

# Multiple exclusion homelessness in the UK: migrants. Briefing paper no. 2

YHRMP ID  
Salford 2014 - 7  
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## Aims

To examine the experiences of adult migrants affected by multiple exclusion homelessness [MEH] in 7 cities in the UK, and compare with non-migrant adults similarly affected.

## Methodology

The paper is based on the findings of an Economic and Social Research Council [ESRC] funded study entitled 'Multiple Exclusion Homelessness Across the UK: A Quantitative Survey'. 1,286 adults were initially recruited from 7 cities in the UK, including Leeds, and asked to complete a 'Census Questionnaire Survey'. The sample was recruited through 'low-threshold' services [see extra information below]. An extended survey was conducted with 452 of the initial sample who had experienced MEH.

Migrants were defined as people born outside the UK, who had migrated to the country aged 16 or older. Multiple Exclusion Homelessness was defined as having experienced homelessness [including temporary/unsuitable accommodation as well as sleeping rough] and one or more conditions described as 'deep social exclusion', which included:

- 'institutional care' [prison, local authority care, mental health hospitals or wards]
- 'substance misuse' [drug, alcohol, solvent or gas misuse], or
- participation in 'street culture activities' [begging, street drinking, 'survival' shoplifting or sex work]

## Key issues

Migrants were found to comprise 17% of all clients presenting to 'low threshold services' with experiences of MEH, with a significant concentration in London. 78% of all service users were male and those from migrant groups were, on average, younger than non-migrants.

Migrants with experience of MEH were more likely to have spent their adult life working in casual, short-term or seasonal work and also to have experienced more unemployment. This occurred despite being more likely to report having academic or vocational qualifications than non-migrants.

Fewer than half of the migrants interviewed were receiving benefits and they were more likely than non-migrants to receive money from paid work, charities, family and friends. Despite this, significantly more migrants reported not having received any money at all in the previous month. Migrants from Central and Eastern Europe were most likely among migrants as a whole to have experienced absolute destitution. Although those in the migrant group were more likely to have slept rough than non-migrants, the authors noted they were at considerably lower risk of other types of exclusion. Their first experience of homelessness typically occurred after arrival in the UK [82%] and they reported fewer of the known childhood risk factors associated with MEH.

Overall, migrants have a 'lower overall 'threshold' of personal problems and associated support needs' and migrant MEH is associated with welfare restrictions, a lower ability to navigate local services and limited levels of English, rather than the complex needs or childhood trauma which are often observed among British people experiencing MEH.

## Recommendations

The reduced presence of historical risk factors in migrants [compared to non-migrants] experiencing MEH means that more tailored services need to be developed which focus on practical issues such as accessing benefits and improving language skills. Traditional homelessness services may therefore not have the necessary resources or skills to work with migrants affected by MEH.

The higher levels of education and qualifications among migrants indicate that with the right support, finding paid work may be possible. Finally, the authors reiterate previous calls for a pan-European response to the issue of MEH facing Central and Eastern European migrants.

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'Low-threshold' refers to services which do not require users to meet certain conditions in order to qualify for access for example receiving specific benefits, nationality status etc. Soup runs, street

outreach teams and drop-ins are examples.

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