



Public Health
Agency



Northern Ireland findings

A PICTURE OF HEALTH

A summary of findings from a survey exploring the health of people in temporary accommodation and other homelessness service settings.





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ABOUT THE STUDY

NI WIDE SCOPING EXERCISE TO EXAMINE THE HEALTH NEEDS AND WELL-BEING OF PEOPLE WHO ARE HOMELESS

This report outlines the key findings of the recent health needs assessment carried out across Northern Ireland. The aim of the study was to provide baseline information on the health needs, barriers to accessing current services, and the care pathways that exist for those experiencing homelessness across NI. The study sought the views of those receiving support ('clients') and those providing that support ('providers') on a number of health and well-being indicators.



HEALTH AND HOMELESSNESS

According to the WHO definition:

“HEALTH IS A STATE OF COMPLETE PHYSICAL, MENTAL AND SOCIAL WELL-BEING AND NOT MERELY THE ABSENCE OF DISEASE OR INFIRMITY.”

Given that being homeless will affect at least one, and typically all, of these spheres of health, homelessness may, by its very nature, be considered as a state of ill-health¹. There is a range of factors, which may lead to a person eventually becoming homeless and often health issues are among them.

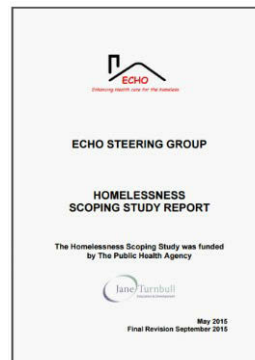


BACKGROUND: LOCAL EVIDENCE

WITH THE EXCEPTION OF A SMALL NUMBER OF RECENT STUDIES, THERE REMAINS A LACK OF UP TO DATE EMPIRICAL INFORMATION ABOUT THE HEALTH STATUS OF PEOPLE EXPERIENCING HOMELESSNESS IN NORTHERN IRELAND (I.E. 'LOCAL EVIDENCE').



PATIENT AND CLIENT COUNCIL (2015). ISSUES FACED BY PEOPLE WHO ARE HOMELESS IN ACCESSING HEALTH AND SOCIAL CARE SERVICES. (NI WIDE)



ECHO STEERING GROUP (2015). HOMELESSNESS SCOPING STUDY REPORT. (NORTHERN TRUST AREA STUDY)

Most recently, the Patient Client Council (2015)⁸ published a report, based on an initial scoping exercise, highlighting the many issues faced by people who are homeless in accessing health and social care services. The report outlines the challenges of meeting the health and social care needs of people who are homeless. It cites examples of best practice from the UK.

The report states that, despite examples of best practice, access to health and social care services for people who are homeless is problematic due to a lack of information about available services and issues with how these services are coordinated to best meet particular individual needs.

The ECHO Group (a multi-agency group, with representation from the NHSCT, PHA, NIHE, and key voluntary and community organisations working with people experiencing homelessness) recognised the need to establish a baseline of information, which could be used to inform future planning for health and social well being services for this target population.

As a result, a scoping exercise to identify the health and social well being needs of people affected by homelessness in the Northern Trust area was conducted in 2015². The report provides a summary of services available in the NHSCT area, selected case studies, and recommendations.



BACKGROUND: OTHER EVIDENCE

INTERNATIONAL EVIDENCE BASE: IT IS WIDELY KNOWN THAT HOMELESSNESS HAS SIGNIFICANT NEGATIVE CONSEQUENCES FOR AN INDIVIDUAL'S HEALTH.

STUDIES HAVE FOUND STRONG CORRELATIONS BETWEEN HOMELESSNESS AND A MULTIPLICITY OF HEALTH PROBLEMS.

THERE ARE CLEAR LINKS BETWEEN HOMELESSNESS AND POOR HEALTH OUTCOMES.

THE LINKS BETWEEN ILL-HEALTH AND HOMELESSNESS ARE BI-DIRECTIONAL.

DESPITE THIS, MANY BARRIERS EXIST FOR HOMELESS PEOPLE IN ACCESSING HEALTH & SOCIAL CARE SERVICES.

Many studies have found strong correlations between homelessness and a multiplicity, and increased severity, of both physical and mental health conditions²⁻⁷. There are clear causal and consequential links between homelessness and poor health outcomes. Ill-health can cause, contribute to and exacerbate homelessness and vice versa¹.

Moreover, health is a vital factor for social inclusion. Good health is a prerequisite to reintegration and is a crucial factor in being able to access and maintain

employment and housing¹. Additionally, many barriers exist for homeless people in accessing health and social care services despite studies showing that homeless people experience some of the poorest levels of health among the general population⁸⁻¹⁰.

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7. *Taylor, K., Naylor, H., George, R., & Hammett, S. (2012). Healthcare for the Homeless: Homelessness is bad for your health.*
8. *Patient and Client Council (2015). Issues faced by people who are homeless in accessing health and social care services. Report of an initial scoping exercise.*
9. *The Scottish Executive, (2001). Health and homelessness guidance. Edinburgh: Health Dept.*
10. *Homeless Link (2014). The unhealthy state of homelessness.*

Thematic literature review summary papers are available upon request.



MAPPING SERVICES

The following information provides details of accommodation based services nominally demarcated by location within Health Trust area¹, and delineates the number of floating support services available (accurate as of Summer 2016).

Information provided is derived from SPOCCNET², and NIHE Floating Support Directories³. SPOCCNET is an online database, managed by the NIHE, detailing services provided by organisations in receipt of Supporting People funding, including accommodation based and floating support.

The mapping provided is in summary form. Similarly, data is subject to change. A list of services by area is available in Appendix 1.

1 Please note, this demarcation is nominal, i.e. no Trust area (or service within areas) took part in this study, and is intended to match the nominal demarcation of data. NIHE boundaries also differ from Trust boundaries. Demarcation refers to projects located within the boundary of each Health Trust area. B= projects located within boundary of Belfast Health Trust area; W = projects in Western Health area; SE = S. Eastern area; S = Southern area; and N = Northern area.

2 www.nihe.gov.uk/SPOCCNET/

3 supplemented by archived Homeless NI data and CHNI data where necessary. Homeless NI was an online directory and vacancy management system, funded by NIHE, managed by Homeless Link and CHNI, which operated until Spring 2016.

ACCOMMODATION BASED*

	No. across NI	% NI
B	925	53
W	388	22
N	192	11
S	95	5
SE	159	9
	1759	

ACCOMMODATION BASED WITH FLOATING / RESETTLEMENT / OUTREACH SUPPORT*

	No. across NI	% NI
B	95	42
W	87	39
N	24	11
S	11	5
SE	7	3
	224	

FLOATING SUPPORT*

	No. across NI	% NI
B	860	37
W	600	26
N	508	22
S	187	8
SE	187	8
	2342	

**As listed in NIHE database, SPOCCNET, accessed Sept 2016*



METHOD AND SAMPLING

SCOPE

Data was collected, via questionnaire, from clients and providers.

PROVIDERS were identified from information derived from SPOCCNET¹, NIHE floating support directories, and supplemented by archived Homeless NI² data and CHNI data where necessary. All SP funded accommodation based (with or without floating support), and non-accommodation based homelessness services, excluding NIHE projects, formed the 'provider' population.

	TRUST AREA				
	B	W	N	S	SE
NO. PROVIDERS	21		10	7	
NO. PROJECTS	37	17	20	11	9
NO. 'SPACES'					
ACCOMM. BASED	925	388	192	159	95
ACCOMM W. FLOATING SUPPORT	95	87	24	11	7
FLOATING SUPPORT*	860	600	508	187	187

*As listed in NIHE database, SPOCCNET, accessed Sept 2016. Note, listing in spocnet is by NIHE area, which differ from Trust area. Data includes NIHE projects, which were not included in the study. *Floating support (only) services not included in study, data provided for informational purposes.*

CLIENTS The 'client' population was defined as adults (18 years of age or older) receiving support from 'provider' homelessness services in Northern

Ireland during the data collection period. This included people who were rough sleeping, living in supported accommodation, using emergency accommodation, or receiving support from non-in supported accommodation, using emergency accommodation, or receiving support from non-accommodation based homelessness services. It also included people who were living in refuges (domestic violence related).

METHOD

The absence of a reliable sampling frame for those using services (and lack of relevant data to develop such), the dearth of local research, and exploratory nature of this research, non-probabilistic sampling procedures and related data collection techniques were employed¹⁻⁵. Data were collected via questionnaire (one for provider, one for client). Additionally, clients were invited to participate in face to face interviews (to form the basis of a minimum of ten case studies).

THE PROVIDER QUESTIONNAIRE sought to gather data about the agency staff's perceptions of the health of those using their services; health related services they offer directly or in conjunction with health services, and potential gaps / concerns they have with current provision. The questionnaire was limited to online completion



(primarily due to the fact that it was known that all providers would have online access).

PROVIDER QUESTIONNAIRE

Target: staff. Issued to managers in projects. Primary data collection: online completion; supplemental: email and postal.

Gathered data on:

- Ratings of client’s physical & mental health, health behaviours, and service needs.
- Patterns & issues relating to ‘Novel Psychoactive Substances’ (NPS) use.
- Services available to clients.
- Staff training on health issues.

THE SERVICE USER QUESTIONNAIRE sought to establish the respondent’s experiences of homelessness, their contact with temporary accommodation projects, length of time in tenancy, their health status, and who they received support from for health issues.

Given the lack of sampling frame for those using homelessness services and potential issues with online access, a ‘blanket’ postal administration method was chosen (supplemented by online administration). The questionnaire was to be completed by self or with the assistance of staff or a key worker.

CLIENT QUESTIONNAIRE

Target: adults (18+) using services. Issued to staff for distribution. Self completion or with help of staff; supplemental: online.

Gathered data on:

- Demographics; experience of homelessness.
- Rating of health (& children’s).
- Physical health: conditions, diagnoses; support received.
- Mental health: diagnoses; support received.
- Substance use: use; support
- Lifestyle; well-being; social support.

Providers were supplied with means of returning any client questionnaires returned at the end of the data collection period.

Across the Northern Ireland wide sample, only one respondent indicated their willingness to participate in an interview. This fact, coupled with the available timeframe, meant that it was not possible to collect the proposed case studies.

CONSENT was secured from all participating organisations to involve projects (as ‘providers’) and those who using their services (as ‘clients’). Additional consent was secured from all participating clients. A designated contact in each participating organisation / project was identified to complete the provider questionnaire, and to act as a point of contact for the return of completed client questionnaires.

DATA COLLECTION was collected during May & June 2016. In total, data from 57 projects (referred to as ‘providers’ in this report), and from 261 people using services (referred to as ‘clients’ in this report) was gathered. In total, 258 valid (i.e. sufficient data was gleaned from across the questionnaire) survey responses were gathered from clients, and 56 from providers.



RESPONSE BY AREA, AS % OF SAMPLE				
	CLIENT		PROVIDER	
	N	%	N	%
BELFAST	105	41	23	41
WESTERN	91	35	19	34
SOUTHERN	25	10	6	11
NORTHERN	21	8	4	7
S.EASTERN	16	6	4	7
	258		56	



THE DATA

Findings in this report are presented at a regional level, and where appropriate supplemented with data demarcated at a Trust level.

It was decided to demarcate supplemental data at a Health Trust level, on the basis of the health focus of this study, and the fact that Health Trust boundaries would be readily recognised by most readers. As such, projects located within the boundary of each Health Trust area are nominally allocated to that group: Belfast (B); Southern (S); South Eastern (SE); Northern (N); and Western (W).

It should be emphasised that this study solely targeted homelessness providers from the community and Voluntary sector, and that the decision to demarcate data at a Trust level does not imply involvement in (Health Trusts or services therein were not targeted during data collection) or endorsement of this study by any of Northern Ireland's Health Trusts. It is nonetheless hoped that the findings, as presented, will be useful for services at a Trust level, and allow comparison with the earlier ECHO study, conducted at Northern Health Trust level.

Findings are presented thematically: demographics; experiences of homelessness; overall health; physical health; mental health; other areas of well being; and substance use (including Novel Psychoactive Substances). Client data are presented for the sample as a whole, and were appropriate, by gender and age. Area summaries will be presented, where practicable, with full data

in the appendices. Provider data are presented alongside client data, wherever possible, to allow comparison. Specific 'provider' sections are included for their views on the health of children within their services (those under 18 were excluded from the study); NPS; and health related service provision.

Percentages presented are rounded to the nearest percentage point. Where appropriate, data to one decimal place are presented in the appendices.

'**Homelessness services**' is used to refer to those services / organisations, in the Community & Voluntary sector, typically in receipt of Supporting People funding to deliver services to those experiencing homelessness and related support needs. '**Homelessness Nurse**' refers to Belfast Trust's Homeless Public Health Nursing Service: the term was chosen instead of the formal title as it would be more readily recognised by participants. '**Provider**' refers to those services that participated in the study. '**Clients**' refers to those who were using their services who participated in the study.

The reader is reminded that this research was exploratory in nature, intended to help develop a baseline understanding of the health needs of homeless people, to highlight areas of concern, and to lay the groundwork for future work. The reader should also be cognisant of sampling issues (e.g. self selecting sample, use of non-proportional sampling techniques; known difficulty in accessing hard to reach / most vulnerable individuals), and issues in response bias when viewing the data.



MALE ● FEMALE ● SAMPLE ●

DEMOGRAPHICS

data based on responses from 258 clients/residents and 56 providers

% OF THE SAMPLE WHO IDENTIFIED AS...



57%



43%

% OF THE SAMPLE WHO HAD CHILDREN STAYING WITH THEM...



18%

age:

18-29

30-44

45-59

60+

M

23

13

6

<1

F

23

17

16

1

S

47

29

22

1

● M: % MALE ● F: % FEMALE ● S: % SAMPLE



See Appendix 3

EXPERIENCES OF HOMELESSNESS

AVERAGE TIME HOMELESS MONTHS

M

17

F

14

S

16

HOMELESS BEFORE %

M

51

F

39

S

46

SLEPT ROUGH BEFORE %

M

51

F

25

S

40

REASON FOR HOMELESSNESS %

#1

FAMILY BREAKDOWN

40

#2

DOMESTIC VIOLENCE

17

#3

RELATIONSHIP B'KDOWN

40

M

#1

FAMILY BREAKDOWN

43

#2

RELATIONSHIP B'KDOWN

15

F

#1

DOMESTIC VIOLENCE

36

#1

FAMILY BREAKDOWN

36



HEALTH DATA

OVERALL HEALTH



SUMMARY

PROVIDERS' VIEW

Providers were asked to indicate how different their clients' physical health was to the general population. 93% of providers surveyed felt that their clients' health was 'very' (41%) or 'somewhat' different (52%) from the rest of the population.

96% of providers identified their typical client's health needs as high or medium. More than three quarters of providers identified their typical clients as having complex / multiple needs.

CLIENTS' VIEW

60% of respondents (62% of males, 57% of females) agreed or totally agreed with the statement: "I am in good health".

57% of the sample (60% of males, 54% of females) agreed or totally agreed with the statement: "my health has worsened since being homeless".

Those in the sample with children staying with them at the time of data collection (n=46, 18% of sample) were asked two similar statements with regards to their children. 93% agreed or totally agreed that their "children are in good health"; 28% agreed / totally agreed that "their health has worsened since being homeless".

WHAT CLIENTS TOLD US

Clients were asked to indicate how much they agreed with the following statements: “I am in good health”, and “My health has worsened since being homeless”.

The percentage of the sample who ‘agreed’ or ‘totally agreed’ with each of these statements was:

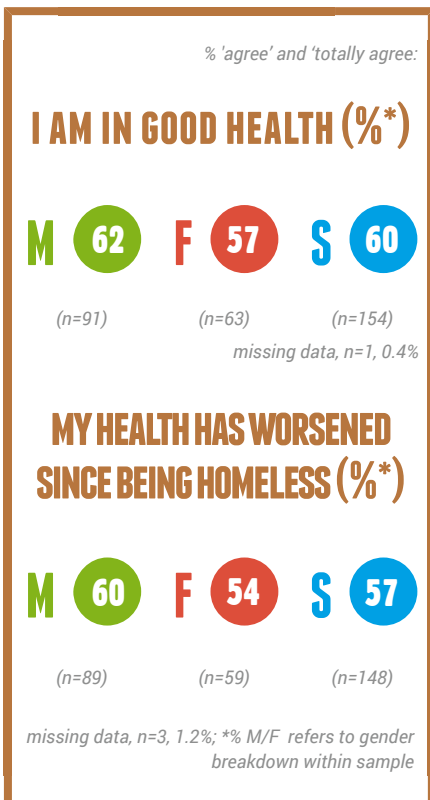


Table 1 and 2 shows the participant responses by area, (additional data in Appendix 4).

TABLE 1: % PARTICIPANTS WHO AGREED “I AM IN GOOD HEALTH”

	AGREE	TOT. AGREE	TOT %
B	32.4	20	52.4
W	58.2	8.8	67
S	44	12	56
SE	62.5	0	62.5
N	42.9	23.8	66.7

MALE ● FEMALE ● SAMPLE ● PROVIDER ●



OVERALL HEALTH

TABLE 2: % PARTICIPANTS WHO AGREED “MY HEALTH HAS WORSENERD”

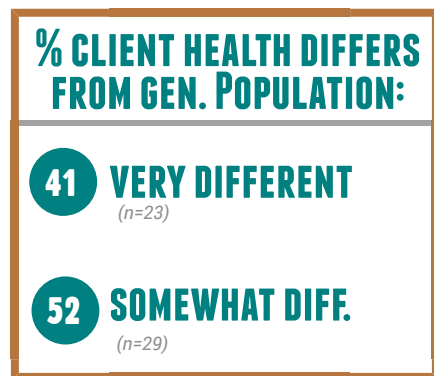
	AGREE	TOT. AGREE	TOT %
B	19	6.2	25.2
W	14.3	9	22.3
S	3.5	1.6	5.1
SE	3.1	0	3.1
N	3.1	0.4	3.5

Those in the sample with children, defined as those aged <18, staying with them at the time of data collection (n=46, 18% of sample) were asked two similar statements with regards to their children. The percentage who ‘agreed’ or ‘totally agreed’ with each statement was:



WHAT PROVIDERS THOUGHT

Providers were asked to indicate how different their clients’ physical health was to the general population. 93% felt that their clients’ health was ‘very’ (41%) or ‘somewhat’ different (52%) from the rest of the population. (7%, n=4, thought there was ‘no difference’).



Providers were also asked to indicate the level of their client groups’ support needs (high, medium, low), and to what degree clients’ experienced complex / multiple needs. 96% of providers identified their typical client’s health needs as high or medium:



More than three quarters of providers identified clients as having complex / multiple needs.



PHYSICAL HEALTH



SUMMARY

PROVIDERS' VIEW

57% of providers in the sample felt that the physical health of those who used their services was different to the general population

The top three physical health problems reported by providers (whole sample) were COPD (27%, #1); respiratory problems (23%, #2), and diabetes; weight problems; disability issues (21% each, #3)

CLIENTS' VIEW

The top three physical health problems reported by clients were poor diet / nutrition problems (43%, #1); stomach / digestive problems (37%, #2), and dental problems (36%, #3). More than a third reported chest pains and respiratory / breathing problems.

70% cited receiving formal help for physical health issues. Of these, almost three in ten reported needing more help.

Half of the sample reported that they were receiving adequate support for physical health issues. One in five reported that they didn't need any help at the time of data collection.

GPs (70%) and homelessness staff (76%) were the most cited sources of help. GP and/or homelessness services accounted for 55% of all support received by clients for physical health problems.



PHYSICAL HEALTH

WHAT PROVIDERS REPORTED:

% PROVIDERS:

57 PHYSICAL HEALTH DIFFERENT FROM THE GEN. POPULATION

57% of providers felt that the physical health of those who used their services was (somewhat or very) different to the general population.

The top three physical health problems reported by providers (in the sample as a whole) were (#1) COPD; (#2) respiratory problems; and (#3) diabetes; weight problems; disability issues.

TABLE 3. % PROVIDERS: PHYSICAL HEALTH DIFFERENT TO GENERAL POPULATION (BY AREA)

B	74	SE	0
W	42	N	75
S	67		

The top cited physical health issues (sample) are listed below, table 4. Additional (area level) data in appendices.

TABLE 4. % PROVIDERS (NI SAMPLE):

TOP REPORTED PHYSICAL HEALTH ISSUES

27	COPD	(N=15)
23	RESPIRATORY PROBLEMS	(N=13)
21	DIABETES; WEIGHT PROBLEMS; DISABILITY ISSUES	(N=12 Each)
16	LIMITING LONG-TERM ILLNESS (LLTI)	(N=9)
13	ASTHMA; HEART DISEASE	(N=7 each)
11	STROKE	(N=6)



PHYSICAL HEALTH

WHAT CLIENTS REPORTED:

REPORTED PHYSICAL HEALTH ISSUES

Clients were asked to indicate whether they had experienced / were currently experiencing a number of physical health issues or conditions. (They were asked to report experiencing these anytime in the last 12 months, and anytime prior to the last 12m).

In the sample as a whole, the top ranked cited physical health condition in the 12 month period up to point of data collection was poor diet / nutrition problems (32%). Stomach problems ranked 2nd in the same time period (24%), and dental problems 3rd (23%).

Similarly, 43% (n=110, rank 1) reported 'lifetime' experience of

poor diet / nutrition problems; 37% (n=95, rank 2) stomach problems; and 36% (n=94, rank 3) dental problems.

Table 5 displays selected top ranked cited physical health issues reported by the sample. More detailed data in Appendix 4.

TABLE 5: TOP CITED PHYSICAL HEALTH CONDITIONS / ISSUES (SAMPLE AS A WHOLE)...

RANK	issue experienced in last 12 m	%	...prior to last 12m	%	...ever*	%
1	respiratory problems	14.3	poor diet / nutrition	32.2	poor diet / nutrition	42.6
2	Dental problems	13.6	Stomach problems	23.6	Stomach problems	36.8
3	Stomach problems	13.2	Dental problems	22.9	Dental problems	36.4
4	High blood pressure	11.6	Respiratory problems	20.2	Respiratory problems	34.5
5	poor diet / nutrition	10.5	High blood pressure	15.1	High blood pressure	26.7

*ever' refers to % for 'last 12m' & 'prior to last 12m' combined.

BELFAST (n=105)

RANK	issue experienced in last 12 m	%	...ever*	%
1	poor diet / nutrition	36	poor diet / nutrition	55
2	dental problems	22	respiratory/breathing	37
2	stomach problems	22	dental problems	36
4	respiratory/breathing problem	20	stomach problems	33
5	high blood cholesterol	15	high blood cholesterol	27

WESTERN (n=91)

RANK	issue experienced in last 12 m	%	...ever*	%
1	poor diet / nutrition	29	poor diet / nutrition	42
2	stomach problems	24	stomach problems	37
2	dental problems	24	dental problems	34
4	respiratory/breathing problem	19	respiratory/breathing	31
5	high blood pressure	15	high blood pressure	28

SOUTH EASTERN (n=16)

RANK	issue experienced in last 12 m	%	...ever*	%
1	stomach problems	31	stomach problems	50
2	poor diet / nutrition	25	visual / eye problems	44
3	respiratory/breathing problem	25	poor diet / nutrition	25
4	dental problems	19	respiratory/breathing	25
5	problems with mobility	13	dental problems	25

NORTHERN (n=21)

RANK	issue experienced in last 12 m	%	...ever*	%
1	dental problems	29	dental problems	48
2	poor diet / nutrition	29	poor diet / nutrition	38
3	high blood pressure	19	high blood pressure	33
3	respiratory/breathing problem	19	respiratory/breathing	33
3	problems with feet	19	stomach problems	33

SOUTHERN (n=25)

RANK	issue experienced in last 12 m	%	...ever*	%
1	poor diet / nutrition	36	poor diet / nutrition	48
2	stomach problems	32	stomach problems	48
3	dental problems	24	dental problems	40
4	respiratory/breathing problems	24	respiratory/breathing	36
5	visual/eye problems	24	visual/eye problems	24

*% = percentage of participants from area citing experiencing condition / physical health issue during specified time period. *ever' refers to % for 'last 12m' & 'prior to last 12m' combined. As before, data in this table is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.*

WHAT CLIENTS REPORTED:

REPORTED HELP RECEIVED FOR PHYSICAL HEALTH ISSUES

Participants were asked to indicate whether they received any formal help for their reported physical health problems.

Across the sample, one in five reported that they didn't need any help at the time of data collection.

70% cited receiving help for physical health issues. One in five reported receiving help, but felt that they could do with more

(accounting for almost three in ten (28%) of those who reported receiving help).

Half of the sample reported that they were receiving adequate support for physical health issues. (Breakdown by area and gender in appendices).

SOURCES OF HELP

62% of cited support was accounted for by GP and homelessness services. Just over

half (55%) of those who reported receiving help did so from homelessness services. Half of those receiving help cited GPs. Homelessness services accounted for 32% of all cited support (top ranked), compared to GPs, which accounted for 30% (rank #2).

2 in 10 respondents cited receiving support from homelessness staff only (22%, n=42), and an additional 13% (n=25) cited GP only.

TABLE 7: PARTICIPANTS' REPORTED HELP RECEIVED...

	SAMPLE		B. AREA		W. AREA		N. AREA		S. AREA		S.E. AREA	
	N	%	N	%	N	%	N	%	N	%	N	%
Yes, but I would like more support	50	19	22	21	18	20	2	10	4	16	4	25
Yes, I'm getting the support I need	131	51	58	55	45	50	7	33	12	48	9	56
No, I don't need it any help at the minute	50	19	16	15	16	18	9	43	7	28	2	13
No, but it would help me	9	4	3	3	5	6	0	0	1	4	0	0
I was offered but chose not to use it	6	2	3	3	2	2	1	5	0	0	0	0
None was offered	4	2	2	2	0	0	0	0	1	4	1	6
Missing data		3		1		6		10				

TABLE 8 CITED SOURCES OF HELP

RANK		n	%
1	staff member at project	141	78
2	GP	130	72
3	Pharmacist	32	18
4	Dentist / dental specialist	24	13
5	Homelessness nurse*	10	6

% = percentage of those who cited receiving formal help, who subsequently cited source of help.
 *This service is not available across NI, thus percentage will be relatively smaller.

19% (n=35) cited availing of GP and homelessness services only.

Other services cited (typically in conjunction with other services): pharmacist 18% (n=32); dentist / dental specialist, 13% (n=24); and 'other' hospital services (i.e. physiotherapy, heart / cardiac services, Occupational Therapy, cancer services, podiatry, unspecified), 18% (n=30).

MENTAL HEALTH



SUMMARY

PROVIDERS' VIEW

98% of providers in the sample felt that the mental health of those who used their services was somewhat or very different to that of the general population.

The top three mental health problems reported by providers in the sample were Depression / Depressive Disorders, (96%, ranked #1); anxiety / Anxiety Disorders, (89%, ranked #2); and suicidal ideation, (88%, ranked #3).

CLIENTS' VIEW

The top three mental health problems reported by clients were depression (80%, #1); stress (78%, #2), and sleep problems (77%, #3). Three quarters reported anxiety / Anxiety Disorders, whilst 7 in 10 (72%) reported social isolation.

52% reported having a formal diagnosis: 9 in 10 reported a diagnosis of depression. Psychiatric comorbidity (depression and another; anxiety and another) was common. Those with a formal diagnosis (irrespective of gender) were more likely than those without to report: feeling lonely; socially isolated; and anxious. They were also more likely to report having problems sleeping; problems with mood; and more likely to report experiencing suicidal thoughts.

One third (32%) of the sample reported that they were receiving adequate support for mental health issues (an additional 3 in 10 felt they could with more). Of those who reported having a formal diagnosis, 37% were receiving the support they needed. An additional 4 in 10 reported receiving support, but felt they needed more.

62% of cited support was accounted for by homelessness services and GPs. 2 in 10 received support from homelessness staff only. 1 in 10 (9%) received help for mental health issues from a GP only. In total, half received support for mental health issues, from their GP and homelessness service only.



MENTAL HEALTH

WHAT PROVIDERS REPORTED:

% PROVIDERS:

98

MENTAL HEALTH DIFFERENT FROM THE GEN. POPULATION

98% of providers in the sample felt that the mental health of those who used their services was somewhat or very different to that of the general population.

The top three mental health problems reported by providers in the sample were (#1) Depression / Depressive Disorders; (#2) anxiety / Anxiety Disorders; and (#3) suicidal ideation.

TABLE 9. % PROVIDERS: MENTAL HEALTH DIFFERENT TO GENERAL POPULATION (BY AREA)

B	96	SE	100
W	100	N	100
S	100		

The top cited mental health issues (NI) are listed below, table 10. Additional (area level) data in Appendix 5.

TABLE 10. % PROVIDERS (SAMPLE):

TOP REPORTED MENTAL HEALTH ISSUES

96	DEPRESSION	(N=54)
89	ANXIETY / ANXIETY DISORDERS	(N=50)
88	SUICIDAL THOUGHTS	(N=49)
80	SELF HARMING BEHAVIOURS	(N=45)
75	SUICIDAL BEHAVIOURS	(N=42)
66	PERSONALITY DISORDERS	(N=37)
63	DUAL DIAGNOSIS	(N=35)
57	SCHIZOPHRENIA	(N=32)



MENTAL HEALTH

WHAT CLIENTS REPORTED:

REPORTED MENTAL HEALTH ISSUES

Participants were asked to indicate whether they had experienced / were currently experiencing a number of mental health issues or conditions, anytime in the last 12 months.

In the sample as a whole, the top ranked cited mental health

condition in the 12 month period up to point of data collection was depression (80%).

Approximately 8 in 10 (78%, ranked 2nd) reported issues with stress in the same time period (24%). A similar proportion reported sleep problems (77%, ranked 3rd).

Three quarters reported anxiety / Anxiety Disorders, and 7 in 10 reported social isolation (72%) and mood problems (71%).

Table 11 displays cited mental health issues, ranked by most cited (%). More detailed data are available in Appendix 5.

TABLE 11: MENTAL HEALTH CONDITIONS / ISSUES (SAMPLE AS A WHOLE, RANKED %CITED)...

RANK	issue experienced in last 12 m	%	RANK	issue experienced in last 12 m	%
1	Depression	80	8	More irritable	62
2	Stress*	78	9	Panic attacks	40
3	Sleep problems	77	10	Memory loss	40
4	Anxiety / Anxiety Disorder	74	11	Find it hard to control anger	32
5	Social isolation	72	12	aggressive to others	27
6	Problems with mood	71	13	Suicidal thoughts	26
7	Problems concentrating	66	14	Hear voices	15

**Participants were asked to identify whether they were experiencing "prolonged stress" which was defined, to broadly reflect accepted chronic stress definitions^a, as "emotional pressure felt for a prolonged period of time (e.g. weeks or longer) in which you feel you have little or no control. This stress is constant and doesn't go away" (a: McGonagle, K. A., & Kessler, R. C. (1990). Chronic stress, acute stress, and depressive symptoms. American journal of Community Psychology, 18(5), 681-706; Folkman, S. (2013). Stress: appraisal and coping (pp. 1913-1915). Springer New York; Boss, P. (2014). Family stress. In Encyclopedia of quality of life and well-being research (pp. 2202-2208). Springer Netherlands.*

BELFAST (n=105)

RANK	issue experienced in last 12 m	%
1	Depression	80
2	Stress	77
3	Anxiety / Anxiety Disorders	76
3	Sleep problems	76
5	Social isolation	72

NORTHERN (n=21)

RANK	issue experienced in last 12 m	%
1	Anxiety / Anxiety Disorders	91
1	Problems with mood	91
3	Social isolation	86
3	Depression	86
3	Stress	86

SOUTH EASTERN (n=16)

RANK	issue experienced in last 12 m	%
1	Depression	94
2	Sleep problems	88
2	Problems with mood	88
2	Feeling stressed	88
5	Social isolation	81
5	Anxiety / Anxiety Disorders	81

WESTERN (n=91)

RANK	issue experienced in last 12 m	%
1	Depression	79
2	Stress	78
3	Sleep problems	76
4	Problems with mood	73
5	Social isolation	71
5	Anxiety / Anxiety Disorders	71

SOUTHERN (n=25)

RANK	issue experienced in last 12 m	%
1	Sleep problems	80
2	Stress	72
3	Depression	64
4	Problems with mood	60
4	Problems concentrating	60
4	Anxiety / Anxiety Disorders	60

% = percentage of participants from area total citing experiencing condition / mental health issue during specified time period. As before, data in this table is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.

TABLE 13: (%) HOW OFTEN DO YOU FEEL...

	NI	N	SE	B	W	S
that you lack companionship?	77	86	81	76	78	64
left out (socially)?	70	76	75	71	73	44
isolated from others?	79	86	81	81	80	56

% = percentage of participants from named area total answering 'often' and 'sometimes'

TABLE 14: (%) FORMAL DIAGNOSIS

	NI	B	W	N	S	SE
<i>N</i>	132	58	48	11	5	10
<i>%</i>	51	55	53	52	20	63

% = percentage of participants from named area who indicated that they had a formal diagnosis for (a) mental health condition(s). In total, 132 respondents, 51% of sample indicated that they had formal diagnoses. 78 males (53% of males in sample) and 54 females reported having diagnosed mental health conditions (49% of females). 73 males & 52 females (n=125, multiple responses, n=222) provided information about their diagnoses, missing data n=7.

TABLE 15: TOP RANKED CITED DIAGNOSES

NI (n=132)			NORTHERN (n=11)			SOUTH EASTERN (n=10)		
RANK	Diagnosis	%NI		%		%		
1	Depressive disorder	89	Depressive disorder	52	Depressive disorder	100		
2	Anxiety Disorder	52	Anxiety Disorder	33	Anxiety Disorder	50		
3	PTSD	9	PTSD	10	Personality Disorder	20		

WESTERN (n=48)			SOUTHERN (n=5)			BELFAST (n=58)		
RANK	Diagnosis	%		%		%		
1	Depressive disorder	81	1 Depressive disorder	60	Depressive disorder	81		
2	Anxiety Disorder	50	2 Anxiety Disorder	40	Anxiety Disorder	47		
3	Personality Disorder	6	2 ADHD	40	PTSD	10		
			3 PTSD	20				

%NI = percentage of participants who identified as having a formal diagnosis, and provided information on such (NI, n=125, missing data n=7). % = percentage of participants who identified as having a formal diagnosis, and provided information on such for each area (number specified). As before, data in this table is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.

TOP RANKED DIAGNOSES

9 in 10 (89%) reported a diagnosis for depression. 4 in 10 (41%, n=51) had a diagnosis of depression only, the remainder reported multiple diagnoses.

51% reported a diagnosis of anxiety, typically as a co-morbid diagnosis. 3 in 10 (29%, n=36) reported anxiety & depression; 17% (n=21) reported anxiety, depression, and one other diagnosis.

DIAGNOSES BY GENDER: MALE

Top cited diagnosis: depression 82%; #2: Anxiety Disorder, 52%; #3: Personality Disorder 8%. Depression accounted for half (51%) of all cited diagnoses; anxiety for 31%. Just over a third (36%) reported a diagnosis of depression only. Males reporting co-morbid diagnoses: 49% (n=38), typically depression and anxiety (32%, n=25).

Males citing a diagnosis were more likely than those without to report feeling lonely (46%:25%) socially isolated (87%:66%); anxious (95%:60%); problems sleeping (91%:72%), with mood (91%:60%); and more likely to report experiencing suicidal thoughts (33%:16%).

DIAGNOSES BY GENDER: FEMALE

Top cited diagnosis: depression 87%; #2: Anxiety Disorder, 48%; #3: PTSD 11%. Depression accounted for 46% of all cited diagnoses; anxiety for 28%. 4 in 10 (n=22) reported a diagnosis of depression only.

Females reporting comorbid diagnoses: 48% (n=26), specifically depression & anxiety (20%, n=11), or depression, anxiety & another (19%, n=10). Females citing a diagnosis were more likely than those without to report feeling lonely (85%:67%) socially isolated (80%:55%); anxious (89%:53%); problems sleeping (81%:62%), with mood (85%:47%); and more likely to report experiencing suicidal thoughts (35%:18%).

WHAT CLIENTS REPORTED:

REPORTED HELP RECEIVED FOR MENTAL HEALTH ISSUES¹

Participants were asked to indicate whether they received any formal help for their reported mental health problems.

Across the sample, one quarter reported that they didn't need any help at the time of data collection.

56% cited receiving help for mental health issues. 3 in 10 reported receiving help, but felt that they could do with more (accounting for 58% of those who reported receiving help).

One third (32%) of the sample reported that they were receiving adequate support for mental health issues. (Breakdown by area and gender in appendices).

Of those who reported having a formal diagnosis, 37% (n=49) were receiving the support they needed. An additional 41% (n=54) reported receiving support, but felt they needed more.

SOURCES OF HELP

62% of cited support was accounted for by homelessness

services and GPs: homelessness services accounted for 36% of all cited support (top ranked), compared to GPs, which accounted for 27% (rank #2). Homelessness services were cited by 93% (n=172); GPs were cited by 73% (n=135) of respondents.

2 in 10 (21%) cited receiving support from homelessness staff only. 1 in 10 (9%) received help for mental health issues from a GP only. (In total, half (52%) received support from their GP and homelessness service only).

TABLE 16: PARTICIPANTS' REPORTED HELP RECEIVED...

	SAMPLE		B. AREA		W. AREA		N. AREA		S. AREA		S.E. AREA	
	N	%	N	%	N	%	N	%	N	%	N	%
Yes, but I would like more support	83	32	38	36	29	32	4	19	8	32	4	25
Yes, I'm getting the support I need	61	24	29	28	21	23	4	19	4	16	3	19
No, I don't need it any help at the minute	68	26	24	23	26	29	5	24	8	32	5	31
No, but it would help me	21	8	7	7	8	9	2	10	2	8	2	13
I was offered but chose not to use it	14	5	3	3	5	6	4	19	0	0	2	13
None was offered	7	3	3	3	2	2	2	10	0	0	0	0
Missing data	3	1		0		0		0	3	1		0

% = percentage of area.

● TABLE 17: CITED SOURCES OF HELP

RANK		n	%
1	staff member at project	172	93
2	GP	135	73
3	Therapy / counselling	42	23
4	CPN	27	15
5	Staff at other health services*	24	13

*% = percentage of those who cited receiving formal help, who subsequently cited source of help.
See additional information, right hand side of page.

1: 144 respondents indicated receipt of support for cited mental health conditions. A follow-up question asked participants to identify sources of help, n=185 responded (multiple responses, n=407), meaning 41 respondents who had indicated that no help was available of nonetheless identified sources of help. These responses are included in calculations.

Therapy / counselling, both in formal health and in community / voluntary settings, ranked third, accounting for 23% (n=42) of cited support. Hospital based services health services Hospital based services / psychiatric services (5%), and "staff at other health services" - e.g. social worker, Gender Identity Clinic, Learning Disabilities services, and Dementia Services - (13%), were cited by almost one in five respondents.

OTHER ASPECTS OF HEALTH



SUMMARY

PROVIDERS' VIEW

All surveyed providers felt that those who used their services were (somewhat or very) different to the general population in other aspects of health and well-being.

The top three 'other' health and well-being issues reported by providers were (#1) problems in social support; (#2) nutrition / problems with diet; and (#3) complex / multiple needs.

CLIENTS' VIEW

One in three women in the sample reported having a cervical smear in the last three years. Three in ten women reported having a breast screening / examination in the last three years.

9% of respondents reported that they had a registered disability / disabilities; 3% reported as registered blind; one respondent reported as registered deaf; and 3% reported as hearing impaired.

1 in 5 had 1 meal a day; 6 in 10 had two or fewer meals per day. A third reported that they ate no portions of fruit & veg per day at the time of data collection. 6 in 10 had one or fewer pieces of fruit & veg per day.

A quarter reported that they did no exercise during the week. Almost half exercised once or less. 1 in 5 reported exercising 4+ times a week.

04

OTHER ASPECTS OF HEALTH

WHAT PROVIDERS REPORTED:

% PROVIDERS:

100 OTHER ASPECTS OF HEALTH DIFFERENT FROM THE GEN. POPULATION

All surveyed providers felt that those who used their services were (somewhat or very) different to the general population in other aspects of health and well-being.

The top three 'other' health and well-being issues reported by providers (across the sample) were (#1) problems in social support; (#2) nutrition / problems with diet; and (#3) the presence of complex / multiple needs.

TABLE 18. % PROVIDERS: PHYSICAL HEALTH DIFFERENT TO GENERAL POPULATION (BY AREA)

B	74	SE	0
W	42	N	75
S	67		

The top cited issues (NI) are listed below, table 19. Additional data in Appendix 6.

TABLE 19. % PROVIDERS (NI SAMPLE):

TOP REPORTED 'OTHER' HEALTH & WELL-BEING ISSUES

91	PROBLEMS IN SOCIAL SUPPORT	(N=51)
77	NUTRITION / PROBLEMS WITH DIET; COMPLEX / MULTIPLE NEEDS	(N=43 Each)
68	LEARNING DIFFICULTIES	(N=38)
66	SEXUAL HEALTH; ORAL HEALTH	(N=37 each)
27	LGBT SPECIFIC HEALTH ISSUES	(N=15)
25	VISUAL HEALTH	(N=14)

WHAT CLIENTS TOLD US

CERVICAL & BREAST SCREENING

One in three (29%) women in the sample reported having a cervical smear in the last three years.

% 'yes':

(%) CERVICAL SMEAR LAST 3YRS



missing data, n=2,

TABLE 20: (%) CERVICAL SCREENING IN LAST 3Y (BY AGE)

	YES	NO	NOT RELEVANT
18-29	22	70	8
30-44	46	36	15
45-59	27	47	20
60+	0	100	0

Missing data, n=2, 2% (30-44, 45-59)

Three in ten (29%) women reported having a breast screening / examination in the last three years.

% 'yes'

BREAST SCREENING LAST 3YRS



missing data, n=2,

TABLE 21: (%) BREAST SCREENING IN LAST 3Y (BY AGE)

	YES	NO	NOT RELEVANT
18-29	7	85	8
30-44	18	64	15
45-59	7	73	13
60+	0	100	0

Missing data, n=2, 2% (30-44, 45-59)

MALE ● FEMALE ● SAMPLE ● PROVIDER ●



OTHER ASPECTS OF HEALTH

REGISTERED DISABILITY, VISUAL AND HEARING IMPAIRMENT

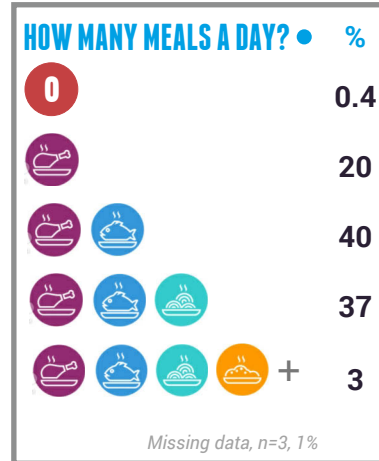
9% (n=21) of respondents reported that they had a registered disability / disabilities.

Area breakdown available in appendices. **3%** (n=8) of respondents reported as registered blind; one respondent (0.4%) reported as registered deaf; and

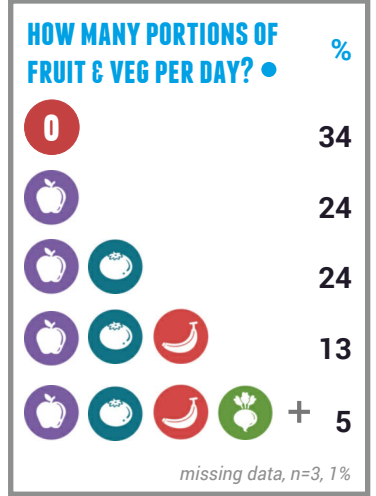
almost **3%** (n=7, 2.7%) reported as hearing impaired.

DIET AND EXERCISE.

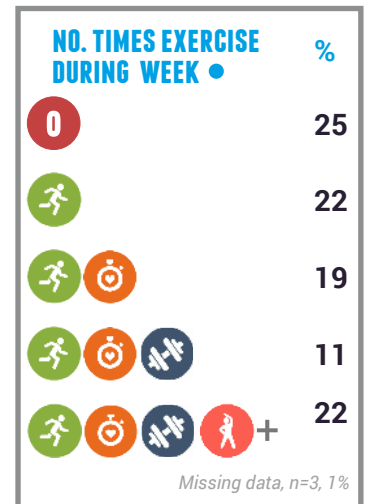
1 in 5 had 1 meal a day (20%). **6 in 10** (60%) two or fewer meals per day. (Area data: see appendices).



A third reported that they ate no portions of fruit & veg per day at the time of data collection. **6 in 10** had one or fewer pieces of fruit & veg per day (58%).



A quarter reported that they did no exercise during the week. Almost half (47%) exercised once or less. **1 in 5** reported exercising 4+ times a week.



SERVICE USERS: HOW OFTEN DID THEY...

Participants were asked to indicate how often the following events occurred in the last 12 months. Additional data (gender, area) are available in the appendices.

● TABLE 22

	NEVER				1-2 TIMES				3-5 TIMES				5+ TIMES				(% EVER* (N=258)
	N	%	N	%	N	%	N	%	N	%	N	%	N	%			
Visited GP	10	26	24	38	89												
prescribed prescription drugs	37	24	15	23	62												
Visited dentist	48	42	6	4	51												
Emergency visit to A&E	55	35	5	4	43												
Missed a medical appointment	57	30	8	4	42												
Outpatient appointment	66	22	7	4	33												
Visited optician	68	29	1	1	31												
Emergency hospital admission	74	21	2	2	25												
Ambulance called (emergency)	76	19	2	2	23												
Met with a support / peer group	76	14	5	4	23												
Vaccination for Flu	79	19	1	0	20												
Had a health check / MOT	81	14	2	2	17												
Used a Walk-in clinic	86	10	2	1	13												
Had a visit with nurse	88	6	2	3	11												
Other vaccination	97	2	0	0	2												

(*Ever* refers to any occurrence over the period). Missing data, n=3, 1%; (n=1:0.4%)

REASONS FOR USE OF EMERGENCY SERVICES

Reasons, ranked by most cited, given by respondents for the use of A&E, emergency hospital admission or other emergency services included:

● TABLE 23

RANK	CATEGORY OF REASON GIVEN (n=65)	%
1	intoxication / OD	19
2	Alcohol related	17
2	broken bones (unspecified)	17
4	Falls	11
4	black outs (substance use)	11
6	Suicide attempts	9
6	NPS related	9
8	black outs (other)	8
8	Stomach problems	8
10	head injuries	6

PROVIDERS: HOW OFTEN DID YOUR CLIENTS...

Providers were asked, thinking about their clients, to indicate how often the following events occurred in the last 12 months. Data presented below. (Additional data are available in Appendix 6).

● TABLE 24

	NEVER		1-2 TIMES		3-5 TIMES		6+ TIMES		(% EVER* (N=56)
	N	%	N	%	N	%	N	%	
Emergency visits to A&E	0	0	4	7	27	48	25	45	100
Ambulance calls / 999	0	0	5	9	32	57	19	34	100
Emergency hospital admission	0	0	14	25	27	48	15	27	100
taking any regular medicines	0	0	0	0	15	27	41	73	100
missed meals	1	2	4	7	15	27	36	64	98
Emergency psychiatric admission	3	5	15	27	31	55	7	13	95
engaged in risk behaviours	8	14	3	5	17	30	28	50	86
engaged in street behaviours	17	30	8	14	11	20	20	36	70
engaged in rough sleeping	18	32	15	27	19	34	4	7	68
Refused registration with GP	25	45	19	34	9	16	3	5	55
Refused registration with dentist	26	46	20	36	8	14	2	4	54

(*Ever* refers to any occurrence over the period). Missing data, n=3, 1%; (n=1:0.4%)

SUBSTANCE USE ISSUES



SUMMARY

PROVIDERS' VIEW

88% of providers in the sample felt that the substance use issues of those who used their services was somewhat or very different to that of the general population.

The top substance use issues reported by providers in the sample were (#1) alcohol; (#2) tobacco smoking, prescription drug use (for purposes other than intended); and (#3) Novel Psychoactive Substances (NPS).

93% reported excessive / problematic use of alcohol anytime in the 12 months up to and including data collection; 88%, NPS; 82% prescription medication (for purposes other than prescribed); and 89% 'other substances'. 98% reported their clients missing meals anytime in same time period; 86% engaging in risk behaviours whilst intoxicated / relating to their substance use; 70% engaging in street behaviours; and 68% of providers reported rough sleeping amongst their clients.

CLIENTS' VIEW

A quarter (26%) cited receiving help for substance use issues. Of these, 5% reported receiving help, but felt that they could do with more.

56% of cited support was accounted for by GP and homelessness services. A quarter (25%) of respondents cited receiving support from homelessness staff only, 8% GP only.



SUBSTANCE USE ISSUES

WHAT PROVIDERS REPORTED:

% PROVIDERS:

88 SUBSTANCE USE ISSUES DIFFERENT FROM GENERAL POPULATION

88% of providers in the sample felt that the substance use issues of those who used their services was somewhat or very different to that of the general population.

The top substance use issues reported by providers in the sample were (#1) alcohol; (#2) tobacco smoking, prescription drug use (for purposes other than intended); and (#3) Novel Psychoactive Substances (NPS).

TABLE 25. % PROVIDERS: SUBSTANCE USE ISSUES DIFFERS TO GEN. POP. (BY AREA)

B	78	SE	100
W	100	N	100
S	67		

The top cited mental health issues (NI) are listed below, table 26. Providers reported the frequency of occurrence of a number of events over the 12 months prior to survey, see table yy. Additional (area level) data in appendices.

TABLE 26. % PROVIDERS (SAMPLE):

TOP REPORTED SUBSTANCE USE ISSUES ●

84	ALCOHOL	(N=47)
73	SMOKING; PRESCRIPTION DRUGS*	(N=41 each)
71	NPS	(N=49)

*use other than prescribed

TABLE 27 ●

	OCCASIONALLY	FREQUENTLY	EVER*
EXCESSIVE / PROBLEMATIC USE OF...			
alcohol	16	70	93
NPS	29	48	88
prescription drugs	23	57	82
other substances	30	32	89
ENGAGED IN AS A RESULT OF / WHILST INTOXICATED...			
risk behaviours ²	30	50	86
street behaviours ¹	20	36	70
rough sleeping	34	7	68
miss meals	27	64	98

¹e.g. begging, drinking, etc.; ²whilst intoxicated / relating to substance use; * 'ever' = cum. % of reported occurrence (choice from 'never', 'not often', 'occasionally', and 'frequently')



SUBSTANCE USE ISSUES

WHAT CLIENTS REPORTED: HOW OFTEN HAD THEY USED (% SAMPLE)...

TABLE 28		NEVER	MONTHLY OR LESS	2-4 TIMES A MONTH	2-3 TIMES A WEEK	4+ A WEEK	EVER (%)		
							S	M	F
	tobacco (smoking) ^a	27	7	3	4	57	73	72	73
	e-cigarette (vaping) ^b	91	3	2	1	2	8	10	5
	alcohol ^b	18	27	26	14	14	83	81	82
	nps ^b	85	5	4	1	3	14	17	10
	prescription drugs ^{*c}	75	8	7	3	6	24	24	23
	methadone (prescribed) ^d	96	1	1	0	1	3	3	3
	other substances ^{d,e,f}	89	0	2	3	5	10	8	12

*'Ever' refers to any reported use (i.e. all categories of response except 'never'): calculation based on responses minus missing data. * use not as intended and/or unprescribed use; n=258: a - missing data, n=7, 3%; b - missing data n=4, 2%; c - missing data, n=6, 2.3%; d - missing data, n=3, 1%; e - male: (multiple responses, n=11) - 9 (6%) respondents indicated use of cannabis; 2 (1%) cocaine; f - Female: (multiple responses, n=12): 7 (6%) indicated use of cannabis; 3 (3%) cocaine; 1 (each) ecstasy, 'meth'*

TABLE 29 WHAT CLIENTS TOLD US ABOUT: THEIR RISK BEHAVIOURS	EVER ¹ OVER THE LAST MONTH (%)...			WHAT PROVIDERS TOLD US (%)
	S	M	F	
risky sexual behaviour whilst intoxicated	20	19	20	32
other risky behaviours whilst intoxicated	22	24	17	32
Injected; Shared injecting equipment ²	0	0	0	36

1 - 'Ever' refers to any reported use (i.e. all categories of response except 'never'): calculation based on responses minus missing data. 2 - Separate questionnaire items, presented as combined. Missing data, n=2, 1%.

WHAT CLIENTS REPORTED:

REPORTED HELP RECEIVED FOR SUBSTANCE USE ISSUES

Participants were asked to indicate whether they received any formal help for their reported substance use issues.

55% of the sample reported that they didn't need any help at the time of data collection. **One in ten** (11%) did not receive help, but indicated that it would be of benefit to them.

A quarter (26%) cited receiving help for substance use issues. Of

these, 5% reported receiving help, but felt that they could do with more (accounting for 21% of those who reported receiving help).

One in five (21%) reported that they were receiving adequate support for substance use issues. (Breakdown by area and gender in appendices).

SOURCES OF HELP

56% of cited support was accounted for by GP and homelessness services. **A third**

(33%) of those who reported receiving help did so from homelessness services. A quarter (23%) of those receiving help cited GPs. Homelessness services accounted for 38% of all cited support (top ranked), compared to GPs, which accounted for 23% (rank #2).

A quarter (25%) of respondents cited receiving support from homelessness staff only, and an additional 8% cited GP only (6% GP and homelessness service only).

TABLE 30:
PARTICIPANTS' REPORTED HELP RECEIVED...

	SAMPLE		B. AREA		W. AREA		N. AREA		S. AREA		S.E. AREA	
	N	%	N	%	N	%	N	%	N	%	N	%
Yes, but I would like more support	14	5	7	7	5	6	0	0	2	8	0	0
Yes, I'm getting the support I need	53	21	22	21	21	23	1	5	9	36	0	0
No, I don't need it any help at the minute	141	55	55	52	50	55	14	67	11	44	11	69
No, but it would help me	28	11	12	11	7	8	4	19	0	0	5	31
I was offered but chose not to use it	12	5	5	5	7	8	0	0	0	0	0	0
None was offered	7	3	4	4	1	1	2	10	0	0	0	0
Missing data	3	1							3	1		

● **TABLE 31**

RANK	CITED SOURCES OF HELP	n	%
1	staff member at project	85	100*
2	GP	60	90
3	Addiction services	16	24
4	CPN	15	22
5	Social worker	13	19

% = percentage of those who cited source of help. *All respondents identified homelessness services: of these, 67 individuals had answered, in the previous question, that they were in receipt of formal support for substance issues. In a follow-up question, 85 individuals named (a) source(s) of help (i.e. 15 individuals who indicated that they were not in receipt, nonetheless identified a source of help: all identified staff at a homelessness service).

Addiction services, ranked third, with 24% (n=16) of respondents citing support. One in five cited receiving support from CPN (22%) and social work services (19%).

NOVEL PSYCHOACTIVE SUBSTANCES (NPS)



SUMMARY

PROVIDERS' VIEW

75% of providers surveyed reported an increase in the use of NPS amongst their client groups over the last 2 years up to the point of data collection.

93% of providers in the sample felt that NPS use issues of those who used their services was somewhat (52%) or very different (41%) to that of the general population.

71% of providers indicated that NPS use was an issue amongst their client groups. 9 in 10 (88%) reported experiencing excessive / problematic use of NPS over the last 12 months, with half (48%) reporting frequent problematic use in that period.

8 in 10 reported that NPS use was having some or great effect on the mental (82%) and physical (80%) health of their clients. Three quarters (77%) reported some / great effect on the project environment. 7 in 10 reported some / great effect on staff (70%) and client (68%) safety.

48% had protocols & procedures in place to deal with NPS related issues; 46% did not. Three providers were, at the time of survey, working on protocols (5%).

CLIENTS' VIEW

The number reporting NPS use was relatively lower than reported use of other substances. In the sample, 14% (ranked 4th, behind alcohol, tobacco, and prescription drugs) reported ever using NPS - 4% reported use of 2-3 times a week or more. 17% of males, compared to 10% of females, reported ever using NPS.



NPS

WHAT PROVIDERS REPORTED:

% PROVIDERS:

93 NPS USE ISSUES DIFFERENT FROM GEN. POPULATION

93% of providers in the sample felt that NPS use issues of those who used their services was somewhat (52%) or very different (41%) to that of the general population.

TABLE 32. % PROVIDERS: NPS USE ISSUES DIFFERS TO GEN. POP. (BY AREA)

B	96	SE	75
W	95	N	100
S	83		

Providers were asked how frequently certain behaviours occurred in the last 12 months, amongst their client groups, as a result of NPS related activity (see table 33, right. Additional data in Appendix 7).

75

Providers who reported an increase in the use of NPS amongst their client groups over the last 2 years

TABLE 33: DUE TO / WHILST USING NPS...

NO. TIMES IN LAST 12 M (%)

	never	1-2	3-5	5+	EVER
RISK BEHAVIOURS					
erratic / risky behaviours	14	13	30	43	86
increased antisocial behaviour	16	14	34	36	84
risky sexual activity	18	18	38	27	82
increased nps related activity in hostel	25	13	32	30	75
increased rough sleeping	36	30	27	7	64
increase injecting	36	27	29	9	64
increased criminal activity	27	11	38	25	73
increased street activity ¹	39	21	30	9	61
increase needle sharing	45	46	5	4	55
INCREASED AGGRESSION					
aggressive behaviour generally	20	13	36	32	80
in service / project setting	23	11	41	25	77
HEALTH PROBLEMS					
mental health	14	5	36	45	86
physical health	16	13	39	32	84
OTHER ISSUES					
less engagement with services	18	13	41	29	82
episodes of hospitalisation	21	25	43	11	79
calls to police / police interventions	18	16	32	34	82
eviction / prevented from using service	23	23	43	11	77
emergency visits to a&e	27	9	41	23	73
client withdrew / terminated service	29	13	43	16	71
ambulance calls / 999	29	7	38	27	71

¹e.g. begging, drinking, etc. 'ever' = any reported use (i.e. all categories of response except 'never');



WHAT PROVIDERS REPORTED: THE EFFECTS OF CLIENTS' NPS USE

TABLE 34: THE EFFECT OF NPS USE ON (%)...

	NO EFFECT	VERY LITTLE EFFECT	SOME EFFECT	A GREAT EFFECT	SOME/GREAT EFFECT	RANK
Mental health of client	14	4	11	71	82	1
Physical health of client	14	5	27	54	80	2
service / project environment	16	7	36	41	77	3
staff safety	13	18	41	29	70	4
client safety	16	16	39	29	68	5
service delivery	16	21	34	29	63	6

PROTOCOLS TO DEAL WITH NPS

48% had protocols & procedures in place to deal with NPS; 46% did not. Three providers were, at the time of survey, working on protocols (5%).

TABLE 35: % WHO REPORTED...

	NI	B	W	S	SE	N
Yes	48	44	47	50	25	100
No, but we're working on these	5	9	5	0	0	0
No, not currently	46	48	47	50	75	0

% = % providers in that area

there are very few of our service users who take legal highs (sic), but a small number do and we have seen a **VAST DETERIORATION IN THEIR PHYSICAL AND MENTAL HEALTH**

it is **VERY DIFFICULT TO GET PEOPLE TO ENGAGE** while under the influence of these substances

severe behaviour changes, **ERRATIC BEHAVIOUR...** listlessness... **AGGRESSIVE, ANTISOCIAL** behaviour

increased challenging & unpredictable behaviour...

INCREASED RISK OF SAFETY TO CLIENTS AND STAFF



NPS use has led to **CHAOS IN PEOPLE'S LIVES**, very erratic [sic] and risky behaviour, **CHALLENGING BEHAVIOUR**

STAFF NOT TRAINED to deal with this use as it's constantly evolving

NPS use has had a massive impact on their health...they become very **WITHDRAWN...HARD TO GET THEM TO ENGAGE** with services

aggressive and challenging behaviour more prevalent in hostel...**STAFF NEED MORE TRAINING** as to how to deal with this new area of need"

IMPACT ON BEHAVIOUR AND MENTAL ILL HEALTH is dramatic [sic] and hard to manage

THE IMPACT OF YOUNG PEOPLE USING NPS IS SIGNIFICANT...on staff ...on levels of monitoring...and ambulance / police contact needed to support them.

erratic and aggressive behaviour...and **RISK TO STAFF** needs to be considered by services when we are carrying out risk assessments



PROCEDURES & PROTOCOLS

Providers were asked whether they conduct a Health needs Assessment with clients; whether they register them with primary health services; and whether they provided health projects in partnership with other organisations. A summary of these findings are provided below (additional data in appendices).

TABLE 36: DO YOU CONDUCT A HEALTH NEEDS ASSESSMENT WITH YOUR CLIENTS? (%)

% = % of area (n=56)	NI	B	W	S	SE	N
yes, as part of application	16	17	11	17	50	0
yes, part of support planning	54	52	58	33	25	100
yes, as part of induction	9	9	5	17	25	0
more than one of these	18	17	21	33	0	0
no assessment made	2	4	0	0	0	0
missing data	2	0	5	0	0	0

TABLE 37: DO YOU ENSURE CLIENTS ARE REGISTERED WITH (%)...

% = % of area (n=56)	NI	B	W	S	SE	N
GP	93	91	89	100	100	100
Dentist	93	91	89	100	100	100
Other service	73	65	68	83	100	100

TABLE 38: HAVE YOU PROVIDED HEALTH PROJECTS (LAST 18M) IN PARTNERSHIP WITH (%)...

	NI	B	W	S	SE	N
Health & Social Care organisations ¹	25	17	37	33	25	0
Community based initiatives ²	50	52	37	50	50	100

% = % of area (n=56); 1: e.g. Trust, Hospital, GP, Pharmacist, etc; 2: combined category - includes service user groups, local community groups, and other C&V providers.

71 % providers who thought there were gaps in health related services

TABLE 39: BARRIERS TO HEALTHCARE (LAST 12M, %)

	NI	B	W	S	SE	N
lack of services suitable to the needs of clients	54	52	58	67	75	0
issues with waiting times	73	70	68	100	100	50
barriers to access of existing services	70	70	74	67	75	50
issues with referral pathways / protocols	54	57	53	67	75	0
mismatch between client needs and service we can offer on referral	52	57	53	50	75	0
need for a service / services that currently not available	64	74	47	50	75	100

Missing data n=2



TABLE 40

<i>% of respondents (n=56, missing data, n=1, 2%)</i>	SIGNPOST / REFER	PROVIDE DIRECTLY	YES (TOT)	NOT OFFERED
Eye health / optician	82	5	88	11
Counselling / therapy	77	9	86	13
Sexual health & contraceptive services	73	11	84	14
Psychiatric services	80	4	84	14
Specialist alcohol	79	5	84	14
Mental health specialist	79	4	82	16
Self help groups	68	13	80	18
Specialist addictions	73	5	79	20
Community based nursing	75	0	75	18
Maternity related support	73	2	75	23
Detox	73	2	75	23
Occupational therapy	68	4	72	27
Residential rehab	71	0	71	27
Dietetics/nutritionist	68	2	70	29
Vaccinations / Flu jab	59	5	64	34
Physiotherapy	57	2	59	39
Podiatry	52	5	57	41
Community prescribing	55	2	57	41
Substitute prescribing	57	0	57	41
Geriatric / older people services	54	0	54	45
Homeless multidisciplinary support team	50	4	54	45
Cervical smear / screening	45	2	46	52
Mammogram / breast exams / screening	43	2	45	54
other	13	4	16	82

TABLE 41

<i>% of respondents (n=56, missing data, n=1, 2%)</i>	SIGNPOST / REFER	PROVIDE DIRECTLY	YES (TOT)	NOT OFFERED
exercise programmes / improving fitness	43	43	86	13
Mental health / well being	14	71	86	13
Drop-in (health related)	43	41	84	14
improving diet / nutrition / cooking	45	39	84	14
Health checks / MOTs	59	25	84	14
service user groups	70	13	82	16
NPS awareness	54	25	79	20
Oral health	43	34	77	21
alcohol awareness	55	20	75	23
substance use awareness	64	9	73	25
prescription drug use	61	11	71	27
End of life care	25	46	71	27
Social support	50	20	70	29
Suicide / self harm awareness	57	13	70	29
Counselling / therapy	34	2	36	63
Other	7	2	9	89

CHILDREN: PROVIDER'S VIEW



CLIENTS TOLD US...

94% of clients (n=46) who had children staying with them reported that they were in good health, 28% that their health had worsened since being homeless.

PROVIDERS TOLD US...

21 providers (37.5% of the total sample) offered services to children. 76% of providers reported that the overall health of the children they supported was somewhat (67%) or very different (9.5%) to that of children in the general population.

PHYSICAL HEALTH

90% of providers thought that there were differences in the physical health of children who use their services, compared to children in the general population. The top three cited issues were missing meals regularly (67%, #1), lack of exercise / fitness issues (52%, #2); low birth weights; (38%, #3).

OTHER HEALTH / LIFESTYLE

90% of providers felt that there were differences between their child clients and the general population in other aspects of health and well-being. The top 3 cited issues were: problems at school; behavioural problems generally (76%, each #1); being bullied (67%, #2); missing school; aggression; lack of fitness (62% each, #3).

MENTAL HEALTH

90% of providers thought there were differences in the mental health of children who use their services, compared to the general population. The top three cited issues were: behavioural problems (90%, #1); social isolation / withdrawal (81%, #2); Sleep problems (71%, #3). More than half (52%) reported that the children they support had complex / multiple needs.

SUBSTANCE USE

38% felt there were differences in substance use issues. Half reported issues with NPS; prescription medication (48% each). 4 in 10 (43%) cited alcohol issues; and a third (33%) cited other substances. Half of all providers reported that they'd seen an increase in NPS use amongst those under 18 years of age, during the last two years. At the time of survey, 3 in 10 had protocols in place to deal with NPS activity.



CHILDREN

PROVIDERS WHO SUPPORTED CHILDREN

21 providers (37.5% of the total sample) offered services to children. These providers consisted of those that specialised in provision to children and young people, and those that provided family targeted services.

TABLE 42. PROVIDERS CATERING FOR CHILDREN BY AREA: % SAMPLE (%AREA)

B	16 (39)	SE	4 (50)
W	16 (47)	S	2 (17)

These providers were asked about aspects of their physical, mental health and well-being, and about substance use issues (including NPS), and whether these differed from children in the general population.

WHAT PROVIDERS REPORTED: CHILDREN'S HEALTH

% PROVIDERS:

76

CHILDREN'S HEALTH DIFFERS FROM CHILDREN IN GENERAL POPULATION

76% of providers in the sample felt that the health of children who used their services was somewhat (67%) or very different (9.5%) to that of children in the general population.

TABLE 43. % PROVIDERS: CHILDREN'S HEALTH DIFFERS TO CHILDREN IN THE GENERAL POPULATION (BY AREA)

B	56	SE	100
W	89	S	100



% PROVIDERS: CHILDREN

90 **PHYSICAL HEALTH DIFFERENT FROM CHILDREN IN GENERAL POPULATION**

TABLE 44

% PROVIDERS: CHILDREN'S MENTAL HEALTH DIFFERS TO GEN. POP. (BY AREA)			
B	89	SE	100
W	89	S	100

TABLE 46

TABLE 46. % PROVIDERS: CHILDREN (n=21):

TOP REPORTED PHYSICAL HEALTH ISSUES

- 67** **MISSING MEALS REGULARLY** (N=14)
- 52** **LACK OF EXERCISE** (N=11)
- 38** **LOW BIRTH WEIGHTS** (N=8)
- 33** **DENTAL HEALTH; NUTRITION / POOR DIET** (N=7 each)
- 24** **DISABILITIES; DEVELOPMENTAL DELAYS** (N=5 each)
- 14** **PREMATURE BIRTH; ACCESS TO VACCINATIONS; IMMUNISATIONS NOT UP TO DATE** (N=3 each)

TOP CITED ISSUES (BY AREA)

TABLE 45

BELFAST (n=9)			SOUTH EASTERN (n=2)		
RANK		%	RANK		%
1	lack of exercise	44	1	Disabilities	100
1	missing meals regularly	44	1	Low birth weights	100
3	Dental health	33	1	lack of exercise	100
4	Low birth weights	22	1	missing meals regularly	100
4	Nutrition / poor diet	22			
WESTERN (n=9)			SOUTHERN (n=1)		
RANK		%	RANK		%
1	missing meals regularly	78	1	Disabilities	100
2	Nutrition / poor diet	56	1	Low birth weights	100
3	Dental problems	44	1	lack of exercise	100
3	Developmental delays	44	1	missing meals regularly	100
3	Lack of exercise	44			

% = percentage of providers (with children) from area that cited listed issue. Data is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.



% PROVIDERS: CHILDREN

90 MENTAL HEALTH DIFFERENT FROM CHILDREN IN GENERAL POPULATION

TABLE 47

% PROVIDERS: CHILDREN'S MENTAL HEALTH DIFFERS TO TO CHILDREN IN GENERAL POPULATION (BY AREA)			
B	78	SE	100
W	100	S	100

TABLE 48

TABLE 48. % PROVIDERS: CHILDREN (n=21):

TOP REPORTED MENTAL HEALTH ISSUES (SAMPLE)

- 90** BEHAVIOURAL PROBLEMS (n=19)

- 81** SOCIAL ISOLATION/WITHDRAWAL (n=17)

- 71** SLEEP PROBLEMS (n=15)

- 67** ANXIETY (n=14)

- 62** PROBLEMS MAKING FRIENDS (n=13)

- 52** SELF HARM; SUICIDAL THOUGHTS & BEHAVIOURS; ANTI-SOCIAL BEHAVIOURS; EATING DISORDERS; COMPLEX / MULTIPLE NEEDS; (n=11 each)

- 48** DEPRESSION (n=10)

- 38** PERSONALITY DISORDERS (n=8)

- 29** SCHIZOPHRENIA (n=6)

TABLE 49

TOP CITED ISSUES (BY AREA)

BELFAST (n=9)

RANK		%
1	behavioural problems	78
2	sleep problems	67
2	social isolation/withdrawal	67
4	Anxiety	36
5	problems making friends	33
5	complex / multiple needs	33

SOUTH EASTERN (n=2)

RANK		%
1	Provider indicated children they provide for experience all mental health issues listed in table xx, right.	100

WESTERN (n=9)

RANK		%
1	behavioural problems	100
2	social isolation/withdrawal	89
3	problems making friends	78
4	Anxiety; self harm; eating disorders; suicidal thought & behaviour; ASB; sleep problems	44

SOUTHERN (n=1)

RANK		%
1	Provider indicated children they provide for experience all mental health issues listed in table xx, right.	100

% = percentage of providers (with children) from area that cited listed issue. Data is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.



% PROVIDERS: CHILDREN

90 OTHER AREAS OF HEALTH & WELLBEING DIFFERENT FROM CHILDREN IN GENERAL POPULATION

TABLE 50

% PROVIDERS: CHILDREN'S HEALTH & WELLBEING DIFFERS TO CHILDREN IN GENERAL POPULATION (BY AREA)

B	78	SE	100
W	100	S	100

TABLE 51

TABLE 51. % PROVIDERS: CHILDREN (n=21):

TOP REPORTED WELLBEING ISSUES (SAMPLE)

- 76** **PROBLEMS AT SCHOOL; BEHAVIOURAL PROBLEMS** (n=16 each)

- 67** **BEING BULLIED** (n=14)

- 62** **TRUANCY / MISSING SCHOOL; AGGRESSION; LACK OF EXERCISE / FITNESS** (n=13)

- 48** **ENGAGED IN RISKY SEXUAL BEHAVIOURS** (n=10)

- 43** **SPECIAL EDUCATION NEEDS / EDUCATIONAL STATEMENT; LGBT HEALTH ISSUES; ENGAGED IN OTHER RISK BEHAVIOURS** (n=9 each)

TABLE 52

TOP CITED ISSUES (BY AREA)

BELFAST (n=9)

RANK		%
1	problems at school	67
2	behavioural problems	56
3	truancy/missing school; SEN/Ed. Statement; being bullied; lack of exercise / fitness	44

WESTERN (n=9)

RANK		%
1	behavioural problems	89
2	problems at school	78
2	Aggression	78
2	being bullied	78
5	truancy/missing school; lack of exercise / fitness	67

SOUTH EASTERN (n=2)

RANK		%
1	Provider indicated children they provide for experience all health & well-being issues listed in table xx, right.	100

SOUTHERN (n=1)

RANK		%
1	Provider indicated children they provide for experience all mental health issues listed in table xx, right.	100

% = percentage of providers (with children) from area that cited listed issue. Data is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.



PROVIDERS: HOW OFTEN DID YOUR CLIENTS...

Providers were asked, thinking about their clients who were children, to indicate how often the following events occurred in the last 12 months. (Additional data are available in the appendices).

● **TABLE 53: HOW OFTEN IN THE LAST 12M...**

	NEVER		1-2 TIMES		3-5 TIMES		6+ TIMES		(%) EVER* (N=21)
	N	%	N	%	N	%	N	%	
Emergency visits to A&E	0	0	11	52	7	33	2	10	95
Ambulance calls / 999	0	0	8	38	9	43	3	14	95
Emergency hospital admission	0	0	7	33	12	57	1	5	95
Emergency psychiatric admission	0	0	5	24	8	38	7	33	95
Refused registration with GP	0	0	1	5	7	33	12	57	95
Refused registration with dentist	0	0	0	0	10	48	10	48	95
missed key vaccinations	0	0	5	24	10	48	5	24	95
excluded from school	0	0	9	43	5	24	6	29	95
missed school due to illness	0	0	11	52	7	33	2	10	95
Miss a meal regularly	1	5	9	43	7	33	3	14	91
problems at school	1	5	10	48	9	43	0	0	91
taking any regular medicines	2	10	9	43	8	38	1	5	86
truant from school	2	10	5	24	8	38	5	24	86

("Ever" refers to any occurrence over the period). Missing data, n=1

● **TABLE 54: HOW OFTEN IN THE LAST 12M...**

	NEVER		1-2 TIMES		3-5 TIMES		6+ TIMES		(%) EVER* (N=21)
	N	%	N	%	N	%	N	%	
Engage in rough sleeping	0		4	19	3	14	13	62	95
Engage in use of other substances	1	5	5	24	5	24	9	43	91
Engage in excessive alcohol consumption	2	10	0	0	9	43	9	43	86
Engage in use of legal highs	2	10	4	19	5	24	9	43	86
use of prescription medication ²	2	10	0	0	8	38	10	48	86
Engage in street activity ¹	2	10	0	0	5	24	13	62	86

"Ever" refers to any occurrence over the period(i.e. cumulative % excluding 'never'). Missing data, n=1. 1: e.g. begging, drinking, etc.; 2: other than as prescribed / intended



% PROVIDERS: CHILDREN

38

SUBSTANCE USE ISSUES DIFFERENT FROM CHILDREN IN GENERAL POPULATION

TABLE 55

% PROVIDERS: CHILDREN'S SUBSTANCE USE ISSUES DIFFER TO CHILDREN IN GENERAL POPULATION (BY AREA)

B	24	SE	0
W	14	S	0

TABLE 56

TABLE 56. % PROVIDERS: CHILDREN (n=21):

TOP REPORTED SUBSTANCE USE ISSUES (SAMPLE)

- 48** NPS; PRESCRIPTION MEDICATION* (n=10 each)
- 43** ALCOHOL (n=9)
- 33** OTHER SUBSTANCES** (n=7)

*use other than prescribed / intended. ** Three respondents then cited substances: aerosols; cannabis and related; cocaine; and Subutex

TABLE 57

TOP CITED ISSUES (BY AREA)

BELFAST (n=9)			SOUTH EASTERN (n=2)		
RANK		%	RANK		%
1	NPS	22	1	NPS	100
1	prescription medication*	22	1	prescription medication*	100
1	Alcohol	22	1	Alcohol	100
1	Other substances**	22	1	Other substances**	100

WESTERN (n=9)			SOUTHERN (n=1)		
RANK		%	RANK		%
1	NPS	56	1	NPS	100
1	prescription medication*	56	1	prescription medication*	100
3	Alcohol	44	1	Alcohol	100
4	Other substances**	22	1	Other substances**	100

*Use other than prescribed / intended. **No additional data supplied (except, n=1, W). % = percentage of providers (with children) from area that cited listed issue. Data is demarcated nominally at a trust level, i.e. does not represent data collected from trusts - no trust / trust service participated in this study. Additional data available in appendices.



48

Providers who reported an increase in the use of NPS amongst their children client groups over the last 2 years

TABLE 58

% PROVIDERS: INCREASE IN CHILDREN'S NPS USE OVER LAST 2Y (BY AREA)

B	33	SE	100
W	44	S	100

TABLE 59

DUE TO / WHILST USING NPS...

NO. TIMES IN LAST 12 M (%)

	never	1-2	3-5	5+	EVER
RISK BEHAVIOURS					
erratic / risky behaviours	14	0	33	48	81
increased antisocial behaviour	10	0	43	43	86
risky sexual activity	14	0	33	48	81
increased nps related activity in hostel	5	0	43	48	91
increased rough sleeping	5	19	10	62	91
increase injecting	0	0	29	67	95
increased criminal activity	10	5	29	52	86
increased street activity ¹	0	10	24	62	95
increase needle sharing	0	0	29	67	95
INCREASED AGGRESSION					
aggressive behaviour generally	5	5	33	52	91
aggressive behaviour to clients	5	5	43	43	91
aggressive behaviour to staff	5	5	43	43	91
HEALTH PROBLEMS					
mental health	14	10	29	43	81
physical health	10	5	38	43	86
OTHER ISSUES					
less engagement with services	10	10	33	43	86
episodes of hospitalisation	0	14	33	48	95
calls to police / police interventions	0	10	43	43	95
eviction / prevented from using service	5	5	33	52	91
emergency visits to a&e	0	14	33	48	95
client withdrew / terminated service	0	14	29	52	95
ambulance calls / 999	0	5	38	52	95
service not equipped to deal with NPS use	5	10	29	52	91

¹e.g. begging, drinking, etc. 'ever' = any reported use (i.e. all categories of response except 'never')

WHAT PROVIDERS REPORTED: THE EFFECTS OF CLIENTS' NPS USE

TABLE 60: EFFECT OF NPS USE ON (%)

	NO EFFECT	VERY LITTLE EFFECT	SOME EFFECT	GREAT EFFECT	SOME / GREAT EFFECT	RANK
staff safety	5	33	14	43	57	1
client safety	5	33	19	38	57	1
service delivery	10	33	0	52	52	3
service/project environment	19	29	5	43	48	4
Mental health of client	19	33	0	43	43	5
Physical health of client	10	43	0	43	43	5

PROTOCOLS TO DEAL WITH NPS

29% had protocols & procedures in place to deal with NPS amongst children; 57% did not. Two providers were, at the time of survey, working on protocols (10%).

TABLE 61: % WHO REPORTED...

	NI	B	W	S	SE
Yes	29	33	33	0	0
No, we're working on these	10	11	11	0	0
No, not currently	57	56	44	17	100
Missing data	4.8	0	11.1	0	0

% = % providers in that area



Providers were asked whether they conduct a Health needs Assessment with clients who are children; whether they register them with primary health services; and whether they provided health projects in partnership with other organisations. A summary of these findings are provided below (additional data in appendices).

TABLE 62: DO YOU CONDUCT A HEALTH NEEDS ASSESSMENT WITH YOUR (CHILDREN)

% = % of area; missing data n=1 (W)	NI	B	W	S	SE
	%	%	%	%	%
yes, as part of application	33	33	11	17	100
yes, as part of support planning	38	44	44	0	0
yes, as part of induction	10	11	11	0	0
Other or more than one of these	10	0	22	0	0
No assessment made	5	11	0	0	0

TABLE 63: DO YOU ENSURE THEY ARE REGISTERED WITH ANY OF THE FOLLOWING SERVICES?

% = % of area	NI	B	W	S	SE
	%	%	%	%	%
GP	95	100	89	100	100
Dentist	95	100	89	100	100
Other service	62	56	56	100	100

TABLE 64: OVER THE LAST 18 MONTHS, HAVE YOU PROVIDED HEALTH PROJECTS IN PARTNERSHIP WITH...

% = % of area; 1: e.g. Trust, Hospital, GP, Pharmacist, etc	NI	B	W	S	SE
	%	%	%	%	%
Health & Social Care ¹	29	11	22	100	100
community group	38	33	22	100	100
service user groups	33	22	22	100	100
community & voluntary sector	52	44	44	100	100

48 % providers who thought there were gaps in health related services for children

TABLE 65: BARRIERS EXPERIENCED OVER THE LAST 18 MONTHS

% = % of area	NI	B	W	S	SE
	%	%	%	%	%
issues with children transitioning from child to adult services	48	33	44	100	100
lack of services suitable to the needs of children	43	22	44	100	100
issues with waiting times	62	44	67	100	100
barriers to access of existing services	57	44	56	100	100
issues with referral pathways / protocols	57	44	56	100	100
mismatch between child's health needs and service we can offer on referral	43	22	44	100	100
need for a service / services that currently not available	43	33	33	100	100
external pressures to offer our services to children	29	11	22	100	100



APPENDICES



APPENDIX 1

LIST OF SERVICES IN NI

KEY

B = projects located within boundary of Belfast Health Trust area;

W = those in Western Trust Area;

S = Southern Trust Area;

SE = S.Eastern Trust Area;

N = Northern Trust Area.

(Note: no trust area or service participated in this study. Please note NIHE boundaries differ from Trust areas. Data extracted from NIHE

data and allocated to nominal Trust area based on project location).

Following denominations based on categories within SPOCCNET. All data, SPOCCNET:

ABS = accommodation based service;

ABS&O = Accommodation based with floating / resettlement / outreach support;

FS = floating support

service provides for...

C = ...those with complex needs;

S = ...single homeless with support needs;

F = ...family homeless with support needs;

Y = ...young people and/or care leavers;

O = ...offenders;

A&D = ...alcohol and other drugs;

DV = ...domestic violence;

E = ...elderly;

T = ...traveller;

ALL= ...all categories

NORTHERN

PROVIDER

AREA

TYPE

CAPACITY

Barnardos	Ballymena	ABS	C, Y	5
Causeway Womens Aid	Coleraine	ABS	DV	10
Cithrah Foundation	Carrickfergus	ABS	DV	5
Larne Community Care Centre	Larne	ABS	F,S	4
Living Rivers Trust	Ballymena	ABS	A&D, S	20
Mid Ulster South Tyrone Assocn	Cookstown	ABS	C, S, O	20
Mid Ulster Women's Aid	Cookstown	ABS&O	DV	9
NIHE	Ballymena	ABS	F	11
NIHE	Coleraine	ABS	F	5
NIHE	Antrim	ABS	F	3
NIHE	Newtownabbey	ABS	F	8
NIHE	Newtownabbey	ABS	F	5
NIHE	Carrickfergus	ABS	F	10
Simon Community	Larne	ABS	C, S	18
Simon Community	Coleraine	ABS	C,S	12
Simon Community	Ballymena	ABS	C,S	18
Simon Community	Portadown	ABS	S,O	20
Simon Community	Coleraine	ABS&O	S	15
Womens Aid ABCLN*	Ballymena**	ABS	DV	6
Womens Aid ABCLN*	Ballymena**	ABS	DV	12

ABS: 192

ABS&O: 24

ABS&O: 508

All offer low-medium support, with exception of Lighthouse (med-high).

*ABCLN = Antrim, Ballymena, Carrickfergus, Larne, Newtownabbey

**areas covered: Antrim, Ballymena, Carrickfergus, Larne, and Newtownabbey.



BELFAST

PROVIDER	AREA	TYPE	CAPACITY
Apex Housing Association	Springwell House	ABS A&D	27
Ark Housing Association	Moyard House	ABS C, F	16
Ark Housing Association	Roseville House	ABS F	24
Barnardos	Leaving Care Service	ABS C, Y	10
Belfast and Lisburn Womens Aid	Refuge	ABS&O DV	45
Choice Housing Ireland Limited	Inverary House	ABS A&D,S	12
Council for Social Witness	Grays Court	ABS A&D	7
Council for Social Witness	Thompson House	ABS O	19
Depaul Northern Ireland	Cloverhill	ABS F	18
Depaul Northern Ireland	Mater Dei	ABS F	13
Depaul Northern Ireland	Stella Maris	ABS A&D	23
East Belfast Mission	Hosford House	ABS S	26
Extern Northern Ireland	Innis Centre	ABS O	20
Extern Northern Ireland	The Ormeau Centre	ABS O	36
First Housing Aid & Support Services	Ardmoulin	ABS F	21
Legion Of Mary	Regina Ceoli House	ABS S	20
Legion of Mary	Morning Star House	ABS A&D	38
Life Housing Northern Ireland	Life House	ABS C, Y	6
MACS Supporting Young People	Care Leaver Supp. Housing	ABS C, Y	18
NIHE	Grainne House	ABS F	20
NIHE	Templemore House	ABS F	8
N. Belfast Housing Association Ltd.	Flax Foyer	ABS C, Y	37
NIID	Utility Street Men's Hostel	ABS S	59
Queens's Quarter Housing	University Area	ABS ALL	70
Rosemount House Limited	Rosemount House	ABS A&D	20
Simon Community	Saintfield Road	ABS C, S	21
Simon Community	Antrim Rd	ABS C, Y	10
Simon Community	Malone Road	ABS C, Y	42
Simon Community	Falls Road	ABS C, S	21
Simon Community	Cliftonville Avenue	ABS C, S	20
Simon Community	Conway Court	ABS&O F	24
The Salvation Army	Centenary House / Calder	ABS S	101
The Salvation Army	Glen Alva Family Centre	ABS F	20
The Salvation Army	Grosvenor House	ABS F, DV	17
The Salvation Army	Thorndale Family Centre	ABS F	38
Welcome Organisation	Annsagate	ABS RS	6
Welcome Organisation	Divis Crisis	ABS ALL	4

ABS: 925
 ABS&O: 95
 ABS&O: 860



ABS: 388
 ABS&O: 87
 ABS&O: 600

WESTERN

PROVIDER	AREA	TYPE		CAPACITY
Action For Children	Enniskillen	ABS	C,Y	15
Action For Children	Enniskillen	ABS	C,Y	13
Apex Housing Association	Derry	ABS	A&D, RS	14
Apex Housing Association	Derry	ABS	A&D	24
Apex Housing Association	Derry	ABS	C,Y	48
Belfast Central Mission	Derry	ABS	C,Y	5
Choice Housing Ireland Ltd	Strabane	ABS	S	8
Choice Housing Ireland Ltd	Strabane	ABS	A&D, S	10
Choice Housing Ireland Ltd	Strabane	ABS	S	10
Clarendon Shelter Ltd	Derry	ABS	F	18
Depaul Northern Ireland	Derry	OTH	A&D	-
Extern Northern Ireland	Strabane	ABS	O	14
Fermanagh Women's Aid	Enniskillen	ABS	DV	3
FHA&SS*	Derry	ABS	A&D	12
FHA&SS	Derry	ABS	C,Y	8
FHA&SS	Derry	ABS	C,Y	20
FHA&SS	Derry	ABS	A&D	8
FHA&SS	Strabane	ABS	F	7
FHA&SS	Derry	ABS	C,Y	16
Fold HA	Omagh	ABS	T	5
Fold HA	Omagh	ABS	T	8
Foyle Women's Aid	Derry	ABS&O	DV	15
Foyle Women's Aid	Derry	ABS&O	DV	9
NIHE	Derry	ABS	F	5
NIHE	Enniskillen	ABS&O	F,S	30
NIHE	Derry	ABS	F	10
NIHE	Derry	ABS	F	9
NIHE	Derry	ABS	F	8
North West Methodist Mission	Derry	ABS	S	49
Omagh Womens Aid	Omagh	ABS	DV	6
Praxis Care Group	Derry	ABS	C,Y	4
Shelter (NI) Ltd.	Omagh	ABS	C,Y	21
Simon Community	Derry	ABS&O	C,O,S	33



SOUTHERN

PROVIDER	AREA	TYPE		CAPACITY
Belfast Central Mission	Dungannon	ABS	C,Y	4
Cuan Mhuire (NI) Ltd.	Newry	ABS	A&D	50
Depaul Northern Ireland	Dungannon	ABS	S	22
MACS Supporting Young People	Downpatrick	ABS	C,Y	8
MACS Supporting Young People	Newry	ABS	C,Y	7
NIHE	Downpatrick	ABS	S	5
Simon Community	Downpatrick	ABS	C,S	8
Simon Community	Newry	ABS	C,S	17
Simon Community	Craigavon	ABS	S	9
Simon Community	Armagh	ABS	S	29
Women's Aid Armagh Down Ltd	Newry	ABS&O	DV	11

ABS: 159
 ABS&O: 11
 ABS&O: 187

SOUTH EASTERN

PROVIDER	AREA	TYPE		CAPACITY
Belfast Central Mission	Bangor	ABS	C,Y	5
MACS Supporting Young People	Downpatrick	ABS	C,Y	8
MACS Supporting Young People	Downpatrick	ABS	C,Y	9
NIHE	Newtownards	ABS	F	5
NIHE	Downpatrick	ABS	F	5
North Down & Ards Womens Aid	North Down	ABS&O	DV	7
Simon Community	Lisburn	ABS	C,S	30
Simon Community	Bangor	ABS	C,S	25
Simon Community	Downpatrick	ABS	C,S	8

ABS: 95
 ABS&O: 7
 ABS&O: 187



	ACCOMMODATION SERVICES		FLOATING SUPPORT SERVICES		
	NO OF SERVICES	NO OF UNITS	NO OF SERVICES	NO OF UNITS	
NORTH 51 services 1492 units	Young Homeless	7	111	1	40
	Domestic Violence	6	57	3	348
	Single Homeless	13	208	2	454
	Homeless Families	12	94	2	80
	Addictions	3	50	1	40
	generic	1	10	0	0
	Total	42	530	9	962
SOUTH 54 Services 1832 units	Young Homeless	5	45	7	369
	Domestic Violence	6	48	5	395
	Single Homeless	11	206	2	160
	Homeless Families	5	28	5	426
	Addictions	3	73	2	18
	Generic	0	0	3	64
Total	30	400	24	1,432	
BELFAST 52 services 2209 units	Young Homeless	5	76	2	81
	Domestic Violence	2	33	1	420
	Single Homeless	15	387	4	487
	Homeless Families	10	201	0	0
	Addictions	5	115	2	91
	Offenders	4	89	2	229
Total	41	901	11	1,308	
TOTAL 157 services, 5533 units	113	1831	44	3702	

ADDITIONAL ACCOMMODATION SERVICES		
	NO OF SERVICES	NO OF UNITS
NIHE Hostels	18	151
Single lets*	circa 1141	57
<i>*As of July 2016. NIHE has the discretion to use B&B/hotel accomm. in exceptional circumstances and for short durations in response to crisis</i>		
PLACEMENTS IN TEMP. ACCOMMODATION		
2012-13	2911	
2013 Apr-Aug	1209	
2014 Sep-Mar	1780	2989*
2014-15	2817	
2015-16	2890	
<i>*Data was migrated from the TAABBS computer system to HMS computer system mid-year 2013/14 - data is therefore taken from both systems.</i>		
AVERAGE STAY (WEEKS) IN TEMP. ACCOMMODATION 2015/16		
Private Single Lets		52.6
Leased Property		14.4
Voluntary Sector Hostels		38
Housing Executive Hostels		22.4
Non Standard B&B Hostels		4.6
All Sectors		37.7
FINANCIAL INVESTMENT IN HOMELESSNESS £M		
	2014-15	2015-16
Temporary Accommod	25	24.3
Homelessness Services	1.3	1.4
Voluntary Sector Funding	2.1	2.2
Supporting People	6.4	6.4
Leased Properties	0.956	0.956
Priv. Rent Sector Access Scheme	0.114	0.36
Total	35.9	35.6



APPENDIX 2

HOMELESSNESS STATISTICS

Quarterly bulletins and an annual compendium of housing statistics can be found on the Department for Communities website, <https://www.communities-ni.gov.uk/topics/housing-statistics>. The next edition of the NI Housing Statistics annual publication is due for release Winter 2017. Below is a summary of statistics, as presented in NIHE's homelessness strategy for 2017-22, (www.nihe.gov.uk/draft_homelessness_strategy_2017_22.pdf, Appendix 2).

PRESENTERS BY REASON

	REASON															total
	sharing breakdown / family dispute	marital / relationship breakdown	domestic violence	loss of rented accomm	no accomm in ni	intimidation	accomm not reasonable	release from hospital / prison / other institution	fire/flood other emergency	mortgage default	bomb / fire damage / civil disturbance	n'hood harassment	other reason	no data		
2012-13	3,733	1,921	855	2,617	1,513	584	3,069	415	81	509	37	1,140	732	2,148	19,354	
2013-14	3,549	1,789	831	2,568	1,399	666	3,173	449	62	421	29	1,142	701	2,083	18,862	
2014-15	3,891	1,849	956	2,841	1,458	590	3,663	471	84	387	27	1,516	791	1,097	19,621	
2015-16	3,671	1,531	845	2,480	1,212	544	3,922	431	93	216	36	1,357	638	1,652	18,628	

PRESENTERS BY HOUSEHOLD

	SINGLE MALE				SINGLE FEMALE				COUPLE	FAMILY	PENSIONER	UNDEFINED	TOTAL
	16-17	18-25	26-59	TOT	16-17	18-25	26-59	TOT					
2012-13	196	2122	4650	6968	218	1653	1789	3660	830	6019	1875	2	19354
2013-14	162	2027	4588	6777	179	1408	1792	3379	868	5870	1968	0	18862
2014-15	185	2013	4663	6861	176	1436	1934	3546	874	6194	2146	0	19621
2015-16	139	1868	4336	6343	160	1388	1822	3370	794	5887	2234	0	18628

PRESENTERS TOP THREE REASONS

REASON (%)	accomm not reasonable	family / sharing breakdown	loss of rented accommodation
2012-13	15.8	19.3	13.5
2013-14	16.8	18.8	13.6
2014-15	18.7	19.8	14.4
2015-16	21.0	19.7	13.3



APPENDIX 3

ADDITIONAL DEMOGRAPHIC AND HOMELESSNESS DATA

Please note: Trust level demarcation nominal only.

BREAKDOWN OF CLIENT RESPONSES BY AREA		
BY AREA	N	%
Belfast	105	40.7
Western	91	35.3
Northern	21	8.1
Southern	25	9.7
South Eastern	16	6.2
NI	258	100

BREAKDOWN OF CLIENT RESPONSES BY GENDER & AREA												
	NI	%	B	%	S	%	SE	%	N	%	W	%
Male	148	57.4	59	56.2	15	60	6	37.5	12	57.1	56	61.5
Female	110	42.6	46	43.8	10	40	10	62.5	9	42.9	35	38.5
Total	258		105		25		16		21		91	
% TOTAL SAMPLE:			40.7		9.7		6.2		8.1		35.3	

% = gender in area; no missing data

AGE OF PARTICIPANTS, (N, % OF AREA AND % NI)						
(N)	18 - 29	30 - 44	45 - 59	60	MISSING	TOTAL
B	54	24	24	2	1	105
S	12	7	6	0	0	25
SE	9	6	1	0	0	16
N	8	10	3	0	0	21
W	37	29	22	1	2	91
NI	120	76	56	3	3	258
% OF AREA	18 - 29	30 - 44	45 - 59	60	MISSING	TOTAL
B	51	23	23	2	1	100
S	48	28	24	0	0	100
SE	56	38	6	0	0	100
N	38	48	14	0	0	100
W	41	32	24	1	2	100
NI	46.5	29.5	21.7	1.2	1.2	
% OF NI	18 - 29	30 - 44	45 - 59	60	MISSING	TOTAL
B	21	9	9	1	0	41
S	5	3	2	0	0	10
SE	4	2	0	0	0	6
N	3	4	1	0	0	8
W	14	11	9	0	1	35

AGE OF PARTICIPANTS, (% OF AREA AND BY GENDER)										
	18 - 29		30 - 44		45 - 59		60		TOT	
	M	F	M	F	M	F	M	F	M	F
B	28	24	10	13	17	6	2		56	44
S	16	32	28		16	8			60	40
SE	13	44	19	19	6				38	63
N	29	10	19	29	10	5			57	43
W	21	20	21	11	18	7	1		62	39
NI	23	23	17	13	16	6	1	0	57	43

PARTICIPANTS WITH CHILDREN, BY AREA				
	N	% AREA	% NI	TOT
B	24	23	9	105
S	14	15	5	91
SE	5	24	2	21
N	1	4	0	25
W	2	13	1	16
NI	46		18	258



AVERAGE TIME HOMELESS

	Time (Month)	Missing data
NI	16	16
W	21	6
B	13	6
SE	12	0
S	7	4
N	19	0

AVERAGE TIME HOMELESS (AREA & DURATION)

	12+M		18+M		24+M			12+M		18+M		24+M	
	n	%	n	%	n	%		n	%	n	%	n	%
NI	105	41	77	30	62	24	SE	8	38	4	19	4	19
W	51	49	38	36	30	29	S	5	20	4	16	3	12
B	31	34	22	24	18	20	N	10	63	9	56	7	44

% = % area; 12+m, 18+m, 24+m = % homeless for 12+ months, 18+ months, or 24+ months at time of data collection

M=male; f=female; %=% area

REASONS (% AREA BY GENDER)

Category	B		N		SE		S		W		TOT		%category
	f	m	f	m	f	m	f	m	f	m	f	m	
family breakdown / dispute	11	19	10	48	25	13	28	28	14	24	15	24	38
domestic violence / other abuse	14	2	33	0	31	0	4	0	11	3	15	2	17
relationship breakdown	3	9	0	0	0	6	0	0	2	12	2	8	10
eviction	1	6	0	0	0	13	0	4	1	3	1	5	5
shared accommodation breakdown	5	2	0	0	6	0	0	12	1	2	3	3	5
no accommodation in ni / asylum	2	5	0	0	0	0	0	0	0	1	1	2	3
prison	0	1	0	5	0	0	0	0	1	6	0	3	3
addiction	0	5	0	0	0	0	0	0	0	0	0	2	2
accommodation not suitable	0	2	0	0	0	0	0	0	0	1	0	1	1
fire damage	1	0	0	0	0	0	0	0	1	0	1	0	1
intimidation	1	1	0	0	0	0	0	0	0	0	0	0	1
leaving care	1	1	0	0	0	0	0	0	0	0	0	0	1
other	1	0	0	0	0	6	0	0	0	1	0	1	1
overcrowding	0	0	0	0	0	0	4	0	2	0	1	0	1
tenancy cessation	0	0	0	0	0	0	0	0	2	0	1	0	1
tenancy failure	0	2	0	0	0	0	0	0	0	1	0	1	1
mortgage or rent arrears / debt	0	0	0	0	0	0	0	0	0	1	0	0	0
Missing data	2	1	0	0	0	0	0	8	1	4	1	3	4



REASON BY AREA (%), TOP 5 RANKED		NI	
RANK		n	%
1	family breakdown / dispute	99	38
2	domestic violence / other abuse	43	17
3	Relationship breakdown	26	10
4	Eviction	14	5
4	Shared accommodation breakdown	14	5

REASON BY AREA (%), TOP 5 RANKED		SE	
RANK		n	%
1	family breakdown / dispute	6	38
2	domestic violence / other abuse	5	31
3	Eviction	2	13
4	Other (not specified)	1	6
4	Relationship breakdown	1	6
4	Shared accommodation brkdown	1	6

REASON BY AREA (%), TOP 5 RANKED		N	
RANK		n	%
1	family breakdown / dispute	12	57
2	domestic violence / other abuse	7	33
3	prison	1	5

REASON BY AREA (%), TOP 5 RANKED		S	
RANK		n	%
1	family breakdown / dispute	14	56
2	Shared accommodation breakdown	3	12
3	domestic violence / other abuse	1	4
3	Eviction	1	4
3	overcrowding	1	4

REASON BY AREA (%), TOP 5 RANKED		B	
RANK		n	%
1	family breakdown / dispute	32	31
2	domestic violence / other abuse	17	16
3	relationship breakdown	12	11
4	eviction	7	7
4	no accommodation in NI	7	7
4	shared accommodation brkdown	7	7

REASON BY AREA (%), TOP 5 RANKED		W	
RANK		n	%
1	family breakdown / dispute	35	39
2	domestic violence / other abuse	13	14
3	Relationship breakdown	13	14
4	prison	6	7
5	Eviction	4	4

AVERAGE LENGTH OF TIME WITH CURRENT PROVIDER (MONTHS)							
	S	M	F	W	S	M	F
NI	9	9	8		9	9	9
S	10	9	7		8	4	4
SE	13	8	9		9	11	10

LENGTH OF TIME WITH CURRENT PROVIDER (SAMPLE) %					
≤1 week	5	3 month	6	13-17 month	4
1-3 weeks	4	4-6 month	24	18+ month	14
1 month	6	7-11 month	18	Missing data	5
2 month	6	12 month	7		



APPENDIX 4

OVERALL HEALTH

I AM IN GOOD HEALTH (%)

% = NI: % sample, N,B,W,SE,S: %area; missing data, n=1

SAMPLE (n=258)					MALE (n=148)					FEMALE (n=110)				
	AGREE	DISAGREE	TOTALLY AGREE	TOTALLY DISAGREE		AGREE	DISAGREE	TOTALLY AGREE	TOTALLY DISAGREE		AGREE	DISAGREE	TOTALLY AGREE	TOTALLY DISAGREE
NI	45	33	14	7	NI	25	19	11	3	NI	21	14	4	4
B	32	39	20	8	B	19	23	11	3	B	13	16	9	5
W	58	29	9	4	W	33	20	8	1	W	25	9	1	3
S	44	32	12	12	S	20	20	12	8	S	24	12	0	4
SE	63	31	0	6	SE	25	6	0	6	SE	38	25	0	0
N	43	24	24	10	N	24	10	24	0	N	19	14	0	10

MY HEALTH HAS WORSENEED (%)

% = % area; missing data, n=1

SAMPLE (n=258)					MALE (n=148)					FEMALE (n=110)				
	AGREE	DISAGREE	TOTALLY AGREE	TOTALLY DISAGREE		AGREE	DISAGREE	TOTALLY AGREE	TOTALLY DISAGREE		AGREE	DISAGREE	TOTALLY AGREE	TOTALLY DISAGREE
NI	43	32	14	8	NI	27	15	7	6	NI	16	17	7	2
B	47	32	15	5	B	30	18	7	2	B	17	14	9	3
W	41	30	18	8	W	28	15	10	6	W	13	14	8	2
S	36	32	16	8	S	20	16	8	8	S	16	16	8	0
SE	50	44	0	6	SE	31	0	0	6	SE	19	44	0	0
N	38	33	5	24	N	19	10	5	24	N	19	24	0	0

CLIENT'S OVERALL HEALTH DIFFERENT? (PROVIDERS)

	YES, VERY DIFFERENT	YES, SOMEWHAT DIFFERENT	TOTAL (DIFFERENT)	NO DIFFERENT
NI	41	52	93	7
SE	50	25	75	25
B	52	44	96	4
W	32	63	95	5
S	50	33	83	17
N	0	100	100	0

CLIENT'S PHYSICAL HEALTH DIFFERENT? (PROVIDERS)

	YES	NO
NI	57	43
SE	0	100
B	74	26
W	42	58
S	67	33
N	33	0

BELFAST: CLIENT PHYSICAL HEALTH PROBLEMS (%)

	ALL		M		F	
	>12	12+	>12	12+	>12	12+
A heart attack	2	3	2	3	0	0
Diabetes	1	2	1	2	0	0
A stroke	3	1	3	1	0	0
Cancer	0	3	0	2	0	0
Heart surgery	2	2	1	2	1	0
High blood pressure	11	15	9	9	3	3
Dementia (e.g. Alzheimer's / similar)	0	1	0	1	0	0
Disability (tell us more)	6	10	2	8	4	1
Heart disease	2	1	2	1	0	0
A blood borne infection	2	4	1	3	1	0
TB	0	0	0	0	0	0
Parkinson's or similar	0	1	0	0	0	0
Asthma	10	12	7	8	3	2
Liver / kidney problems	3	8	0	6	3	1
Chest pain/respiratory/breathing prob	19	20	11	13	8	3
COPD	3	1	2	1	1	0
poor diet / nutrition	10	36	7	27	3	4
High blood cholesterol	13	15	11	9	3	3
Dental / teeth problems	15	22	11	15	5	3
Problems with feet	3	8	2	7	1	0
Problems with mobility	9	11	5	8	4	2
A test for blood borne infections	4	10	2	7	2	1
Difficulty seeing / eye problems	14	11	9	7	6	2
Sexual health	7	10	4	6	3	2
Skin / wound infections or problems	8	10	5	4	3	2
Stomach problems	11	22	6	13	5	4
Urinary tract problems	8	7	2	2	6	2
Other (tell us more)	0	7	0	5	0	1

% = % area; >12 = (in the last 12 months), 12+ = more than 12 months ago



WEST: CLIENT PHYSICAL HEALTH PROBLEMS (%)

	ALL		M		F	
	>12	12+	>12	12+	>12	12+
a heart attack	3	0	3	0	0	0
diabetes	1	6	0	3	1	2
a stroke	1	0	1	0	0	0
cancer	2	0	0	0	2	0
heart surgery	1	0	1	0	0	0
high blood pressure	12	15	9	13	3	2
dementia (e.g. alzheimer's / similar)	1	0	1	0	0	0
disability (tell us more)	1	9	0	8	1	1
heart disease	0	1	0	1	0	0
a blood borne infection	0	1	0	1	0	0
tb	0	0	0	0	0	0
parkinson's or similar	1	0	1	0	0	0
asthma	7	14	4	7	2	8
liver / kidney problems	7	7	2	6	4	1
chest pain/respiratory/breathing prob	12	19	9	11	3	8
copd	2	2	1	1	1	1
poor diet / nutrition	13	29	8	20	6	9
high blood cholesterol	6	10	3	7	2	3
dental / teeth problems	10	24	8	15	2	9
problems with feet	4	12	2	7	2	6
problems with mobility	8	12	3	10	4	2
a test for blood borne infections	10	7	8	4	2	2
difficulty seeing / eye problems	4	15	3	8	1	8
sexual health	4	4	3	3	1	1
skin / wound infections or problems	3	6	1	2	2	3
stomach problems	13	24	7	13	7	11
urinary tract problems	4	7	0	1	4	6
other (tell us more)	3	2	0	2	3	0

% = % area; >12 = (in the last 12 months), 12+ = more than 12 months ago

SOUTH: CLIENT PHYSICAL HEALTH PROBLEMS (%)

	ALL		M		F	
	>12	12+	>12	12+	>12	12+
a heart attack	0	0	0	0	0	0
diabetes	0	0	0	0	0	0
a stroke	0	0	0	0	0	0
cancer	0	0	0	0	0	0
heart surgery	0	4	0	4	0	0
high blood pressure	8	16	4	12	4	4
dementia (e.g. alzheimer's / similar)	0	0	0	0	0	0
disability (tell us more)	4	0	0	0	4	0
heart disease	0	0	0	0	0	0
a blood borne infection	0	4	0	4	0	0
tb	0	0	0	0	0	0
parkinson's or similar	0	0	0	0	0	0
asthma	0	12	0	8	0	4
liver / kidney problems	16	0	12	0	4	0
chest pain/respiratory/breathing prob	12	24	8	12	4	12
copd	8	0	8	0	0	0
poor diet / nutrition	12	36	12	24	0	12
high blood cholesterol	0	8	0	0	0	8
dental / teeth problems	16	24	12	20	4	4
problems with feet	0	4	0	4	0	0
problems with mobility	4	12	0	12	4	0
a test for blood borne infections	8	8	8	4	0	4
difficulty seeing / eye problems	0	24	0	16	0	8
sexual health	8	8	8	4	0	4
skin / wound infections or problems	4	0	4	0	0	0
stomach problems	16	32	12	24	4	8
urinary tract problems	0	8	0	0	0	8
other (tell us more)	0	4	0	4	0	0

% = % area; >12 = (in the last 12 months), 12+ = more than 12 months ago



NORTH: CLIENT PHYSICAL HEALTH PROBLEMS (%)	ALL		M		F	
	>12	12+	>12	12+	>12	12+
A heart attack	0	0	0	0	0	0
Diabetes	5	0	0	0	5	0
A stroke	0	0	0	0	0	0
Cancer	0	10	0	10	0	0
Heart surgery	0	10	0	10	0	0
High blood pressure	14	19	10	10	5	10
Dementia (e.g. Alzheimer's / similar)	0	0	0	0	0	0
Disability (tell us more)	19	0	10	0	10	0
Heart disease	10	0	10	0	0	0
A blood borne infection	0	0	0	0	0	0
TB	0	0	0	0	0	0
Parkinson's or similar	0	0	0	0	0	0
Asthma	5	5	0	0	5	5
Liver / kidney problems	5	5	0	5	5	0
Chest pain/respiratory/breathing prob	14	19	5	10	10	10
COPD	14	0	10	0	5	0
poor diet / nutrition	10	29	10	14	0	14
High blood cholesterol	19	0	10	0	10	0
Dental / teeth problems	19	29	10	24	10	5
Problems with feet	0	19	0	14	0	5
Problems with mobility	19	10	5	10	14	0
A test for blood borne infections	5	10	0	5	5	5
Difficulty seeing / eye problems	5	0	0	0	5	0
Sexual health	5	5	0	0	5	5
Skin / wound infections or problems	0	5	0	0	0	5
Stomach problems	19	14	10	10	10	5
Urinary tract problems	5	14	0	0	5	14
Other (tell us more)	0	0	0	0	0	0

% = % area; >12 = (in the last 12 months), 12+ = more than 12 months ago

SOUTHEAST: CLIENT PHYSICAL HEALTH PROBLEMS (%)	ALL		M		F	
	>12	12+	>12	12+	>12	12+
A heart attack	0	0	0	0	0	0
Diabetes	0	0	0	0	0	0
A stroke	0	0	0	0	0	0
Cancer	0	0	0	0	0	0
Heart surgery	0	0	0	0	0	0
High blood pressure	13	6	6	0	6	6
Dementia (e.g. Alzheimer's / similar)	0	0	0	0	0	0
Disability (tell us more)	13	6	6	0	6	6
Heart disease	0	0	0	0	0	0
A blood borne infection	6	0	6	0	0	0
TB	0	0	0	0	0	0
Parkinson's or similar	0	0	0	0	0	0
Asthma	6	6	0	0	6	6
Liver / kidney problems	0	6	0	0	0	6
Chest pain/respiratory/breathing prob	0	25	0	6	0	19
COPD	0	0	0	0	0	0
poor diet / nutrition	0	25	0	6	0	19
High blood cholesterol	0	0	0	0	0	0
Dental / teeth problems	13	13	6	6	6	6
Problems with feet	6	6	0	0	6	6
Problems with mobility	6	13	0	0	6	13
A test for blood borne infections	6	6	0	0	6	6
Difficulty seeing / eye problems	38	6	6	0	31	6
Sexual health	6	0	0	0	6	0
Skin / wound infections or problems	13	0	6	0	6	0
Stomach problems	19	31	6	19	13	13
Urinary tract problems	6	6	0	0	6	6
Other (tell us more)	0	19	0	19	0	0

% = % area; >12 = (in the last 12 months), 12+ = more than 12 months ago



NI PHYSICAL HEALTH CONDITIONS, RANKED

1 = top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago

SAMPLE	>12	12+	EVER	SAMPLE	>12	12+	EVER	SAMPLE	>12	12+	EVER
poor diet / nutrition	5	1	1	urinary tract problems	12	12	11	heart surgery	21	20	21
stomach problems	3	2	2	problems with feet	17	10	12	a heart attack	18	22	22
dental / teeth problems	2	3	3	Disability	12	12	13	cancer	25	20	23
chest pain/ respiratory prob	1	4	4	sexual health	11	14	14	heart disease	19	24	24
high blood pressure	4	5	5	skin/wound, infection	12	15	15	a stroke	19	25	25
difficulty seeing/eye problem	6	6	6	liver / kidney problem	12	15	16	Parkinson's/similar	26	25	26
problems with mobility	8	8	7	other	21	17	17	dementia	26	25	27
high blood cholesterol	7	9	8	COPD	16	22	18	TB	28	28	28
asthma	9	7	9	diabetes	21	18	19				
test for blood borne infection	10	11	10	blood borne infection	21	19	20				

NI PHYSICAL HEALTH CONDITIONS, RANKED

1 = top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago

M	Y(>12)	Y(12)	EVER	F	Y(>12)	Y(12)	EVER
poor diet / nutrition	4	1	1	stomach problems	1	2	1
dental / teeth problems	1	2	2	chest pain/ respiratory prob	2	3	2
stomach problems	5	3	3	poor diet / nutrition	10	1	3
chest pain/respiratory prob	2	4	4	dental / teeth problems	6	4	4
high blood pressure	3	5	5	urinary tract problems	5	5	5
difficulty seeing / eye problem	7	7	6	difficulty seeing / eye problem	3	7	6
problems with mobility	10	6	7	high blood pressure	7	8	7
high blood cholesterol	6	10	8	asthma	11	6	7
asthma	8	9	9	problems with mobility	3	11	9
a test for blood borne infections	8	12	10	high blood cholesterol	11	9	10
problems with feet	17	8	11	skin / wound infection or prob	13	10	11
disability	14	10	12	a test for blood borne infections	13	11	12
sexual health	10	14	13	disability	7	15	13
liver / kidney problems	14	13	14	liver / kidney problems	7	15	13
skin/wound infection or prob	12	16	15	sexual health	13	14	13
other	26	14	16	problems with feet	16	11	16
COPD	13	23	17	other	17	17	17
a heart attack	14	21	18	diabetes	19	18	18
a blood borne infection	20	17	19	COPD	17	19	18
heart surgery	20	17	20	cancer	19	19	20
diabetes	23	17	21	a blood borne infection	21	19	21
heart disease	17	23	22	heart surgery	21	23	22
urinary tract problems	20	21	23	parkinson's or similar	23	19	22
a stroke	17	25	24	a heart attack	23	23	24
cancer	26	20	25	a stroke	23	23	24
dementia	23	25	26	dementia	23	23	24
parkinson's or similar	23	27	27	heart disease	23	23	24
TB	26	27	28	TB	23	23	24



BELFAST: PHYSICAL HEALTH CONDITIONS, TOP 10 RANKED

SAMPLE	>12	12+	EVER	MALE	>12	12+	EVER
poor diet / nutrition	7	1	1	poor diet / nutrition	6	1	1
chest pain/ respiratory problem	1	4	2	Chest pain/respiratory problem	1	3	2
dental / teeth problems	2	2	3	Dental/teeth problems	2	2	3
stomach problems	6	3	4	Stomach problems	8	4	4
high blood cholesterol	4	5	5	High blood cholesterol	3	5	5
high blood pressure	5	6	6	High blood pressure	4	6	6
difficulty seeing / eye problems	3	9	7	Difficulty seeing/eye problems	5	10	7
asthma	8	7	8	Asthma	7	7	8
problems with mobility	9	8	9	Problems with mobility	9	8	9
skin infections or problems	10	10	10	Skin infections or problems	10	16	10
FEMALE	>12	12+	EVER	FEMALE	>12	12+	EVER
poor diet / nutrition	8	1	1	High blood pressure	10	6	6
Dental / teeth problems	4	4	2	Difficulty seeing / eye problems	2	10	7
Chest pain/ respiratory problem	1	3	3	Asthma	11	9	8
Stomach problems	5	2	4	Problems with mobility	6	11	9
High blood cholesterol	9	5	5	Sexual health	12	12	10

Ranked on 'ever' (ever = any occurrence); 1= top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago

WEST: PHYSICAL HEALTH CONDITIONS, TOP 10 RANKED

SAMPLE	>12	12+	EVER	MALE	>12	12+	EVER
poor diet/nutrition	1	1	1	poor diet/nutrition	3	1	1
Stomach problems	2	2	2	Dental/teeth problems	4	2	2
Dental/teeth problems	5	3	3	High blood pressure	2	3	3
Chest pain/respiratory problem	4	4	4	Stomach problems	6	4	4
High blood pressure	3	5	5	Chest pain/respiratory problem	1	5	5
Asthma	8	7	6	Problems with mobility	9	6	6
Problems with mobility	7	8	7	A test for blood borne infection	5	13	7
Difficulty seeing/eye problems	12	6	8	Asthma	7	9	8
Problems with feet	11	9	9	Difficulty seeing/eye problems	8	7	9
A test for blood borne infections	6	12	10	High blood cholesterol	10	10	10
FEMALE	>12	12+	EVER	FEMALE	>12	12+	EVER
Stomach problems	1	1	1	Urinary tract problems	5	7	6
poor diet/nutrition	2	2	2	Difficulty seeing/eye problems	16	6	7
Dental/teeth problems	9	3	3	Problems with feet	12	8	8
Chest pain/respiratory problem	7	4	4	Problems with mobility	3	11	9
Asthma	10	5	5	High blood pressure	6	12	10

Ranked on 'ever' (ever = any occurrence); 1= top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago



SOUTH: PHYSICAL HEALTH CONDITIONS, TOP 10 RANKED

SAMPLE	>12	12+	EVER	MALE	>12	12+	EVER
poor diet / nutrition	4	1	1	poor diet / nutrition	1	1	1
Stomach problems	1	2	2	Stomach problems	2	2	2
Dental / teeth problems	2	3	3	Dental / teeth problems	3	3	3
Chest pain/ respiratory problem	5	4	4	Chest pain/ respiratory problem	5	5	4
Difficulty seeing / eye problems	15	5	5	Difficulty seeing / eye problems	11	4	5
High blood pressure	9	6	6	High blood pressure	9	6	6
Sexual health	6	9	7	Sexual health	6	9	7
A test for blood borne infection	7	10	8	A test for blood borne infections	7	10	8
Problems with mobility	11	7	9	Problems with mobility	12	7	9
Liver / kidney problems	3	17	10	Liver / kidney problems	4	15	10
FEMALE	>12	12+	EVER	FEMALE	>12	12+	EVER
Chest pain/ respiratory problem	3	1	1	High blood pressure	4	8	6
poor diet / nutrition	8	2	2	Urinary tract problems	19	5	7
Stomach problems	1	3	3	High blood cholesterol	20	6	8
Dental / teeth problems	2	7	4	Sexual health	11	10	9
Difficulty seeing / eye problems	9	4	5	A test for blood borne infections	12	11	10

Ranked on 'ever' (ever = any occurrence); 1= top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago

SOUTHEAST: PHYSICAL HEALTH CONDITIONS, TOP 10 RANKED

SAMPLE	>12	12+	EVER	MALE	>12	12+	EVER
Stomach problems	2	1	1	Stomach problems	1	1	1
Difficulty seeing / eye problems	1	7	2	Other	10	2	2
poor diet / nutrition	16	2	3	Dental / teeth problems	2	3	3
Chest pain/ respiratory problem	18	3	4	Difficulty seeing / eye problems	3	6	4
Dental / teeth problems	4	5	5	poor diet / nutrition	8	4	5
Problems with mobility	10	6	6	Chest pain/ respiratory problem	9	5	6
Disability	5	8	7	Disability	4	7	7
High blood pressure	6	9	8	High blood pressure	5	8	8
Other	14	4	9	Skin infections or problems	6	9	9
Urinary tract problems	7	10	10	A blood borne infection	7	10	10
FEMALE	>12	12+	EVER	FEMALE	>12	12+	EVER
Difficulty seeing / eye problems	1	5	1	Dental / teeth problems	3	6	6
Stomach problems	2	3	2	Disability	4	7	7
poor diet / nutrition	14	1	3	High blood pressure	5	8	8
Chest pain/ respiratory problem	15	2	4	Urinary tract problems	8	9	9
Problems with mobility	7	4	5	A test for blood borne infections	9	10	10

Ranked on 'ever' (ever = any occurrence); 1= top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago



NORTH: PHYSICAL HEALTH CONDITIONS, TOP 10 RANKED

SAMPLE	>12	12+	EVER	MALE	>12	12+	EVER
Dental / teeth problems	3	1	1	Dental / teeth problems	1	1	1
poor diet / nutrition	10	2	2	poor diet / nutrition	2	2	2
High blood pressure	6	3	3	High blood pressure	3	4	3
Chest pain/ respiratory problem	7	4	4	Stomach problems	4	5	4
Stomach problems	5	6	5	Chest pain/ respiratory problem	9	6	5
Problems with mobility	4	8	6	Problems with mobility	10	7	6
Disability	1	16	7	Problems with feet	11	3	7
High blood cholesterol	2	17	8	Disability	5	12	8
Problems with feet	26	5	9	High blood cholesterol	6	13	9
Urinary tract problems	17	7	10	COPD	7	14	10

FEMALE	>12	12+	EVER	FEMALE	>12	12+	EVER
Chest pain/ respiratory problem	4	3	1	Stomach problems	3	6	6
Urinary tract problems	11	1	2	Problems with mobility	1	12	7
Dental / teeth problems	2	5	3	Disability (tell us more)	5	13	8
poor diet / nutrition	16	2	4	High blood cholesterol	6	14	9
High blood pressure	7	4	5	A test for blood borne infections	8	7	10

Ranked on 'ever' (ever = any occurrence); 1 = top ranked, 2 = 2nd ranked, etc.; >12 = in the last 12 months, 12+ = longer than 12 months ago

CITED SOURCES OF HELP FOR PHYSICAL HEALTH CONDITIONS, TOP 5 RANKED

RANK	NI	%	BELFAST	%	WEST	%
1	staff member at project	78	staff member at project	68	staff member at project	84
2	GP	72	GP	60	GP	75
3	community nursing	19	Pharmacist	18	Dentist / dental specialist	21
4	Pharmacist	18	community nursing	18	Pharmacist	16
5	Dentist/dental specialist	13	Dentist / dental specialist	14	community nursing	14

RANK	SOUTH	%	NORTH	%	SOUTHEAST	%
1	staff member at project	88	GP	100	staff member at project	92
2	GP	69	staff member at project	89	GP	69
3	na	38	Pharmacist	44	Health service (generic)	15
4	Pharmacist	19	Heart / cardiac services	22	community nursing; Pharmacist; cancer services; hospital care (specialist)	8
5	CPN / community nurse	13				
6	Cancer services; OT; other (generic) health service	6				

% = % responses (formal support) in area



APPENDIX 5

MENTAL HEALTH

CLIENT'S MENTAL HEALTH DIFFERENT? (PROVIDERS)

	YES	NO		YES	NO
NI	98	2	W	100	0
SE	100	0	S	100	0
B	96	4	N	100	0

RANK	NI (n=56)	%	B (n=23)	%	S (n=6)	%
1	Depression	96	Depression	96	Depression	100
2	Anxiety	89	Anxiety	96	Schizophrenia	100
3	Suicidal thoughts	88	Personality disorder	74	Anxiety	67
4	Self harm	80	Schizophrenia	74	Personality disorder	67
5	Suicide attempts	75	Self harm	70	Self harm	67
6	Personality disorder	66	Suicide attempts	65	Suicide attempts	67
7	Dual diagnosis	63	Dual diagnosis	65	Suicidal thoughts	67
8	Schizophrenia	57	Suicidal thoughts	61	Dual diagnosis	50
RANK	W (n=19)	%	N (n=4)	%	SE (n=4)	%
1	Depression	95	Depression	100	Depression	100
2	Suicidal thoughts	95	Suicidal thoughts	100	Suicidal thoughts	100
3	Anxiety	84	Anxiety	100	Anxiety	100
4	Suicide attempts	84	Suicide attempts	100	Self harm	100
5	Self harm	84	Self harm	100	Suicide attempts	75
6	Personality disorder	63	Personality disorder	100	Personality disorder	75
7	Dual diagnosis	53	Dual diagnosis	100	Dual diagnosis	75
8	Schizophrenia	32	Schizophrenia	100	Schizophrenia	50

% = % area



CLIENT'S REPORTED MENTAL HEALTH CONDITIONS (LAST 12 M): %AREA, BY GENDER

	NI %			B %			W %		
	S	M	F	S	M	F	S	M	F
Social isolation	72	44	28	72	42	31	71	46	25
Anxiety	74	45	30	76	45	31	71	44	28
Depression	80	47	33	80	47	33	79	48	31
Sleep problems	77	47	30	76	44	32	76	50	26
Problems concentrating	66	41	26	67	41	26	66	43	23
Problems with my mood	71	43	28	67	42	25	73	44	29
More irritable	62	38	24	61	38	23	62	39	23
Feeling stressed	78	48	31	77	46	31	78	50	29
Suicidal thoughts	26	14	11	31	17	13	19	13	6
Panic attacks	40	26	15	42	27	15	41	28	13
Hear voices	15	9	5	19	13	6	13	9	4
hard to control anger	32	22	10	35	26	10	29	22	7
aggressive to others	27	17	10	29	19	10	24	18	7
Memory loss	40	26	14	46	30	16	36	24	12
Other	0	0	0	0	0	0	0	0	0

	S %			SE %			N %		
	S	M	F	S	M	F	S	M	F
Social isolation	56	36	20	81	38	44	86	57	29
Anxiety	60	40	20	81	38	56	91	57	33
Depression	64	40	24	94	38	50	86	52	33
Sleep problems	80	48	32	88	38	44	71	52	19
Problems concentrating	60	40	20	75	31	50	67	38	29
Problems with my mood	60	40	20	88	38	44	91	57	33
More irritable	48	32	16	75	31	50	76	48	29
Feeling stressed	72	48	24	88	38	25	86	57	29
Suicidal thoughts	16	4	12	38	13	31	33	19	14
Panic attacks	24	12	12	56	25	0	38	29	10
Hear voices	16	4	12	0	0	25	10	5	5
hard to control anger	32	12	20	38	13	25	24	19	5
aggressive to others	20	4	16	44	19	31	29	19	10
Memory loss	28	16	12	50	19	0	38	33	5
Other	0	0	0	0	0	0	0	0	0

% = % area

FORMAL DIAGNOSIS, AREA / GENDER

AREA	n	%S	%M	%F	AREA	n	%S	%M	%F
NI	132	51	78	30	53	54	21	49	
B	58	23	55	37	35	63	21	20	46
W	48	19	53	29	32	52	19	21	54
N	11	4	52	5	24	42	6	29	67
S	5	2	20	3	12	20	2	8	20
SE	10	4	63	4	25	67	6	38	60

%S = % of total sample, n=258; % = % of each area total respondents (B=105, W=91, S=25, SE=16; N=21); M = Male; F=Female; %M, %F = those males / females with diagnosis as a % of gender in respective area.


CITED SOURCES OF HELP FOR MENTAL HEALTH CONDITIONS, TOP 5 RANKED

RANK	NI	%	BELFAST	%	WEST	%
1	staff member at project	67	staff member at project	68	staff member at project	63
2	GP	52	GP	60	GP	50
3	Therapy / counselling	16	Therapy / counselling	18	CPN	28
4	CPN	11	CPN	18	Therapy / counselling	14
5	other health services	7	other health services	14	Hospital based services / psychiatric services	11
RANK	SOUTH	%	NORTH	%	SOUTHEAST	%
1	staff member at project	60	staff member at project	88	staff member at project	57
2	GP	44	GP	88	GP	33
3	Therapy / counselling	24	Therapy / counselling	19	Therapy / counselling	14
4	CPN	8	CPN	6	other health services	10
5	other homeless service	4	other health services	6		

% = % responses (formal support) in area



APPENDIX 6

OTHER ASPECTS

	NI (n=110)		B (n=46)		W (n=35)		S (n=10)		SE (n=10)		N (n=9)	
	n	%	n	%	n	%	n	%	n	%	n	%
3Y CERVICAL SMEAR												
not relevant	13	12	0	0	9	26	2	20	1	10	1	11
yes	32	29	19	41	7	20	1	10	1	10	4	44
no	63	57	27	59	18	51	6	60	8	80	4	44
Missing data	2	2	0	0	1	3	1	10	0	0	0	0

% = % of females in area

	NI (n=110)		B (n=46)		W (n=35)		S (n=10)		SE (n=10)		N (n=9)	
	n	%	n	%	n	%	n	%	n	%	n	%
3Y BREAST EXAMINATION												
not relevant	12	11	0	0	8	23	2	20	1	10	1	11
yes	11	10	6	13	3	9	0	0	1	10	1	11
no	85	77	40	87	23	66	7	70	8	80	7	78
Missing data	2	2	0	0	1	3	1	10	0	0	0	0

% = % of females in area

	NI (n=258)		B (n=105)		W (n=91)		S (n=25)		SE (n=16)		N (n=21)	
	n	%	n	%	n	%	n	%	n	%	n	%
REGISTERED DISABLED												
yes	21	8	9	20	5	14	3	30	2	20	2	22
no	234	91	96	209	86	246	19	190	14	140	19	211
Missing data	3	1	0	0	0	0	3	30	0	0	0	0

% = % area

	NI (n=258)		B (n=105)		W (n=91)		S (n=25)		SE (n=16)		N (n=21)	
	n	%	n	%	n	%	n	%	n	%	n	%
REGISTERED BLIND												
yes	8	3	8	8	0	0	0	0	0	0	0	0
no	247	96	97	92	91	100	22	88	16	100	21	100
Missing data	3	1	0	0	0	0	3	12	0	0	0	0

% = % area

	NI (n=258)		B (n=105)		W (n=91)		S (n=25)		SE (n=16)		N (n=21)	
	n	%	n	%	n	%	n	%	n	%	n	%
REGISTERED DEAF												
yes	1	0	1	1	0	0	0	0	0	0	0	0
no	254	98	104	99	91	100	22	88	16	100	21	100
Missing data	3	1	0	0	0	0	3	12	0	0	0	0

% = % area

	NI (n=258)		B (n=105)		W (n=91)		S (n=25)		SE (n=16)		N (n=21)	
	n	%	n	%	n	%	n	%	n	%	n	%
HEARING IMPAIRED												
yes	7	3	4	4	0	0	0	0	0	0	3	14
no	246	95	99	94	91	100	22	88	16	100	18	86
Missing data	5	2	2	2	0	0	3	12	0	0	0	0



NI	0	1	2	3	4+
how many meals do you have a day?	0	20	39	36	3
how many pieces of fruit & veg do you eat a day?	34	24	23	13	5
how many times do you exercise during the week?*	25	22	19	11	22
B	0	1	2	3	4+
how many meals do you have a day?	0	22	43	32	3
how many pieces of fruit & veg do you eat a day?	39	18	20	17	6
how many times do you exercise during the week?*	29	18	17	11	25
W	0	1	2	3	4+
how many meals do you have a day?	1	22	34	41	2
how many pieces of fruit & veg do you eat a day?	33	22	34	9	2
how many times do you exercise during the week?*	22	18	25	12	23
SE	0	1	2	3	4+
how many meals do you have a day?	0	25	44	31	0
how many pieces of fruit & veg do you eat a day?	25	50	6	6	13
how many times do you exercise during the week?*	19	31	6	25	19
S	0	1	2	3	4+
how many meals do you have a day?	0	8	40	36	4
how many pieces of fruit & veg do you eat a day?	20	28	12	24	4
how many times do you exercise during the week?*	8	40	16	4	20
N	0	1	2	3	4+
how many meals do you have a day?	0	10	38	43	10
how many pieces of fruit & veg do you eat a day?	33	33	19	5	10
how many times do you exercise during the week?*	48	29	10	5	10

*this includes walks of 20 mins or more; % = % area; missing data, n=1



WHAT PROVIDERS TOLD US ABOUT CLIENTS: % OCCURRENCE OF LISTED EVENTS IN LAST 12M (% = % area)

NI	6+TIMES	3-5TIMES	1-2TIMES	NEVER	EVER	W	6+TIMES	3-5TIMES	1-2TIMES	NEVER	EVER
emergency visits A&E	45	48	7	0	100	emergency visits A&E	39	44	0	17	83
999 / ambulance calls	34	57	9	0	100	999 / ambulance calls	21	74	5	0	100
emergency hospitalisation	27	48	25	0	100	emergency hospitalisation	16	53	32	0	100
emergency psychiatric admission	13	55	27	5	95	emergency psychiatric admission	11	58	26	5	95
taking medication	73	27	0	0	100	taking medication	84	16	0	0	100
refused registration GP	5	16	34	45	55	refused registration GP	5	21	37	37	63
refused registration dentist	4	14	36	46	54	refused registration dentist	5	16	37	42	58
missing meals	64	27	7	2	98	missing meals	58	42	0	0	100
engage risk behaviour	50	30	5	14	86	engage risk behaviour	47	37	5	11	90
engage street behaviour	36	20	14	30	70	engage street behaviour	32	11	26	32	68
engage rough sleeping	7	34	27	32	68	engage rough sleeping	5	16	32	47	53
N	6+TIMES	3-5TIMES	1-2TIMES	NEVER	EVER	S	6+TIMES	3-5TIMES	1-2TIMES	NEVER	EVER
emergency visits A&E	75	25	0	0	100	emergency visits A&E	67	0	33	0	100
999 / ambulance calls	75	25	0	0	100	999 / ambulance calls	67	0	33	0	100
emergency hospitalisation	75	25	0	0	100	emergency hospitalisation	50	17	33	0	100
emergency psychiatric admission	0	100	0	0	100	emergency psychiatric admission	33	33	33	0	100
taking medication	75	25	0	0	100	taking medication	83	17	0	0	100
refused registration GP	0	0	0	100	0	refused registration GP	33	17	0	50	50
refused registration dentist	0	0	100	0	100	refused registration dentist	17	17	17	50	50
missing meals	100	0	0	0	100	missing meals	67	33	0	0	100
engage risk behaviour	75	25	0	0	100	engage risk behaviour	67	0	0	33	67
engage street behaviour	0	75	25	0	100	engage street behaviour	67	0	0	33	67
engage rough sleeping	0	75	25	0	100	engage rough sleeping	17	50	0	33	67
B	6+TIMES	3-5TIMES	1-2TIMES	NEVER	EVER	SE	6+TIMES	3-5TIMES	1-2TIMES	NEVER	EVER
emergency visits A&E	30	61	9	0	100	emergency visits A&E	50	50	0	0	100
999 / ambulance calls	26	65	9	0	100	999 / ambulance calls	50	50	0	0	100
emergency hospitalisation	17	61	22	0	100	emergency hospitalisation	50	25	25	0	100
emergency psychiatric admission	4	57	30	9	91	emergency psychiatric admission	50	25	25	0	100
taking medication	57	44	0	0	100	taking medication	100	0	0	0	100
refused registration GP	0	17	48	35	65	refused registration GP	0	0	25	75	25
refused registration dentist	0	17	30	52	48	refused registration dentist	0	0	25	75	25
missing meals	61	17	17	4	96	missing meals	75	25	0	0	100
engage risk behaviour	44	30	9	17	83	engage risk behaviour	50	50	0	0	100
engage street behaviour	35	17	9	39	61	engage street behaviour	50	50	0	0	100
engage rough sleeping	9	35	30	26	74	engage rough sleeping	0	50	25	25	75



WHAT CLIENTS TOLD US: % OCCURRENCE OF LISTED EVENTS IN LAST 12M

NI	NEVER	1-2 TIMES	3-5 TIMES	5+ TIMES	EVER	BELFAST	NEVER	1-2 TIMES	3-5 TIMES	5+ TIMES	EVER
Emergency visit to A&E	55	35	5	4	43	Emergency visit to A&E	52	35	7	3	48
Ambulance called / 999	76	19	2	2	23	Ambulance called / 999	76	19	2	3	24
Emergency hospital admission	74	21	2	2	25	Emergency hospital admission	73	20	3	3	27
Visited GP	10	26	24	38	89	Visited GP	10	26	26	3	91
Visited dentist	48	42	6	4	51	Visited dentist	48	41	6	3	52
Visited optician	68	29	1	1	31	Visited optician	70	30	1	3	31
Outpatient appointment	66	22	7	4	33	Outpatient appointment	67	20	8	3	33
Missed a medical appointment	57	30	8	4	42	Missed a medical appointment	62	22	11	3	38
prescribed prescription drugs	37	24	15	23	62	prescribed prescription drugs	41	20	11	3	59
Vaccination for Flu	79	19	1	0	20	Vaccination for Flu	82	16	2	3	18
Met support group/peer group	76	14	5	4	23	Met support group/peer group	77	17	3	3	23
Other vaccination	97	2	0	0	2	Other vaccination	98	2	0	3	2
Used a Walk-in clinic	86	10	2	1	13	Used a Walk-in clinic	89	8	1	3	11
Had a health check / MOT	81	14	2	2	17	Had a health check / MOT	86	9	3	3	14
SOUTH	NEVER	1-2 TIMES	3-5 TIMES	5+ TIMES	EVER	WEST	NEVER	1-2 TIMES	3-5 TIMES	5+ TIMES	EVER
Emergency visit to A&E	48	40	0	3	40	Emergency visit to A&E	53	40	4	3	47
Ambulance called / 999	64	20	0	3	24	Ambulance called / 999	76	20	2	3	24
Emergency hospital admission	72	16	0	3	16	Emergency hospital admission	70	26	1	3	30
Visited GP	16	20	20	3	72	Visited GP	10	29	24	3	90
Visited dentist	40	44	4	3	48	Visited dentist	50	41	8	3	51
Visited optician	52	36	0	3	36	Visited optician	69	26	2	3	31
Outpatient appointment	48	36	4	3	40	Outpatient appointment	68	20	9	3	32
Missed a medical appointment	64	20	4	3	24	Missed a medical appointment	51	35	10	3	50
prescribed prescription drugs	36	32	12	3	52	prescribed prescription drugs	35	23	17	3	65
Vaccination for Flu	76	12	0	3	12	Vaccination for Flu	78	21	0	3	22
Met support group/peer group	72	8	4	3	16	Met support group/peer group	75	11	9	3	25
Other vaccination	84	4	0	3	4	Other vaccination	98	1	0	3	2
Used a Walk-in clinic	72	16	0	3	16	Used a Walk-in clinic	90	8	2	3	10
Had a health check / MOT	64	20	4	3	24	Had a health check / MOT	81	17	1	3	19

% = % area reporting specified response; n=258; missing, n=1; 'ever' = all responses except 'never'



WHAT CLIENTS TOLD US: % OCCURRENCE OF LISTED EVENTS IN LAST 12M

SOUTHEAST	WHAT CLIENTS TOLD US: % OCCURRENCE OF LISTED EVENTS IN LAST 12M					NORTH	WHAT CLIENTS TOLD US: % OCCURRENCE OF LISTED EVENTS IN LAST 12M				
	NEVER	1-2 TIMES	3-5 TIMES	5+ TIMES	EVER		NEVER	1-2 TIMES	3-5 TIMES	5+ TIMES	EVER
Emergency visit to A&E	63	25	13	3	38	Emergency visit to A&E	86	14	0	3	14
Ambulance called / 999	81	19	0	3	19	Ambulance called / 999	81	19	0	3	19
Emergency hospital admission	75	13	13	3	25	Emergency hospital admission	91	10	0	3	10
Visited GP	0	13	38	3	100	Visited GP	14	33	14	3	86
Visited dentist	50	44	0	3	50	Visited dentist	48	48	5	3	52
Visited optician	69	31	0	3	31	Visited optician	71	29	0	3	29
Outpatient appointment	81	6	6	3	19	Outpatient appointment	57	38	5	3	43
Missed a medical appointment	50	50	0	3	50	Missed a medical appointment	52	43	0	3	48
prescribed prescription drugs	19	25	44	3	81	prescribed prescription drugs	38	38	10	3	62
Vaccination for Flu	88	13	0	3	13	Vaccination for Flu	62	38	0	3	38
Met support group/peer group	56	25	13	3	44	Met support group/peer group	91	10	0	3	10
Other vaccination	100	0	0	3	0	Other vaccination	0	0	0	3	0
Used a Walk-in clinic	75	19	6	3	25	Used a Walk-in clinic	81	19	0	3	19
Had a health check / MOT	81	19	0	3	19	Had a health check / MOT	81	19	0	3	19

% = % area reporting specified response; n=258; missing, n=1; 'ever' = all responses except 'never'

WHAT CLIENTS TOLD US: ACCESSING SERVICES

AGREE AND TOTALLY AGREE (COMBINED %)

	NI	SE	B	W	S	N
I know where to get information about health services if I need them	93	88	93	93	88	97
Staff (project) provide me with the help I need	96	94	96	97	88	92
Staff (project) help me find professionals who can help me with health issues	95	94	95	95	88	83
I am receiving the support I need from health services	87	63	87	92	80	91
I know how to access health services if I need them	92	81	92	93	88	89
I find it easy to get the help I need from health services	80	56	80	81	76	91

(% = % area; missing, n=3, 1% - all Belfast (3% area))



WHAT PROVIDERS TOLD US: DO YOU ENSURE CLIENTS ARE IN CONTACT WITH ANY OF THE FOLLOWING SERVICES (IF NEEDED)? (%)

	SAMPLE (N=56)			BELFAST (N=23)		
	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)
Eye health / optician	82	5	88	65	13	78
Counselling / therapy	77	9	86	74	13	87
Sexual health & contraceptive services	73	11	84	61	13	74
Psychiatric services	80	4	84	61	9	70
Specialist alcohol	79	5	84	48	4	52
Mental health specialist	79	4	82	52	0	52
Self help groups	68	13	80	70	4	74
Specialist addictions	73	5	79	35	13	48
Community based nursing	75	0	75	65	4	70
Maternity related support	73	2	75	57	9	65
Detox	73	2	75	74	4	78
Occupational therapy	68	4	71	70	4	74
Residential rehab	71	0	71	70	13	83
Dietetics/nutritionist	68	2	70	61	4	65
Vaccinations / Flu jab	59	5	64	74	4	78
Physiotherapy	57	2	59	65	4	70
Podiatry	52	5	57	57	0	57
Community prescribing	55	2	57	57	0	57
Substitute prescribing	57	0	57	48	4	52
Geriatric / older people services	54	0	54	52	0	52
Homeless Multidisciplinary Supp.Team	50	4	54	57	17	74
homelessness nursing	45	4	48	52	13	65
Cervical screening	45	2	46	48	4	52
Mammogram / breast screening	43	2	45	48	4	52
other	13	4	16	9	4	13
missing	0	11	11	0	26	26

% = % providers in area



WHAT PROVIDERS TOLD US: DO YOU ENSURE CLIENTS ARE IN CONTACT WITH ANY OF THE FOLLOWING SERVICES (IF NEEDED)? (%)

	WEST (N=19)			SOUTH (N=6)		
	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)
Eye health / optician	79	0	79	83	17	100
Counselling / therapy	79	0	79	100	0	100
Sexual health & contraceptive services	79	0	79	100	0	100
Psychiatric services	63	0	63	83	0	83
Specialist alcohol	63	0	63	50	0	50
Mental health specialist	42	0	42	67	0	67
Self help groups	79	5	84	100	0	100
Specialist addictions	63	0	63	67	0	67
Community based nursing	68	0	68	83	0	83
Maternity related support	26	0	26	67	0	67
Detox	26	0	26	50	17	67
Occupational therapy	74	5	79	100	0	100
Residential rehab	74	5	79	83	17	100
Dietetics/nutritionist	63	0	63	83	0	83
Vaccinations / Flu jab	79	0	79	83	17	100
Physiotherapy	74	0	74	83	17	100
Podiatry	74	5	79	100	0	100
Community prescribing	74	0	74	83	0	83
Substitute prescribing	42	0	42	67	0	67
Geriatric / older people services	42	0	42	67	0	67
Homeless Multidisciplinary Supp.Team	74	0	74	83	17	100
homelessness nursing	68	0	68	83	0	83
Cervical screening	37	0	37	83	0	83
Mammogram / breast screening	47	0	47	67	0	67
other	26	5	32	0	0	0
missing	0	0	0	0	0	0

% = % providers in area



WHAT PROVIDERS TOLD US: DO YOU ENSURE CLIENTS ARE IN CONTACT WITH ANY OF THE FOLLOWING SERVICES (IF NEEDED)? (%)

	NORTH (N=4)			SOUTHEAST (N=4)		
	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)
Eye health / optician	100	0	100	50	50	100
Counselling / therapy	100	0	100	100	0	100
Sexual health & contraceptive services	100	0	100	75	0	75
Psychiatric services	100	0	100	75	0	75
Specialist alcohol	100	0	100	50	0	50
Mental health specialist	100	0	100	50	0	50
Self help groups	100	0	100	100	0	100
Specialist addictions	100	0	100	25	0	25
Community based nursing	100	0	100	100	0	100
Maternity related support	0	0	0	75	0	75
Detox	0	0	0	75	0	75
Occupational therapy	100	0	100	100	0	100
Residential rehab	100	0	100	100	0	100
Dietetics/nutritionist	100	0	100	75	0	75
Vaccinations / Flu jab	100	0	100	75	25	100
Physiotherapy	100	0	100	75	25	100
Podiatry	100	0	100	100	0	100
Community prescribing	100	0	100	100	0	100
Substitute prescribing	100	0	100	100	0	100
Geriatric / older people services	100	0	100	100	0	100
Homeless Multidisciplinary Supp.Team	100	0	100	50	50	100
homelessness nursing	0	0	0	75	0	75
Cervical screening	0	0	0	25	0	25
Mammogram / breast screening	0	0	0	25	0	25
other	0	0	0	0	0	0
missing	0	0	0	0	0	0

% = % providers in area



WHAT PROVIDERS TOLD US: DO YOU PROVIDE HEALTH SPECIFIC SERVICES IN ANY OF THE FOLLOWING AREAS? (%)

	SAMPLE (N=56)			SOUTH (N=6)		
	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)
exercise programmes / improve fitness	50	20	70	67	17	83
Mental health / well being	43	34	77	50	50	100
Drop-in (health related)	61	11	71	67	17	83
improving diet / nutrition / cooking	14	71	86	17	83	100
Health checks / MOTs	57	13	70	83	0	83
service user groups	25	46	71	17	83	100
NPS awareness	54	25	79	67	33	100
Oral health	64	9	73	67	17	83
alcohol awareness	43	41	84	33	67	100
substance use awareness	45	39	84	33	67	100
prescription drug use	55	20	75	83	17	100
End of life care	34	2	36	67	0	67
Social support	43	43	86	67	33	100
Suicide / self harm awareness	59	25	84	67	33	100
Counselling / therapy	70	13	82	100	0	100
Other	7	2	9	0	0	0

	BELFAST (N=23)			WEST (N=19)		
	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)
exercise programmes / improve fitness	52	22	74	47	26	74
Mental health / well being	39	43	83	58	21	79
Drop-in (health related)	65	13	78	63	11	74
improving diet / nutrition / cooking	17	65	83	11	68	79
Health checks / MOTs	43	26	70	74	5	79
service user groups	35	35	70	21	58	79
NPS awareness	52	17	70	63	11	74
Oral health	61	17	78	79	0	79
alcohol awareness	43	35	78	53	26	79
substance use awareness	48	30	78	53	26	79
prescription drug use	57	22	78	58	16	74
End of life care	43	4	48	21	0	21
Social support	39	43	83	26	53	79
Suicide / self harm awareness	52	26	78	58	21	79
Counselling / therapy	57	22	78	63	11	74
Other	4	0	4	16	5	21

% = % providers in area



WHAT PROVIDERS TOLD US: DO YOU PROVIDE HEALTH SPECIFIC SERVICES IN ANY OF THE FOLLOWING AREAS? (%)

	SOUTHEAST (N=4)			NORTH (N=4)		
	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)	SIGNPOST/REFER	PROVIDE DIRECTLY	YES (TOT)
exercise programmes / improving fitness	75	0	75	0	0	0
Mental health / well being	25	50	75	0	0	0
Drop-in (health related)	75	0	75	0	0	0
improving diet / nutrition / cooking	25	75	100	0	100	100
Health checks / MOTs	75	0	75	0	0	0
service user groups	25	50	75	0	0	0
NPS awareness	50	50	100	0	100	100
Oral health	75	0	75	0	0	0
alcohol awareness	50	50	100	0	100	100
substance use awareness	50	50	100	0	100	100
prescription drug use	50	50	100	0	0	0
End of life care	25	0	25	0	0	0
Social support	50	50	100	100	0	100
Suicide / self harm awareness	50	50	100	100	0	100
Counselling / therapy	100	0	100	100	0	100
Other	0	0	0	0	0	0

% = % providers in area



APPENDIX 7

SUBSTANCE USE

WHAT PROVIDERS TOLD US: NPS USE DIFFERS FROM GENERAL POPULATION?

	NI	SE	W	B	N	S		NI	SE	W	B	N	S
yes, very different	41	50	32	52	0	50	DIFFERENT (TOTAL)	93	75	95	96	100	83
yes, somewhat different	52	25	63	44	100	33	No different	7	25	5	4	0	17

% = % area

WHAT PROVIDERS TOLD US: % OCCURRENCE IN LAST 12M RELATING TO NPS USE

NI	6+ TIMES	3-5 TIMES	1-2 TIMES	NEVER	EVER	RANK
Erratic / risky behaviours due to NPS use	43	30	13	14	86	1
risky sexual activity whilst using NPS	27	38	18	18	82	5
increased injecting	9	29	27	36	64	17
increased needle sharing	4	5	46	45	55	20
increase in aggressive behaviour generally	32	36	13	20	80	8
increase in aggression in hostel	25	41	11	23	77	10
Increased antisocial behaviour	36	34	14	16	84	3
increase in NPS related activity in hostel	30	32	13	25	75	12
Increased begging / street activity	9	30	21	39	61	19
Increased rough sleeping	7	27	30	36	64	17
client withdraw / terminate service	16	43	13	29	71	15
increase calls to police	34	32	16	18	82	5
Increased crime	25	38	11	27	73	13
Mental health problems	45	36	5	14	86	1
Physical health problems	32	39	13	16	84	3
Ambulance calls / 999 relating to NPS	27	38	7	29	71	15
Emergency visits to A&E relating to NPS	23	41	9	27	73	13
Episodes of hospitalisation	11	43	25	21	79	9
Less engagement with services	29	41	13	18	82	5
Eviction/prevented from using services	11	43	23	23	77	10

% = % providers in area; ever= any occurrence in last 12 m



WHAT PROVIDERS TOLD US: % OCCURRENCE IN LAST 12M RELATING TO NPS USE

BELFAST	6+ TIMES	3-5 TIMES	1-2 TIMES	NEVER	EVER	RANK
Erratic / risky behaviours due to NPS use	30	35	13	22	78	1
risky sexual activity whilst using NPS	13	48	13	26	74	4
increased injecting	4	39	17	39	61	15
increased needle sharing	4	4	39	52	48	20
increase in aggressive behaviour generally	26	35	9	30	70	8
increase in aggression in hostel	22	35	9	35	65	11
Increased antisocial behaviour	30	26	17	26	74	4
increase in NPS related activity in hostel	22	35	9	35	65	11
Increased begging / street activity	9	39	9	44	57	18
Increased rough sleeping	9	35	17	39	61	15
client withdraw / terminate service	9	44	13	35	65	11
increase calls to police	17	35	17	30	70	8
Increased crime	13	35	13	39	61	15
Mental health problems	26	44	9	22	78	1
Physical health problems	22	39	17	22	78	1
Ambulance calls / 999 relating to NPS	17	39	0	44	57	18
Emergency visits to A&E relating to NPS	13	44	9	35	65	11
Episodes of hospitalisation	4	35	35	26	74	4
Less engagement with services	17	35	22	26	74	4
Eviction/prevented from using services	4	44	22	30	70	8
WEST	6+ TIMES	3-5 TIMES	1-2 TIMES	NEVER	EVER	RANK
Erratic / risky behaviours due to NPS use	37	47	11	5	95	1
risky sexual activity whilst using NPS	21	42	26	11	90	7
increased injecting	0	16	42	42	58	17
increased needle sharing	0	11	37	53	47	20
increase in aggressive behaviour generally	21	53	16	11	90	7
increase in aggression in hostel	21	53	11	16	84	9
Increased antisocial behaviour	21	63	11	5	95	1
increase in NPS related activity in hostel	11	53	16	21	79	12
Increased begging / street activity	11	21	21	47	53	19
Increased rough sleeping	5	21	32	42	58	17
client withdraw / terminate service	11	47	16	26	74	15
increase calls to police	32	47	16	5	95	1
Increased crime	26	47	5	21	79	12
Mental health problems	53	42	0	5	95	1
Physical health problems	37	42	16	5	95	1
Ambulance calls / 999 relating to NPS	11	58	11	21	79	12
Emergency visits to A&E relating to NPS	5	63	5	26	74	15
Episodes of hospitalisation	0	63	21	16	84	9
Less engagement with services	32	58	5	5	95	1
Eviction/prevented from using services	5	53	26	16	84	9

% = % providers in area; ever= any occurrence in last 12 m



WHAT PROVIDERS TOLD US: % OCCURRENCE IN LAST 12M RELATING TO NPS USE

SOUTH	6+ TIMES	3-5 TIMES	1-2 TIMES	NEVER	EVER	RANK
Erratic / risky behaviours due to NPS use	67	0	0	33	67	1
risky sexual activity whilst using NPS	50	17	0	33	67	1
increased injecting	17	33	17	33	67	1
increased needle sharing	17	0	50	33	67	1
increase in aggressive behaviour generally	33	33	0	33	67	1
increase in aggression in hostel	17	50	0	33	67	1
Increased antisocial behaviour	50	17	0	33	67	1
increase in NPS related activity in hostel	67	0	0	33	67	1
Increased begging / street activity	17	33	17	33	67	1
Increased rough sleeping	17	17	33	33	67	1
client withdraw / terminate service	50	17	0	33	67	1
increase calls to police	50	17	0	33	67	1
Increased crime	50	17	0	33	67	1
Mental health problems	67	0	0	33	67	1
Physical health problems	67	0	0	33	67	1
Ambulance calls / 999 relating to NPS	50	17	0	33	67	1
Emergency visits to A&E relating to NPS	50	17	0	33	67	1
Episodes of hospitalisation	50	0	17	33	67	1
Less engagement with services	67	0	0	33	67	1
Eviction/prevented from using services	33	17	17	33	67	1

SOUTHEAST	6+ TIMES	3-5 TIMES	1-2 TIMES	NEVER	EVER	RANK
Erratic / risky behaviours due to NPS use	75	0	25	0	100	1
risky sexual activity whilst using NPS	50	25	25	0	100	1
increased injecting	0	50	25	25	75	12
increased needle sharing	0	0	75	25	75	12
increase in aggressive behaviour generally	75	0	25	0	100	1
increase in aggression in hostel	25	50	25	0	100	1
Increased antisocial behaviour	75	0	25	0	100	1
increase in NPS related activity in hostel	75	0	25	0	100	1
Increased begging / street activity	0	50	25	25	75	12
Increased rough sleeping	0	50	25	25	75	12
client withdraw / terminate service	50	25	0	25	75	12
increase calls to police	75	0	25	0	100	1
Increased crime	75	0	25	0	100	1
Mental health problems	50	25	25	0	100	1
Physical health problems	50	25	0	25	75	12
Ambulance calls / 999 relating to NPS	75	0	25	0	100	1
Emergency visits to A&E relating to NPS	75	0	25	0	100	1
Episodes of hospitalisation	50	25	0	25	75	12
Less engagement with services	50	25	0	25	75	12
Eviction/prevented from using services	50	0	25	25	75	12

% = % providers in area; ever= any occurrence in last 12 m



WHAT PROVIDERS TOLD US: % OCCURRENCE IN LAST 12M RELATING TO NPS USE

NORTH	6+ TIMES	3-5 TIMES	1-2 TIMES	NEVER	EVER	RANK
Erratic / risky behaviours due to NPS use	75	0	25	0	100	1
risky sexual activity whilst using NPS	75	0	25	0	100	1
increased injecting	75	0	25	0	100	1
increased needle sharing	0	0	100	0	100	1
increase in aggressive behaviour generally	75	0	25	0	100	1
increase in aggression in hostel	75	0	25	0	100	1
Increased antisocial behaviour	75	0	25	0	100	1
increase in NPS related activity in hostel	75	0	25	0	100	1
Increased begging / street activity	0	0	100	0	100	1
Increased rough sleeping	0	0	100	0	100	1
client withdraw / terminate service	0	75	25	0	100	1
increase calls to police	75	0	25	0	100	1
Increased crime	0	75	25	0	100	1
Mental health problems	75	25	0	0	100	1
Physical health problems	0	100	0	0	100	1
Ambulance calls / 999 relating to NPS	75	0	25	0	100	1
Emergency visits to A&E relating to NPS	75	0	25	0	100	1
Episodes of hospitalisation	0	75	25	0	100	1
Less engagement with services	0	75	25	0	100	1
Eviction/prevented from using services	0	75	25	0	100	1

WHAT PROVIDERS TOLD US: EFFECT OF NPS USE...

	NI						BELFAST					WEST						
	a great effect	some effect	No effect	very little effect	Some / great	rank	a great effect	some effect	No effect	very little effect	Some / great	rank	a great effect	some effect	No effect	very little effect	Some / great	rank
Hostel environment	41	36	16	7	77	3	39	22	26	13	61	4	32	63	5	0	95	1
Staff safety	29	41	13	18	70	4	26	30	22	22	57	5	32	53	0	16	84	4
Client safety	29	39	16	16	68	5	22	35	26	17	57	5	32	47	5	16	79	5
Service delivery	29	34	16	21	63	6	22	44	22	13	65	3	32	37	11	21	68	6
Mental health client	71	11	14	4	82	1	61	13	22	4	74	1	84	11	5	0	95	1
Physical health client	54	27	14	5	80	2	52	17	22	9	70	2	58	37	5	0	95	1
	SOUTH						NORTH					SOUTHEAST						
Hostel environment	50	17	33	0	67	1	75	25	0	0	100	1	50	25	0	25	75	1
Staff safety	33	33	33	0	67	1	0	75	0	0	75	4	50	25	0	25	75	1
Client safety	50	17	33	0	67	1	0	75	0	0	75	4	50	25	0	25	75	1
Service delivery	50	17	33	0	67	1	0	0	0	0	0	6	50	25	0	25	75	1
Mental health client	67	0	33	0	67	1	75	25	0	0	100	1	75	0	0	25	75	1
Physical health client	67	0	33	0	67	1	0	100	0	0	100	1	75	0	0	25	75	1



WHAT PROVIDERS TOLD US ABOUT SUBSTANCE USE...

	NI	B	S	W	N	SE
Substance use differs from gen.pop.	88	78	67	100	100	100
<i>Different with regards to / issues relating to...</i>						
alcohol	84	70	67	34	100	100
NPS	71	61	67	27	100	75
Smoking / tobacco	73	70	67	25	100	75
Use of prescription drugs*	73	65	67	25	100	100
Other substances	0	0	0	7	75	0
Injecting behaviours	36	43	50	13	0	50
Other risk behaviours	32	30	33	0	0	0

% = % providers in area; *unintended / unprescribed use

WHAT CLIENTS TOLD US...

NI	NEVER	MONTHLY OR LESS	2-4 TIMES A MONTH	2-3 TIMES A WEEK	4+ A WEEK	MISSING	EVER
Tobacco (smoking)	27	7	4	11	57	3	71
e-cigarette (vaping)	91	3	1	2	2	2	7
Alcohol	18	27	14	37	14	2	80
NPS	85	5	1	3	3	2	14
Prescription drugs*	75	8	3	7	6	2	23
Methadone (prescribed)	96	1	0	0	1	1	3
Other substances	89	0	3	8	5	1	10
WEST	NEVER	MONTHLY OR LESS	2-4 TIMES A MONTH	2-3 TIMES A WEEK	4+ A WEEK	MISSING	EVER
Tobacco (smoking)	31	6	3	4	55	1	68
e-cigarette (vaping)	91	1	3	1	2	1	8
Alcohol	19	20	33	11	17	1	80
NPS	87	6	4	0	2	1	12
Prescription drugs*	76	9	6	1	7	2	22
Methadone (prescribed)	99	1	0	0	0	0	1
Other substances	92	0	3	1	3	0	8
BELFAST	NEVER	MONTHLY OR LESS	2-4 TIMES A MONTH	2-3 TIMES A WEEK	4+ A WEEK	MISSING	EVER
Tobacco (smoking)	27	8	3	5	57	1	72
e-cigarette (vaping)	91	4	3	1	1	0	9
Alcohol	19	34	19	13	14	0	81
NPS	85	4	5	2	5	0	15
Prescription drugs*	72	10	8	2	8	1	27
Methadone (prescribed)	96	1	2	0	1	0	4
Other substances	91	0	1	6	3	0	10

% = % area; *unintended / unprescribed use



WHAT CLIENTS TOLD US...

	NEVER	MONTHLY OR LESS	2-4 TIMES A MONTH	2-3 TIMES A WEEK	4+ A WEEK	MISSING	EVER
SOUTH							
Tobacco (smoking)	24	8	4	0	48	16	60
e-cigarette (vaping)	76	8	0	0	4	12	12
Alcohol	20	16	24	28	0	12	68
NPS	72	12	4	0	0	12	16
Prescription drugs*	76	4	0	4	4	12	12
Methadone (prescribed)	88	0	0	0	0	12	0
Other substances	80	0	0	0	8	12	8
SOUTHEAST							
Tobacco (smoking)	19	0	6	6	63	6	75
e-cigarette (vaping)	100	0	0	0	0	0	0
Alcohol	19	19	25	13	25	0	81
NPS	88	0	6	6	0	0	13
Prescription drugs*	69	0	19	13	0	0	31
Methadone (prescribed)	94	6	0	0	0	0	6
Other substances	69	0	6	0	25	0	31
NORTH							
Tobacco (smoking)	19	10	0	5	67	0	81
e-cigarette (vaping)	100	0	0	0	0	0	0
Alcohol	10	38	29	19	5	0	91
NPS	91	10	0	0	0	0	10
Prescription drugs*	86	5	5	5	0	0	14
Methadone (prescribed)	95	0	0	0	5	0	5
Other substances	95	0	0	5	0	0	5

% = % area; *unintended / unprescribed use



WHAT CLIENTS TOLD US...

	NEVER	MONTHLY OR LESS	2-4 TIMES A MONTH	2-3 TIMES A WEEK	4+ A WEEK	MISSING DATA	EVER
NI							
Injected	99	0	0	0	0	1	1
Shared injecting equipment	99	0	0	0	0	1	1
Engaged in risky sexual behaviours whilst intoxicated	79	13	4	2	1	2	21
Engaged in other risky behaviours whilst intoxicated	76	12	6	2	1	2	24
WEST							
Injected	100	0	0	0	0	0	0
Shared injecting equipment	100	0	0	0	0	0	0
Engaged in risky sexual behaviours whilst intoxicated	82	13	3	0	1	0	18
Engaged in other risky behaviours whilst intoxicated	84	9	7	0	1	0	17
SOUTHEAST							
Injected	100	0	0	0	0	0	0
Shared injecting equipment	100	0	0	0	0	0	0
Engaged in risky sexual behaviours whilst intoxicated	69	13	0	6	13	0	31
Engaged in other risky behaviours whilst intoxicated	56	13	13	6	13	0	44
BELFAST							
Injected	100	0	0	0	0	0	0
Shared injecting equipment	100	0	0	0	0	0	0
Engaged in risky sexual behaviours whilst intoxicated	80	11	5	3	0	1	19
Engaged in other risky behaviours whilst intoxicated	78	11	6	2	0	3	19
SOUTH							
Injected	88	0	0	0	0	12	0
Shared injecting equipment	88	0	0	0	0	12	0
Engaged in risky sexual behaviours whilst intoxicated	76	12	0	0	0	12	12
Engaged in other risky behaviours whilst intoxicated	68	20	0	0	0	12	20
NORTH							
Injected	100	0	0	0	0	0	0
Shared injecting equipment	100	0	0	0	0	0	0
Engaged in risky sexual behaviours whilst intoxicated	71	24	5	0	0	0	29
Engaged in other risky behaviours whilst intoxicated	62	24	5	10	0	0	38



CITED SOURCES OF HELP FOR SUBSTANCE USE ISSUES, TOP 5 RANKED

RANK	NI	%	BELFAST	%	WEST	%
1	staff member at project	33	staff member at project	37	staff member at project	30
2	GP	23	GP	28	GP	23
3	Addiction services	6	Addiction services	9	Social worker	8
4	CPN	6	CPN	5	CPN	8
5	Social worker	5	Pharmacist	4	other homeless service	6
RANK	SOUTH	%	NORTH	%	SOUTHEAST	%
1	staff member at project	39	staff member at project	100	Other (unspecified)	100
2	GP	20				
3	Social worker	15				
4	CPN	4				
5	Pharmacist	4				
6	Addiction services	4				

% = % responses (formal support) in area



APPENDIX 8

QUESTIONNAIRES

The **provider questionnaire** sought to gather data about the agency staff's perceptions of the health of those using their services; health related services they offer directly or in conjunction with health services, and potential gaps / concerns they have with current provision. The questionnaire was limited to online completion, though a number of providers downloaded, completed and returned by email. (Questionnaire presented below in basic format - live questionnaires followed best practice guidelines for presentation of questionnaires).

HEALTH & HOMELESSNESS QUESTIONNAIRE: PROVIDERS' QUESTIONNAIRE

The PHA have asked us to carry out research to examine the overall health of people receiving support from homelessness services, and to map what health services are available / needed. They will use the findings from this research, along with other available data to inform thinking on their upcoming strategy. Also, the Dept. of Health has emphasized the need for evidence when considering future services. So it is vitally important that as many providers complete the survey as possible to let us know about what health services are currently available, what areas need further development, and to identify gaps.

The research has two key elements: (1) a mapping exercise. This involves speaking to providers to gather information about services, and (2) baseline health information. We want to gather data about the health of people using your services. This involves asking you questions about their health needs. We have contacted you because a colleague has nominated you, or you agreed yourself to take part in this study. It is estimated that it should take no more than 20 minutes to complete, and as always, we appreciate your co-operation and input. **Please return your completed questionnaire by [date].** We appreciate your assistance, and the information you give will help us make the case for your services, identify gaps, and inform decision making around strategies and commissioning.

Agreement to take part in survey.

- I understand the purpose of this research.
- My responses will be on behalf of the organisation / project I work for. I am aware that participation is voluntary.
- I am aware that responses will be grouped with others, and that I / my project will not be identifiable.
- I understand that all data collected will be managed under data protection guidelines, encrypted if possible, and destroyed when the study ends.

Please indicate that you have read and understand the purpose of this study

- I understand the purpose of this study, and willing to take part
- I have read about the study, and I am not willing to take part
- I need some more info, please contact me (provide email / telephone number and name)

IF YOU HAVE ANY QUESTIONS OR CONCERNS, CONTACT US: [details provided]

Contact details

This section will be used for admin only. Your / your project's details will not appear in any report

*** 2. Please provide your project / organisation details:**

Project organisation	
Address	
city/town	
county	
postcode	
Contact (optional)	

*** 3. Please identify service type and the number of clients provided to (multiple answers allowed)**

- Emergency accommodation Refuge (i.e. dom. violence)
- Temporary / 2nd stage accommodation Floating Support
- other (give details below) 999
- Other (please specify)

4. please tell us the (approx) number of clients you can cater for:

Emergency accommodation Refuge (i.e. dom. violence)	
Temporary / 2nd stage accommodation Floating Support	
other (give details below) 999	
Other (please specify)	

5. How do clients access your service? (please tick all that apply)

- agency only
- agency
- self

6. Please identify main client types (multiple * answers allowed)

- men only
- women only
- singles
- couples
- families
- children (age 18 and under)
- children (age 18 and under) only

SECTION 2. ABOUT YOUR CLIENTS' HEALTH

In this section, we will ask you questions about your clients' health. Think about their health as a group / overall. Questions refer to adults who use your services. (If you also support children, you will be asked questions later in the survey)

7. Typically, our clients * tend to have....

No support needs	
Low support needs	
Medium support needs	
High support needs	

8. THINKING ABOUT YOUR CLIENTS, would you say that their health needs are different from general population?

No different	
Yes, somewhat different	
Yes very different	

You answered ' somewhat different' or 'very different' to the last question (Q8). Please tell us in what areas you think their health is different:

9. Physical heath

Physical health not really that different (go to Q10)	
diabetes	
Respiratory problems	
TB	
Weight management	
Asthma	
Disabilities	
Long term illness / LLTI	
Coronary / heart diseases	
Stroke	
Cancers	
COPD	
999	
Other physical health issues (please state)	

10. mental heath

mental health not really that different (go to Q11)	
Depression	
Anxiety	
Schizophrenia	
Suicidal thoughts	
Suicide attempts	
Self harm	
Dual diagnosis	
Personality disorder	
999	
Other (please tell us)	

11. alcohol and other substance use

Alcohol and substance use not really different (go to Q12)

Alcohol

Legal highs / NPS

smoking (including vaping / e-cigarettes)

Prescription drugs (not intended use)

injecting behaviours (please tell us more)

other risky behaviours associated with use (please tell us more)

Other substances (please tell us) or other comments:

--

12. Other health & well being issues

No other real differences in health (go to Q13)

Sexual health

Oral / dental health

eye health

Nutrition health / diet

Trans/ LGBT specific health

complex / multiple needs

Learning difficulties

Social support / isolation

Other (please tell us more)

--

13. Thinking of your clients over the last 12 months: how frequently did the following occur?

never 1-2 times 3-5 times 6+ times

Emergency visits to A&E

Ambulance calls / 999

Emergency hospital admission

Emergency psychiatric admission

taking any regular medicines

Refused registration with GP

Refused registration with dentist

	never	1-2 times	3-5 times	6+ times

14. Thinking of your clients over the last 12 months: how frequently did the following occur?

never 1-2 times 3-5 times 6+ times

Engage in excessive alcohol consumption

Engage in use of legal highs

Engage in use of other substances (tell us more in Q15)

use of prescription medication other than as prescribed

Miss a meal regularly

Engage in risk behaviours (tell us more in Q15)

Engage in street activity (e.g. begging, drinking, etc.)

rough sleeping

	never	1-2 times	3-5 times	6+ times

15. Have you any additional comments about your clients' alcohol / substance use, risk behaviours relating to this, or any information you would like to include?

--

SECTION 2a. NPS USE

In this section we have questions about New Psychoactive Substances (NPS). NPS are also known as 'legal highs' (though recently made illegal), and contain chemicals that produce similar effects to 'traditional' illegal substances like cocaine, cannabis, ecstasy, etc. We have questions about your clients' use of NPS, and their impact on them and your service.

16. Have you seen an increase in the use of NPS ('Legal Highs') with your client groups over the last 2 years?

Yes

No

17. Thinking of your clients over the last 12 months, how often did the following occur due to nps use?

	never	1-2 times	3-5 times	6+ times
Erratic / risky behaviours due to NPS use				
Engaged in risky sexual activity whilst using NPS				
Increased injecting				
Increased needle sharing				
Increase in aggressive behaviour generally				
Increase in aggression in hostel				
Increased antisocial behaviour				
Increase in NPS related activity in hostel				
Increased begging / street activity				
Increased rough sleeping				
Withdrawal from / termination of services (by client)				
Calls to police / police interventions				
Increased criminal activity				
Mental health problems (psychosis, paranoia)				
Physical health problems				
Ambulance calls / 999 relating to NPS				
Emergency visits to A&E relating to NPS				
Episodes of hospitalisation				
Less engagement with services				
Eviction/prevented from using services				
Other (tell us more)				

18. What impact is NPS use having on...

	No effect	Very little effect	Some effect	Great effect
the hostel environment				
staff safety				
other resident / client safety				
service delivery				
the mental health of the client using NPS				
the physical health of the client using NPS				

19. If you answered that NPS was having an effect on any item listed in Q18, please tell us more:

20. Do you have any protocols / procedures in place to deal with NPS related activity?

Yes No

21. If you answered 'yes' or 'we are working on these' to Q20, please tell us more:

22. Any other comments about NPS use / issues?

SECTION 3. ABOUT THE WORK YOU DO WITH CLIENTS

23. Do you conduct a Health needs Assessment * with your clients?

yes, as part of application	<input type="checkbox"/>	yes, as part of support planning	<input type="checkbox"/>
yes, as part of induction	<input type="checkbox"/>	No assessment made	<input type="checkbox"/>
Other or more than one of these, (please tell us more)	<input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	

24. Do you ensure your clients are registered with any of the following services?

	Yes	No	
GP services	<input type="checkbox"/>	<input type="checkbox"/>	
Dentist services	<input type="checkbox"/>	<input type="checkbox"/>	
Other health service (please tell us)	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>

25. Do you ensure your clients are in contact with any of the following services (* if they need them)?

	yes, we provide directly	yes, we have to signpost / refer	not offered
Sexual health & contraceptive services			
Eye health / optician			
community nursing			
Occupational therapy			
Physiotherapy			
Geriatric / older people services			
Psychiatric services			
Podiatry			
Maternity related support			
Homelessness nurse			
Homeless multidisciplinary support team			
Mental health specialist			
Counselling / therapy			
Dietetics/nutritionist			
Specialist alcohol			
Specialist addictions			
Detox			
Residential rehab			
Community prescribing			
Substitute prescribing			
Self help groups			
Vaccinations / Flu jab			
Mammogram / breast exams / screening			
Cervical smear / screening			
other (tell us more below)			

26. Does your project / organisation provide health specific services in any of the * following areas?

	yes, we provide directly	yes, we have to signpost / refer	not offered
exercise programmes / improving fitness			
Mental health / well being			
Drop-in (health related)			
improving diet / nutrition / cooking			
Health checks / MOTs			
service user groups			
legal high / NPS awareness			
Oral health			
alcohol awareness			
substance use awareness			
prescription drug use			
End of life care			
Social support			
Suicide / self harm awareness			
Counselling / therapy			
Other (please state below)			

27. Please feel free to provide us with additional information to support Q26 (optional):

28. Do you provide projects in partnership with health & social specific organisations / services? (e.g. Trusts, Hospitals, Gps, PHA, etc)

Yes (please tell us below) No

29. Do you provide projects in partnership with the local community / community based initiatives? (e.g. community groups, charities, community & voluntary sector organisations, etc...)

Yes (please tell us below) No

We would like to include case studies in our final report to illustrate best practice and the work that goes on. Does your organisation have any health specific project(s) that you think should be considered for inclusion as a case study?

Yes (please give us contact details below) No

31. Do you think there are gaps in health related services for your client group?

Yes (please tell us below) No

32. In the last 12 months, have you experienced any of the following:

- issues with suitability of available health services to the needs of your clients
- issues with waiting times
- barriers to access of existing services
- issues with referral pathways / protocols
- mismatch between client's health needs and service we can offer on referral
- need for a service / services that currently not available

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

38. alcohol and substance use

- no difference in alcohol / substance use issues (go to Q39)
- use of alcohol
- use of "legal highs" (NPS)
- use of prescription drugs (not as prescribed)
- use of other substance (please tell us)
- Other issues (please state) / comments

39. other areas of health & well being

- no difference in other health areas (go to Q40)
- problems at school
- truancy / missing school
- Special Education Needs / Educational Statement
- Behavioural problems
- aggression
- being bullied
- Lack of Exercise / fitness
- LGB&T health issues
- engaged in risky sexual behaviours
- engaged in other risk behaviours (please tell us)
- Other issues (please state) / comments

40. Have you any additional comments about these children's health?

--

41. Thinking of the children you work with: over the last 12 months how frequently did the following occur?

	never	1-2 times	3-5 times	6+ times
Emergency visits to A&E				
Ambulance calls / 999				
Emergency hospital admission				
Emergency psychiatric admission				
taking any regular medicines				
truant from school				
Refused registration with GP				
Refused registration with dentist				
missed key vaccinations				
excluded from school				
missed school due to illness				
Miss a meal regularly				
problems at school				

42. Thinking of the children you work with: over the last 12 months, how often did the following occur:

	never	1-2 times	3-5 times	6+ times
Engage in excessive alcohol consumption				
Engage in use of legal highs				
Engage in use of other substances				
use of prescription medication other than as prescribed				
Engage in street activity (e.g. begging, drinking, etc.)				
rough sleeping				

43. Thinking of the children you work with, have you seen an increase in the use of legal highs / nps over the last two years?

Yes

<input type="checkbox"/>
<input type="checkbox"/>

No

44. Thinking of the children you work with, and their nps use: over the last 12 months, how often have the following occurred?

	never	1-2 times	3-5 times	6+ times
Erratic / risky behaviours due to NPS use				
engaged in risky sexual activity whilst using NPS				
increased injecting				
increased needle sharing				
increase in aggressive behaviour generally				
increase in aggression in hostel / service to other clients				
increase in aggression in hostel / service to staff				
Increased antisocial behaviour				
increase in NPS related activity in hostel				
Increased begging / street activity				
Increased rough sleeping				
Increased crime				
Mental health problems (psychosis, paranoia)				
Physical health problems				
Ambulance calls / 999 relating to NPS				
calls to police / police interventions				
Emergency visits to A&E relating to NPS				
Episodes of hospitalisation				
Less engagement with services				
withdrawal / termination of services (by client)				
Eviction/prevented from using services				
services not equipped to deal with their NPS use / related behaviour				
Other (please tell us)				

45. What impact is NPS use having on...

- the hostel environment
- staff safety
- resident / client safety
- service delivery
- the physical health of the child / young person using NPS
- the mental health of the child / young person using NPS

	No effect	Very little effect	Some effect	Great effect

46. Thinking of the children you support, do you have any protocols / procedures in place to deal with NPS related activity?

Yes

No

47. If you answered 'yes' or 'we are working on it' to the last question, please tell us more:

--

48. Thinking of the children you work with, do you have any other comments about NPS use / issues?

--

49. Do you conduct a Health needs Assessment with your clients who are children?

yes, as part of application

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

yes, as part of support planning

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

yes, as part of induction

No assessment made

Other or more than one of these, (please tell us more)

<input type="text"/>

50. Do you ensure your clients are registered with any of the following services?

GP services

Yes No

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

Dentist services

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

Other health service (please tell us)

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

51. Over the last 18 months, have you provided health projects in partnership with any of the following?

Yes (please tell us below)

<input type="checkbox"/>

No

<input type="checkbox"/>

<input type="text"/>

52. We would like to include case studies in our final report to illustrate best practice and the work that goes on. Does your organisation have any health specific project(s) for children that you think should be considered for inclusion as a case study?

Yes (please give us contact details)

<input type="checkbox"/>

No

<input type="checkbox"/>

<input type="text"/>

53. Do you think there are gaps in health related services for children? no 999 yes (please tell us more)

Yes

<input type="checkbox"/>

No

<input type="checkbox"/>

<input type="text"/>

54. In the last 12 months, have you experienced any of the following:

issues with children transitioning from child to adult services

Yes No

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

lack of services suitable to the needs of children

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

issues with waiting times

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

barriers to access of existing services

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

issues with referral pathways / protocols

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

mismatch between child's health needs and service we can offer on referral

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

need for a service / services that currently not available

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

external pressures to offer our services to children

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

55. If you answered 'yes' to any item in Q54, please tell us more:

<input type="text"/>

56. Any other general comments about health related services provided to children?

<input type="text"/>

57. Have you received training / can access training on any of the following health related issues?

	yes, we provide directly	yes, we have to signpost / refer	not offered	no, but we'd like to	not needed / applicable
Mental health conditions					
Personality disorders					
Mental health & wellness (e.g. WRAP, mindfulness)					
Alcohol awareness					
Substance use awareness					
Legal highs awareness					
Harm reduction (alcohol)					
Harm reduction (substance use)					
Harm reduction (NPS)					
Counselling / therapy					
Health – children					
Health – pregnancy and infants					
Health – elderly					
Health – end of life / palliative					
Disabilities					
Learning difficulties / disabilities					
Trans / LGB&T related health					
Nutrition / healthy eating					
Oral health					
Exercise / improving fitness					
Developing social support					
other (tell us more below)					

58. As part of this study, we are keen to map all health related services that homeless services can offer to their service users. Do you know of services that you use / in your local area, that we should contact? If you have any other information about services / resources, please let us know.

59. Finally, any other comments?

HEALTH & HOMELESSNESS QUESTIONNAIRE: CLIENTS' QUESTIONNAIRE

The Public Health Agency (they are responsible for improving public health) have asked us to carry out research to look at the health of people who receive support from homelessness services.

They have also asked us to map what services are available. They will use the findings from this research to help them decide on their next strategy. We think it is very important that we get information from as many people using these services as possible, and we want to hear what you think. That way, we can make sure that we have a good picture of your health, what services you might need, what services you use (and don't use), and what you think of them.

What's the study about?

So, we are asking you to complete a questionnaire. The questions will ask you about your health now, your health in the past, and what support you receive for your health issues. We think that it should take no more than 20 or 25 minutes to complete. So, if you'd like to help us by completing a questionnaire, here's what you need to know:

- You have to be 18 or older.
- You are doing this voluntarily - you don't have to take the survey, and you can stop anytime you want.
- You can skip questions if you are not comfortable answering them.
- There are no right or wrong answers - just give the answer you think is most accurate.
- Your name will not appear in any report we write. You will not be identifiable in any way.
- You can complete it by yourself, or get your key worker or another member of staff to help.

We appreciate you taking the time to do this. Thank you!

1. Please tick which you identify yourself with?

Male

Female

Other (tell us)

Yes No

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

2. What age are you?

18 - 29

30 - 44

45 - 59

60+

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

3. How long have you been homeless (if you can't remember exactly, a rough answer will do)? Length of time:

4. What was the main reason for your homelessness? (Please choose one)

family breakdown / dispute

domestic violence / other abuse

mortgage or rent arrears / debt

Relationship breakdown

Shared accommodation breakdown

Eviction

intimidation

overcrowding

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

tenancy cessation

fire damage

leaving care

prison

accommodation not suitable

no accommodation in ni

mortgage or rent arrears/debt

Other (please tell us)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

5. Have you been homeless before?

Yes No

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

6. Have you ever slept rough?

Sleeping rough means you've slept in a place not designed for people to stay / sleep – for example, in a car, derelict building, outside, etc.

Yes No

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

7. How long have you been staying here in / getting support from this project (if you can't remember exactly, a rough answer will do)?

Length of time:

<input type="text"/>

SECTION 2: ABOUT YOUR HEALTH

8. Please tell us how much you agree with the following statements:

totally agree agree disagree totally disagree

I am in good health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My health has got worse since being homeless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Do you have children staying with you?

Yes
(go to next question) No
(go to bottom of page, click 'next')

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

10. Thinking about the children staying with you, please tell us how much you agree with the following:

totally agree agree disagree totally disagree

They are in good health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
their health has got worse since being homeless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. If you feel their health has got worse, please tell us more: *(If their health hasn't got worse, go to bottom of page and click 'next')*

Physical health	<input type="text"/>
Mental health	<input type="text"/>
Other health	<input type="text"/>

12. Does your child have any specific health conditions - this includes mental health or physical health problems that have been diagnosed, any disabilities, etc... *(If they have no health issues, got to bottom of page and click 'next')*

<input type="text"/>

13. Have you ever had....

	Yes in last 12 months	Yes, more than 12 months ago	No
A heart attack			
Diabetes			
A stroke			
Cancer			
Heart surgery			
High blood pressure			
Dementia (e.g. Alzheimer's and similar)			
Disability (tell us more)			
Heart disease			
A blood borne infection			
TB			
Parkinson's or similar			
Asthma			
Liver / kidney problems			
Chest pain/ respiratory / breathing problem			
COPD			
poor diet / nutrition			
High blood cholesterol			
Dental / teeth problems			
Problems with feet			
Problems with mobility			
A test for blood borne infections (e.g. Hep B, Hep C, HIV, AIDS)			
Difficulty seeing / eye problems			
Sexual health			
Skin / wound infections or problems			
Stomach problems			
Urinary tract problems			
Other (tell us more)			

IF YOU ANSWERED 'YES' TO ANYTHING IN THE LAST QUESTION, GO TO NEXT QUESTION, OTHERWISE, GO TO BOTTOM OF PAGE AND CLICK 'NEXT'.

14. Are you receiving support/treatment to help you with * these problems?

Yes, I'm getting the support I need	
Yes, but I would like more support	
I was offered but chose not to use it	
No, but it would help me	
No, I don't need it any help at the minute	
None was offered	
Other (please specify)	

20. Please tell us...

how often do you feel that you lack companionship?
 how often do you feel left out?
 how often do you feel isolated from others?

Hardly ever	some of the time	Often

21. Do you have a mental health issue that has been diagnosed by a doctor or health professional?

Yes No

--	--

22. Are you receiving support/treatment to help you with these problems?

Yes, I'm getting the support I need
 Yes, but I would like more support
 I was offered but chose not to use it
 No, but it would help me
 No, I don't need it any help at the minute
 None was offered
 Other (please specify)

23. Who provides you with the support that you are receiving? (more than one answer allowed)

staff member at project
 other homeless service (tell us more)
 Homeless Public Health Nursing Service staff ("Homelessness nurse")
 GP
 Hospital based services / psychiatric services
 Therapy / counselling
 CPN
 Staff at other health services (tell us more)
 gender identity care clinic
 memory services for dementia
 learning disability services
 community clinic / health centre
 Other (please tell us)

24. How often have you (if ever) used any of the following...

Never Monthly or less 2-4 times a month 2-3 times a week 4+ a week

Tobacco (smoking)
 e-cigarette (vape / vaping)
 Alcohol
 Legal highs (please tell us more)
 Prescription drugs (not as intended)
 Methadone (prescribed)
 Other substances (please tell us...)
 please tell us more:

	Never	Monthly or less	2-4 times a month	2-3 times a week	4+ a week

25. How often have you (if ever) used any of the following...

	Never	Monthly or less	2-4 times a month	2-3 times a week	4+ a week
Injected					
Shared injecting equipment					
Engaged in risky sexual behaviours whilst intoxicated					
Engaged in other risky behaviours whilst intoxicated					
please tell us more:					

26. Are you receiving support / advice for your alcohol / substance use?

Yes, I'm getting the support I need	
Yes, but I would like more support	
I was offered but chose not to use it	
No, but it would help me	
No, I don't need it any help at the minute	
None was offered	
Other (please specify)	

27. What substances are receiving support for?

28. Who provides you with the support that you are receiving? (more than one answer allowed)

staff member at project	<input type="checkbox"/>	
other homeless service (tell us more)	<input type="checkbox"/>	
Homelessness nurse	<input type="checkbox"/>	
GP	<input type="checkbox"/>	
service user group	<input type="checkbox"/>	
Support group (AA, Al-Anon, NA, etc)	<input type="checkbox"/>	
Staff at other health services (tell us more)	<input type="checkbox"/>	
Social worker	<input type="checkbox"/>	
Substitute prescribing	<input type="checkbox"/>	
CPN	<input type="checkbox"/>	
Hospital based services	<input type="checkbox"/>	
Pharmacist	<input type="checkbox"/>	
Addiction services	<input type="checkbox"/>	
Community addictions team (CAT)	<input type="checkbox"/>	
Drug outreach team (DOT)	<input type="checkbox"/>	
staff from Homeless Public Health Nursing Service ("Homelessness nurse")	<input type="checkbox"/>	
Other (Please tell us more):	<input type="checkbox"/>	

29. In the last 12 months how frequently would you say the following occurred?

	never	1-2 Times	3-5 Times	6+ Times
Emergency visit to A&E				
Ambulance called / 999				
Emergency hospital admission				
Visited GP				
Visited dentist				
Visited optician				
Outpatient appointment				
Missed a medical appointment				
Been prescribed prescription drugs				
Vaccination for Flu				
Met with a support group / peer group				
Other vaccination				
Used a Walk-in clinic				
Had a health check / MOT				
Had a visit with staff from Homeless Public Health Nursing Service (homeless nurse)				
Had a visit with other nurse				
Please tell us more				

30. If you have used ANY of A&E, hospital OR ambulance in the past 12 months please tell us why?

31. How much do you agree with the following...

	Totally Agree	agree	disagree	totally disagree
I am inl know where to get information about health services if I need them good health				
My health has Staff here (in the project) provide me with the help I need				
Staff here (in the project) help me find other professionals who can help me with health issues				
I am receiving the support I need from health services				
I know how to access health services if I need them				
I find it easy to get the help I need from health services				

32. Do you have any other commments about your health or the support you receive (or need)?

The survey is complete. Thank you for your time - very much appreciated. If you have any questions, or need more info on where to go for help with health issues, please contcat us: [details]

