releasing data using accessible communication formats, working with the most commonly used assistive technologies.

In our data research, we discovered several data gaps. Half of these gaps related to data that simply doesn't exist to measure our indicators. We will work with administrative data owners and data collection experts to find opportunities to fill these data gaps. We will ensure we reduce or maintain respondent and data collection burden through making use of existing surveys or administrative data.

The other half of these gaps relate to country level or local authority level breakdowns of our indicators. Consultation respondents told us that local authority breakdowns are most important to them, so we're prioritising seeking this data. As the project progresses, we will investigate other dimensions that our users requested. We will seek indicator time series data, and demographic breakdowns, particularly: age, disability, sex and ethnicity.

3. Create data visualisations

We wanted to ensure that the indicator reporting platform was accessible and relevant to all users. Measures are accompanied with a clear description of the main statistical messages. They will be illustrated by suitable data visualisations, including charts, maps and tables, where this helps aid appropriate interpretation of the measures (UKSA Code of Practice, Principle V3.1-2, 2018). We worked with data visualisation experts to visualise the indicators.

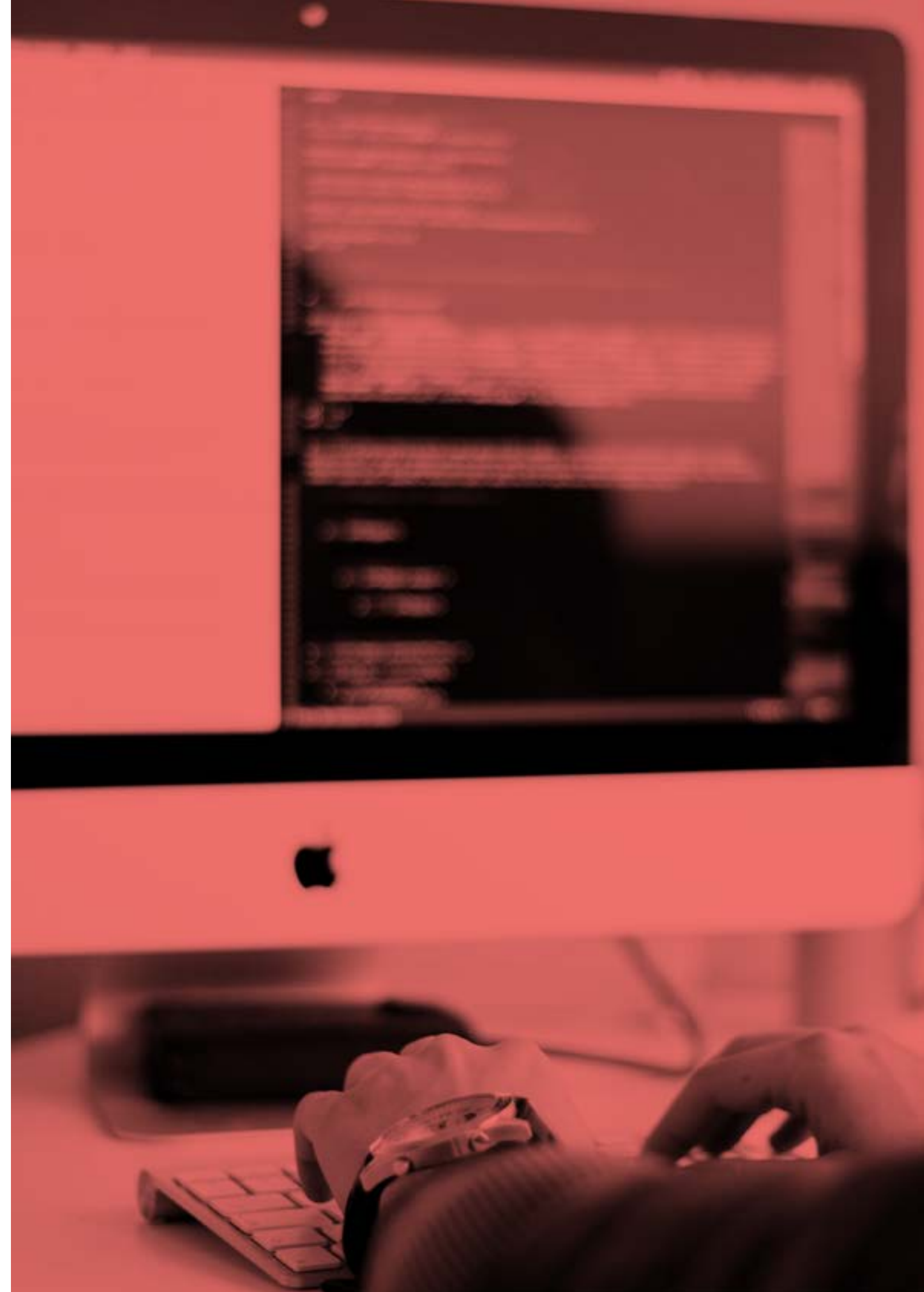
Our users told us that they'd like to assess their performance against a known benchmark, so they can better understand their strengths and areas for improvement. They said they would prefer (red, amber, green) status reports. We will prototype and user test ways to present these performance markers for specific geographical areas.



4. Release systems map

Homelessness is a complex and adaptive system problem. It can't be solved with linear thinking, technical expertise, or 'silver bullet' type solutions. Complex systems like homelessness contain many interrelated and converging dynamics – some of which have predictable components, yet which can interact in often unpredictable or counter-intuitive ways

In V3 of the framework we might integrate the SHARE framework into a wider 'bird's eye' systems view of homelessness. This will take the form of a 'causal loop diagram,' a visual aid to show how different variables in the system are interrelated. We collaborated with The Darlington Service Design Lab on this initiative and the process so far has included a series of workshops around the UK involving homelessness and systems experts. The first iteration of the homelessness system map will be published later this year.



The background of the slide is split into two main sections. The left section is a solid red color, featuring a large, semi-transparent white circle in the upper right and a smaller, semi-transparent white circle in the lower left. A thin black line starts from the bottom left and curves upwards towards the top right. The right section is white, featuring a large, semi-transparent red circle in the upper left and a smaller, semi-transparent red circle in the lower right. A thin red line starts from the bottom left and curves upwards towards the top right.

07

Concluding thoughts

Across the UK we are increasingly being explicit about our commitment to preventing and tackling homelessness more effectively. In order to achieve this, greater attention will need to be paid to prevention.



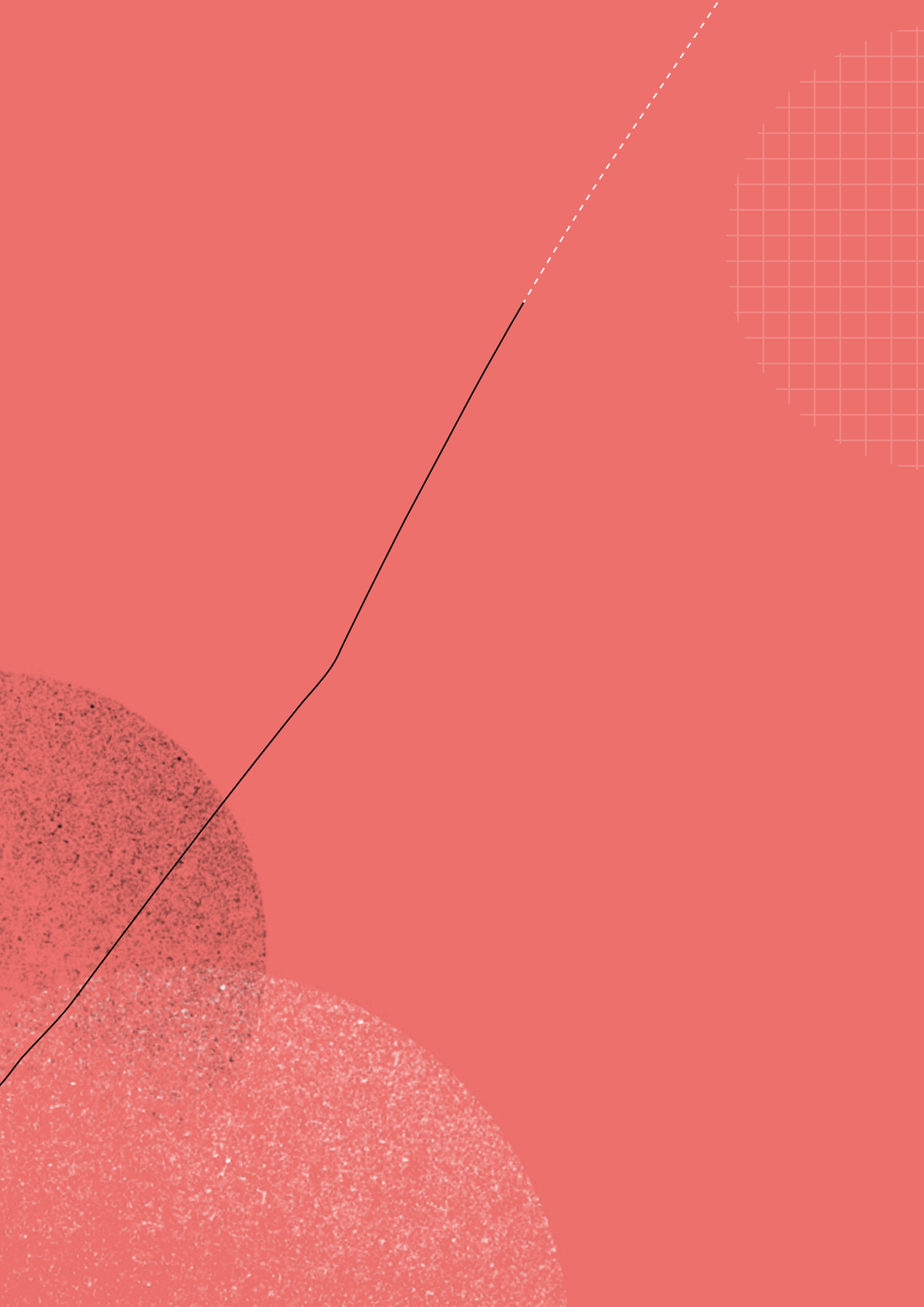
“The value in statistics lies in their usefulness... it is only when they are used in ways that promote the public good – by Parliament, government, public services, business, or the citizen – that we can truly say that their production at public expense is fully justified.”

Sir Michael Scholar
(former Chair of UK Statistics Authority) 2010

The SHARE framework can usefully underpin these important efforts. It will also be vital to simultaneously build evidence about what is effective to reshape the complex system of determinants of homelessness.

We hope the SHARE framework will inspire positive policy and public service discussions. In time the indicator reporting platform will give people the information they need to decide how success can best be looked at in their area, and where interventions should be implemented. In tandem, CHI's evidence tools can help them understand what homelessness-related interventions have the best chance of success.

If we focus on positive outcomes for our citizens, and create evidence-based policies and services, we have the best chance of ending homelessness for good. The Centre for Homelessness Impact intends to be at the forefront of this movement.



Annex

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Annex 1: SHARE action areas and goals

Smart Policy				S
Evidence-based practice	Value for money	Funding allocation	Co-creation	
Housing system				H
Housing supply	Housing stock	Housing access	Housing satisfaction	
All in it together				A
Public understanding	Social stigma	Financial wellbeing	Discharge planning	
Relational				R
Decent work	Quality relationships	Value-based care	Victim support	
Ecosystem of services				E
Person-centred	Evidence-based service design	Systems approach	Data integration and quality	

Annex 2: Building blocks of the framework, identified through the scan of the literature

- An end to homelessness is valued by the whole of society
- Suitable housing that meets people’s needs is available to all
- Responsive relationships for children and adults are supported
- Sources of stress in the lives of children and families are reduced
- Core life skills are strengthened
- Public and private decision-making is driven by keeping the population healthy and housed
- No one dies on the streets
- No one is criminalised for being homeless
- Support and care is effective
- Hostels do no harm
- No one is denied support when it’s most needed
- The economy is less burdened by unwarranted spending linked to homelessness
- Government, organisations, business, and individuals collaborate to build thriving communities
- Essential evidence to guide public and private decision-making is available and implemented
- Government and other agencies overcome obstacles to the effective use of data
- Different types of services are comparatively evaluated to help rethink the service mix



**Centre for
Homelessness Impact**

Better evidence for a world without homelessness

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