



Frontline agencies in partnership

Mental health and personality disorders in the Survey of Needs and Provision

Survey of Needs and Provision

The Survey of Needs and Provision (SNAP), conducted by Homeless Link and Resource Information Service (RIS), and funded by the CLG and CRASH¹, brings together and makes publicly available data on single homeless people and couples in England.

The research focused on day centres and accommodation based services for single homeless people and couples, including both direct access/emergency hostels² and second stage supported accommodation³. The research consisted of three main elements:

- Analysis of data about hostels and supported accommodation from the Supporting People (SP) provider database⁴ and basic analysis of SP client records.
- Analysis of data about day centres, direct access hostels and second stage supported accommodation from Homeless UK.
- A telephone survey of a sample of 151 day centre, hostels and second stage supported accommodation providers on Homeless UK, to gather more detailed information about clients served and their needs, services provided, standards of buildings and sources of funding.

This briefing summarises the telephone survey findings in SNAP relating mental health.

Summary of findings

Homelessness services report that mental health problems and personality disorders are prevalent among their clients. Three types of mental health related support services were covered in the survey: talking therapies (e.g. counselling, cognitive behaviour therapy), anger management courses and mediation/relationship counselling. Although many services have access to

¹ CRASH is the property and construction industry charity for the homeless. www.crash.org.uk

² Direct access hostels are short stay emergency services aimed at rough sleepers or those in need of immediate accommodation that usually have 24 hour staffing, frequent vacancies, no or limited waiting lists and can often accept self referrals.

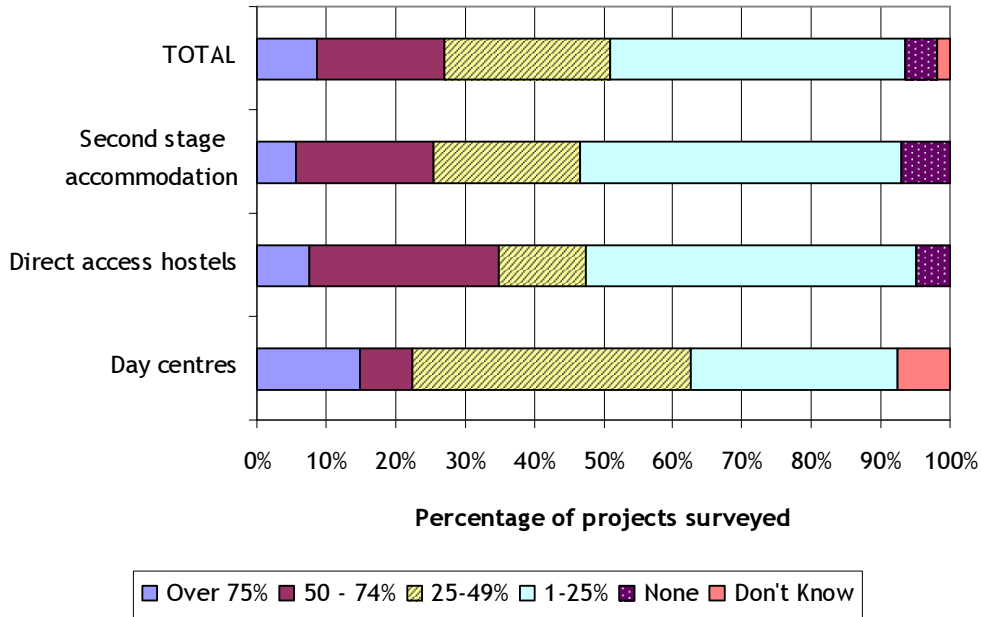
³ Second stage supported accommodation projects provide longer-term accommodation for homeless people, often to those moving on from "first stage" direct access hostels. These projects usually have waiting lists, less frequent vacancies than direct access hostels, and are less likely to accept self referrals.

⁴ Supporting People data covers England.

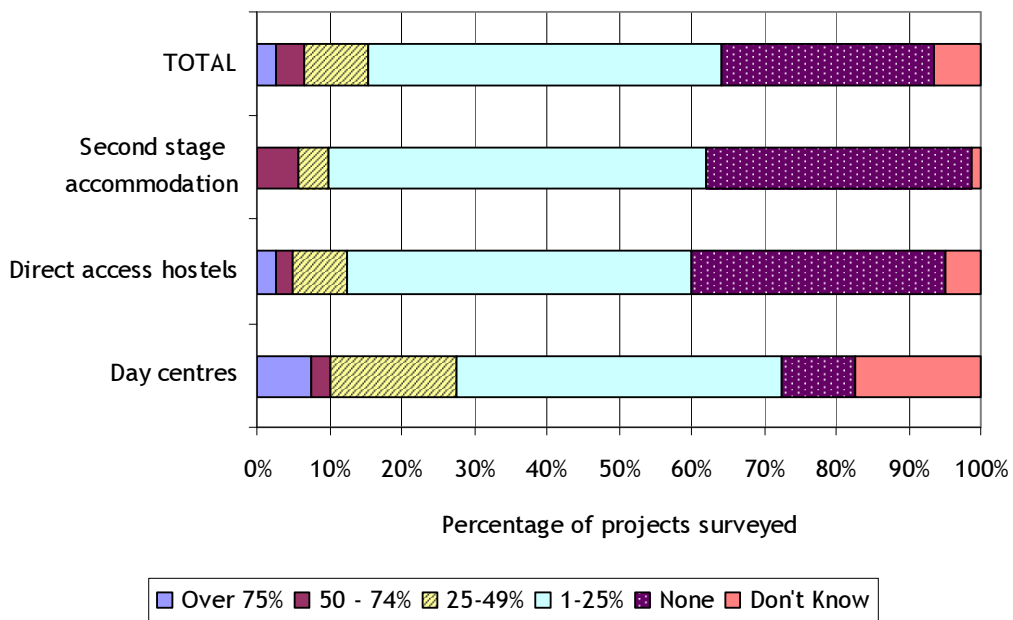
these services, this is generally by referral, rather than in-house. In general, accommodation providers are more likely to have mental health services available than day centres.

- 93% of projects reported having clients with mental health problems and in just over a quarter of projects a majority of clients did.
- 64% of projects reported having clients with personality disorders and in ten projects (7%) more than half of all clients did.

Reported proportion of clients with mental health problems by project type



Reported proportion of clients with personality disorders by project type



In addition to the three types of mental health support services mentioned in the survey, respondents were given the option of specifying alternative mental health services that they offered or had access to. A few respondents mentioned counselling in this category, which was recoded into the talking therapies category. Other support mentioned included signposting, support groups and general discussions with staff about problems.

- As the tables below show, accommodation providers are more likely to have mental health services available than day centres.
- Yet, even where services are available, 21% of all respondents (25% of those where services are available) felt that the therapies are inadequate or inaccessible to their clients. 22% of all respondents (29% of those where services are available) felt that anger management and mediation/relationship counselling services are inadequate or inaccessible.

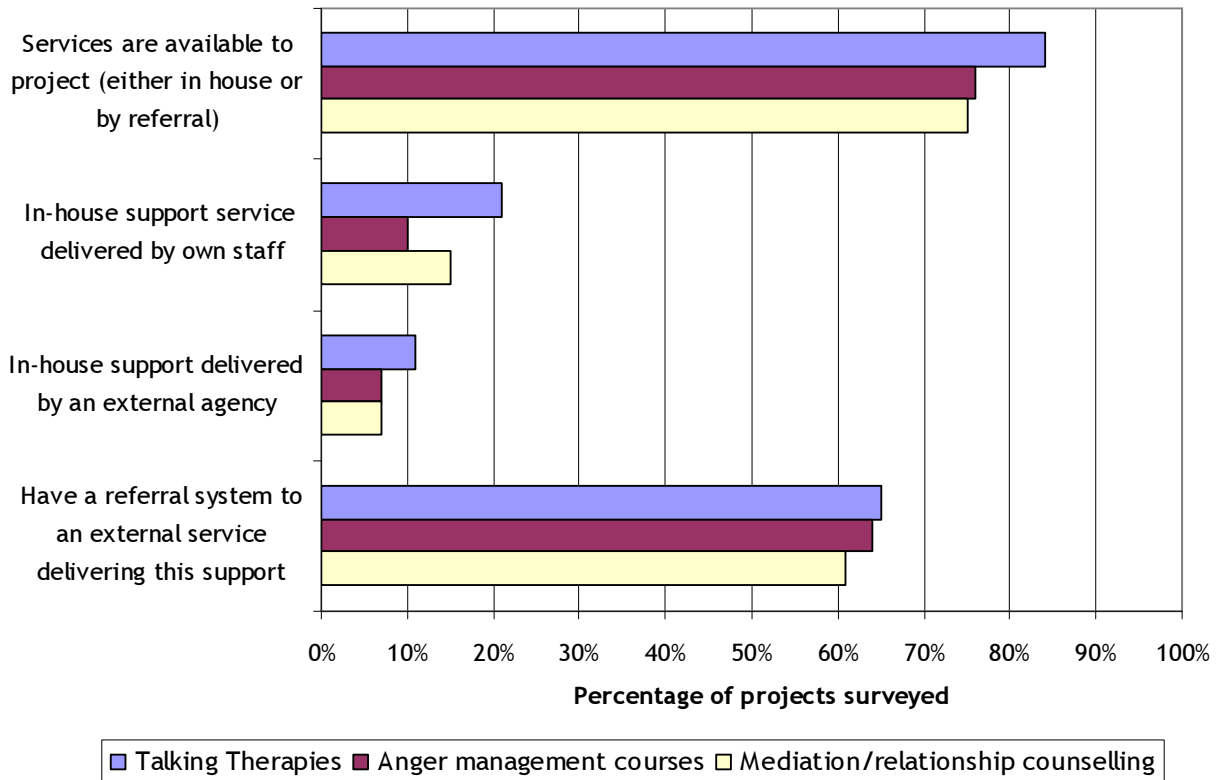
Availability of talking therapies for homelessness services by type of project

Type of project	Type of service		
	Talking therapies	Anger management courses	Mediation/relationship counselling
Day centres	27 (68%)	19 (48%)	22 (55%)
Direct access hostels	36 (90%)	33 (83%)	30 (75%)
Second stage accommodation	64 (90%)	63 (89%)	62 (87%)
Total	127 (84%)	115 (76%)	114 (75%)

The majority of mental health support is available by referral to an external agency. Out of the services available in-house, talking therapies are most common, but only 26% of projects have this available, either delivered by an external agency or by the projects' own staff. It was beyond the scope of this survey to establish the qualifications of the staff delivering mental health services in-house or externally, but exploring the type and level of provision, especially in-house may be an interesting area for future research.

- Looking at the relationship between support needs and the availability of support services revealed that 35 of the 41 projects where more than 50% of clients have mental health problems do have access to talking therapies.
- Similarly, 28 of the 34 projects where over 50% of clients present with challenging behaviour have anger management courses available.

Availability of mental health support services in projects surveyed



Day centres

There are 187 day centres in England and we surveyed 40. Out of these:

- Mental health services are most commonly accessed by referral to an external agency, yet twelve centres have talking therapies available in-house, six have mediation or relationship counselling and three have anger management courses.
- Of the nine day centres surveyed where over 50% of clients have mental health problems, seven have access to talking therapies, five have access to anger management courses, and seven to mediation or relationship counselling. In all cases this is by referral to an external agency.
- In the 28 day centres where at least some clients have mental health problems, ten do not have access to talking therapies, 14 do not have access to anger management courses and 13 do not have access to mediation or relationship counselling.

Direct access hostels

We surveyed 40 of the 246 direct access hostels in England, among these:

- 90% of direct access hostels in the survey have talking therapies available and, although a majority of these are available by referral to an external agency, they are also commonly available in-house.

- Just over 80% of hostels have anger management courses available and three out of four have mediation and relationship counselling.

The prevalence of support services reported in the telephone survey differs from the Homeless UK analysis. A higher proportion of projects in the survey reported that they had in-house mental health services. 16 out of 40 projects (40%) stated that they had talking therapies in-house, delivered both by their own staff and by external services coming into the project to support clients. Eleven (28%) reported having in-house anger management courses and 35% reported having mediation/relationship counselling services. However, this difference could simply be biased by the limited sample. It could also reflect a difference in the way people define mental health services. It is possible that the survey respondents took a wider view of the types of support to be included in 'talking therapies' as opposed to the definition of 'mental health services' on Homeless UK.

Second stage supported accommodation

- As with direct access hostels, second stage accommodation projects are more likely than day centres to have talking therapies, anger management courses and mediation/relationship counselling available to their clients.
- 90% of projects have access to talking therapies and similar numbers can access anger management courses and mediation/relationship counselling. As elsewhere, a few projects have support in house, but mostly it is accessible by referral to an external agency.
- Out of the 18 second stage accommodation projects that reported that more than half their clients have mental health problems, only two said that they do not have talking therapies available.

Limitations of the survey

The SNAP survey was intended to give a snapshot of provision in England. As a short telephone survey, looking at a range of support services in homelessness projects, the survey was not able to look in detail at the links between mental health services and homelessness projects. Specific links with Community Mental Health Services and other parts of the health service were not mentioned in the survey and would be worth exploring further. Anecdotally, Homeless Link members have reported difficulties in accessing community mental health assessments for clients, but we would have to explore this in more detail to determine whether it is an issue nationally.

It should also be noted that the prevalence of mental health issues among clients was assessed by project managers and does not necessarily correlate with diagnosed mental health problems or personality disorders among clients.