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Making Every Adult Matter

A four-point manifesto *for tackling multiple needs and exclusions*



CLiNKs

DrugScope

homeless link

mind

lifechanging, costeffective:

Making Every Adult Matter

www.meam.org.uk

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Introduction

Too often people with multiple needs and exclusions fall between the gaps of services to the margins of our society. This manifesto proposes how the next government, statutory services and the voluntary sector can change that for good.

People with multiple needs and exclusions are an integral part of every community. They experience a combination of issues that impact adversely on their lives such as substance misuse, mental ill health, homelessness and offending. They lack effective contact with the services they need and tend to lead chaotic lives, resulting in substantial costs to society.

They are usually well known to local statutory and voluntary services, councils or criminal justice agencies. But differing priorities and a lack of coordination mean that they are often excluded from services, or that they receive help with one, but not all, of their needs.

This can lead to people being left to 'recycle' around our welfare system, rarely getting the overall help they need to make meaningful changes to their lives. It wastes their potential, affects our communities and results in inefficient expenditure of public funds.

We have formed the Making Every Adult Matter (MEAM) coalition because these individuals span the services provided by our frontline member agencies. This pamphlet builds on our initial publication *In From the Margins*. Within it we make a promise to the next government that we will work with our 1600 frontline agencies and statutory partners to build on progress and achieve change.

To succeed we need the next government to create a framework for this action by committing to this manifesto. Doing so will improve people's lives, promote responsibility and community cohesion, and create more cost effective services in these times of fiscal constraint.



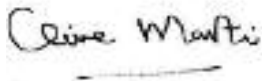
It will support social policy objectives around reducing reoffending, increasing the effectiveness of drug treatment, ending rough sleeping and promoting better mental health.

The manifesto builds on what we already know about multiple needs and exclusions. Many of our members are already responding to the challenge; the Adults Facing Chronic Exclusion (ACE) pilots are testing local service responses; and across government Public Service Agreement (PSA) 16 is focusing attention on some groups with multiple problems.

We can build on this progress, but it is also clear that we have much further to go. The most excluded and chaotic individuals are not covered by the PSA and services focused on people with multiple needs and exclusions exist only in some areas.

This manifesto shows how government can define the group, recognise the social and economic case for action, implement a national policy framework for multiple needs and exclusions and measure national progress. A green paper exploring a national policy framework would be an excellent starting point.

We look forward to supporting the next government. We call on all parties to commit to this manifesto as we work towards a time when every adult matters, regardless of the complexity of their needs.



Clive Martin
Director
Clinks



Martin Barnes
Chief Executive
DrugScope



Jenny Edwards
Chief Executive
Homeless Link



Paul Farmer
Chief Executive
Mind

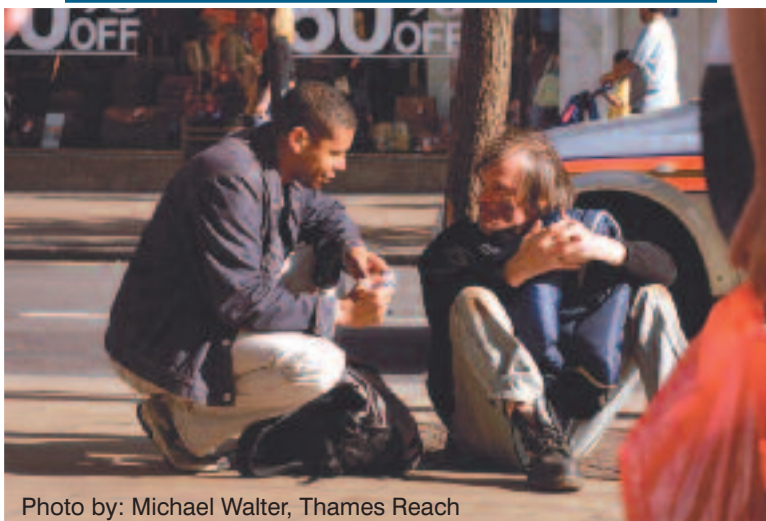


Photo by: Michael Walter, Thames Reach

We promise to work with our member agencies and statutory partners to achieve change. We need the next government to make a promise too, by committing to this manifesto.

Meet 'T' – case study

T is 30 years old. He started to use drugs at 14, progressing to heroin and crack by the time he was 20. His life 'spiralled out of control' and within a year he was in trouble with the police.

From the age of 21 – 26 he was in court 14 times for various crimes. He became homeless due to rent arrears and ended up in a squat. Despite attending various drug treatment programmes and having some success, he was arrested aged 29 for drug offences and sentenced to a year in prison.

His sentence meant he missed the mental health appointment he'd been waiting for. In prison he completed a detox programme and participated in education courses, gaining four certificates, but received only medication for his depression. On release he went to the probation service, who failed to help with his fragile housing situation, and to a doctor who didn't offer further help for his mental health needs.

Confused he contacted a service specialising in multiple needs. Within three weeks he was assessed and introduced to a shared house. He's now receiving help for his drug, mental health and housing issues and is on a long waiting list for counselling.

Things could have been very different for T. Without the support he's received he says he'd be lost and that the likelihood of returning to substance misuse, homelessness, mental ill health and reoffending would be high.

But instead he's changed his life. He's developed an interest in research and is responsible for training other service users – something he'd like to follow up as a career - and he's helping a national service user forum with their consultation work.

It's a long way from the days of squats, drugs and prison – and an achievement of which he's rightly proud.

T is a service user at the charity P3 and a member of the Revolving Doors Agency National Service User Forum



Photo not of 'T' – Photo by: Richard Bailey

Meet 'W' – case study

Lots of services know 'W'. He became homeless following bereavement when he was a teenager and ended up sleeping rough in London.

For many years he refused to go into a hostel. He developed a serious multiple drug habit and his mental health deteriorated. He was arrested on a weekly basis, regularly summoned to court and was sent to prison for four sentences. He's been admitted to hospital for five serious incidents and attended numerous outpatient appointments.

It took years to persuade W to come off the streets. But even then he was still living chaotically and was often excluded from a range of services. Finally, a hostel support worker managed to connect with him. W credits this man and the services that he has since received, for turning his life around.

A detox programme was arranged, followed soon after by a place in a specialist housing and drugs project. W's mental health was assessed and he was prescribed anti-depressants and

anti-psychotics. His drugs worker provides advice and someone to talk to.

Through the support he's received and his own perseverance W has transformed his life. He's been off drugs since the detox almost a year ago. He's won awards for his service user participation and he's attending two local art classes, developing his skill in painting abstract canvases.

Although one day W would like to live by the sea, he's pretty happy with his new life in London. He 'steers clear of trouble' and hasn't been in contact with the police or emergency hospital services in the last year. It's a long way from the time when the outreach teams, the hostels, the police and the prisons all saw W regularly, in varying degrees of chaos.

W says it's the painting that's made the biggest difference. That and the workers – a reference to the services that have stuck with him, recognised his multiple needs and supported him to be where he is today.

W is a service user at the charity Thames Reach



Sadly not everyone with multiple needs and exclusions has such positive stories to tell.

This manifesto is about creating a national policy framework to change that for good...

Define multiple needs and exclusions

In any local area people will tell you about individuals with multiple needs and exclusions. In most places, they will list them by name. The same people will be mentioned by criminal justice agencies, drug treatment teams, homelessness and mental health services.

The next government should:

- > **Identify people with multiple needs and exclusions at the local level using national guidance**

> People with multiple needs and exclusions are a subset of a much wider group of individuals recognised by government as suffering from deep and persistent social exclusion.¹ They stand out as a subset because they fit each of the following criteria. They:

- Experience a combination of issues that impact adversely on their lives
- Are routinely excluded from effective contact with services they need
- Tend to lead chaotic lives that are costly to society

In our previous report the term 'multiple needs' was used to describe this same subset. In this pamphlet we use 'multiple needs and exclusions' to emphasise that these individuals differ from those who have multiple problems but are well connected to *each and every* service they need. Such a definition is supported by a number of academic studies.²

Due to the limitations of national data, no study has yet been able to translate a definition of multiple needs and exclusions into an exact assessment of

national numbers.³ This is not surprising, as people excluded from services are also excluded from service-based statistics.

It is known however that most individuals with multiple needs and exclusions find themselves in prison or the homelessness population, which together at any one time stands at around 140,000.⁴ Perhaps around 40% (56,000) of this population have multiple problems.⁵ However, as some of these individuals may be effectively linked to *each and every* service they require, while other populations, in particular sex-workers, will also include people with multiple needs and exclusions, we view 56,000 only as an indicative snapshot figure.

Given the lack of national data this indicative snapshot figure needs to be tested by local definition. There is real value in asking local authorities and their partners to define people with multiple needs and exclusions at the local level through the services and professionals most likely to come into contact with them.

A local approach to identification is not without precedent.⁶ Using the MEAM definition of multiple needs and exclusions the next government could easily require local authorities and their partners to identify people with multiple needs and exclusions in their area. Some areas may identify less than five individuals, while others may find that they have 50 or more.

People suffering from multiple needs and exclusions fit all three criteria:

- **Experience a combination of issues that impact adversely on their lives – for example: poor housing or homelessness; substance misuse; poor mental health in its broadest sense; personality disorder; learning difficulties; disability; poor physical health; difficulty forming and sustaining relationships; sex working; low level skills; behavioural difficulties; vulnerability because of age; a history of offending or institutionalisation; family breakdown; domestic violence; trauma; abuse; or neglect. An individual may have one primary need alongside others or a combination of lower level needs that together are a cause for concern**
- **Are routinely excluded from effective contact with services they need – this may be because: one or all of their needs fall outside the threshold for case managed support; services disagree about who should take responsibility; needs have not been formally diagnosed; services exclude people with certain diagnoses or feel unable to cope with multiple needs; people are helped with one but not all of their needs; or they shy away from service provision**
- **Tend to lead chaotic lives that are costly to society – caused by their routine exclusion from or ad-hoc use of the services that should be there to help coupled with inappropriate use of emergency responses and the criminal justice system. Some individuals will be visibly chaotic in the community, others will be quietly chaotic and harder to identify⁷**



Local areas can list people with multiple needs and exclusions by name. They are few in number and should be defined locally following national guidance.



Accept the social and economic case for action

People with multiple needs and exclusions are a small part of the population who tend to lead chaotic lives that are costly to government and society. Without effective service interventions their needs and exclusions result in extreme marginalisation and activities that adversely affect the communities in which they live. In this time of increasing fiscal constraint we need to act now – there are strong social and economic cases for action.

The next government should:

- > **Act because it benefits individuals, communities and wider social policy objectives**
- > **Act because it's more cost effective**

> People with multiple needs and exclusions are an integral part of our communities. Yet without the intervention of effective services they lead damaged and impoverished lives, their potential is wasted and our communities suffer the negative effects of their activities.

It's not easy to help this group, but in frontline services that recognise and respond to multiple needs it can and does happen. People are supported to change their lives and take up the rights and responsibilities that society expects. Like T and W, the transformation is normally life changing.

These amazing personal journeys benefit communities and other social policy objectives too. Getting it right reduces crime, drug-related harms and rough sleeping. It supports community cohesion, responsible citizenship, better mental health and economic prosperity – all key to functioning and successful neighbourhoods.

People with multiple needs and exclusions often can't call on the help of family and friends, so change requires the support of responsive services. Such services are needed in all local areas.

> People with multiple needs and exclusions use a disproportionate amount of health, criminal justice and emergency service resources because they are not effectively connected to the services they need.

Efforts to help them are too often uncoordinated, provided on an emergency basis and therefore ineffective in the long-term. Homelessness services and prison in particular can serve as a response of last resort, rather than a well planned intervention that could lead more quickly to better outcomes. The national policy framework proposed in this manifesto shows that it doesn't have to be this way.

*"I've been in 19 times since '96. Only for three months here, two months there. I got about 100 convictions. I've kept out of trouble since last March."*⁸

We already know that criminal justice⁹ interventions and poor mental health¹⁰ are expensive and that drug treatment¹¹ and homelessness services¹² lead to far more in savings across government and society than they cost to deliver. These savings could be even greater if people with multiple needs and exclusions did not 'recycle' around the different sectors and services like they often do now, never quite getting the overall help they need.

Remember T and W? They are two very different people, but in the recent past they both incurred significant amounts of government expenditure that only maintained their multiple needs. Without change these costs would have run on and on into the future. In the case of T and W, by providing an effective service response government is instead investing in positive outcomes and brighter futures. We need this approach for everyone.

Further work is needed to apply costings to a wider group of people with multiple needs and exclusions. For now, the illustrations provided here, based on government and academic figures, show the value of investing in effective interventions for T and W.

Remember T?

In the past T has incurred at least £54,000 of government expenditure. In comparison, helping T address his multiple needs in the five months since his release from prison has cost just £6,500. That's £3,500 less than the cost of the same time period in custody. T is doing well and his support costs will reduce in the future.¹³

Remember W?

In the past W has incurred at least £410,000 of government expenditure. In comparison, providing the integrated services that W needs has cost just £24,500 over the last year. This will reduce over time and save future costs to criminal justice and health services.¹⁴

Breakdown of costs in Appendix 1. These calculations include obvious government expenditure only. The previous costs would be much higher if the social costs of crime or of rough sleeping were included.



Remember T? Getting him the right help is cheaper than his stay in prison. **Remember W?** The integrated services he's now receiving reduce costs to criminal justice and health. The change to their lives is **priceless**.

3

Commit the next government to developing a national policy framework for multiple needs and exclusions

Central government needs to lead the way in tackling multiple needs and exclusions because cost effectiveness is achieved across a range of agencies and can't be easily seen at the local level. Progressive local areas need a framework in which to base relevant services, while others need incentives to tackle the problem.

The next government should:

- > Commit to developing a national policy framework for multiple needs and exclusions that expects local authorities, criminal justice agencies, health services and the voluntary sector to cooperate in defining, engaging, supporting and tracking the progress of adults with multiple needs and exclusions**
- > Signal this by committing to publish a Green Paper on multiple needs and exclusions to explore the options for a framework in more detail**

> The MEAM definition shows that people with multiple needs and exclusions are routinely excluded from the services they need and tend to lead chaotic lives that are costly to society as a result (see Pledge 1).

Routine exclusion often occurs because one or all of an individual's needs fall outside the threshold for case-managed support or because services disagree about who should take responsibility. But it

can also occur because needs have not been formally diagnosed; because services exclude people with certain diagnoses; or because they feel unable to cope with multiple needs.

The solution lies in a national policy framework for multiple needs and exclusions in which to base relevant services and incentivise local areas to act.

The national policy framework should:

- **Define the group:** by requiring local authorities and their voluntary sector partners to identify a small group of people with multiple needs and exclusions to focus on, as described in Pledge 1
- **Put in place a duty of active cooperation:** between local authorities, criminal justice agencies, health services and the voluntary sector around tackling multiple needs and exclusions, with a key strategic role for local authorities. This should be mirrored by national leads in each relevant central government department
- **Require local strategies on multiple needs and exclusions:** so that each local area develops a multi-agency strategy, refreshed every five years, which outlines how individuals will be engaged and supported via person-centred assessment and personalised solutions
- **Support the commissioning of suitable services:** to ensure that multiple needs and exclusions becomes a key focus for all local commissioners, that relevant services can be easily funded and that no service excludes people with multiple needs
- **Train staff:** to ensure that all relevant public and voluntary sector staff are trained to respond to multiple needs and exclusions and can signpost to services effectively
- **Show results:** by proving how services working together in a coordinated way can improve the delivery of services, increase the impact of public investment and create positive outcomes for people and communities
- **Track positive progress:** by putting in place processes to measure the progress of individuals on a national basis and using this to examine what works across the country, as described in Pledge 4



*The solution lies in a **national policy framework** for multiple needs and exclusions in which to base **relevant services** and **incentivise local areas to act.***



Measure national progress

A national policy framework will lead to improved outcomes for people facing multiple needs and exclusions. The resulting progress must be recognised and tracked on a national basis and our understanding of what works best shared across areas.

The next government should:

- > Track the progress of individuals with multiple needs and exclusions as defined by local areas
- > Support the sharing of knowledge about what works

> In recent years there has been an increased focus on multiple needs and exclusions in government performance targets. PSA 16 in particular was designed to track the progress of some of the most excluded groups in our society.

However, because of the limitations of national datasets, PSA 16 misses the most deeply excluded people. By focussing on four distinct groups of individuals with clear links to services (care leavers, those linked to probation, people with recognised learning difficulties and those in contact with secondary mental health services) it doesn't capture the individuals that are the focus of this manifesto.

Defining people with multiple needs and exclusions at the local level therefore presents an exciting new opportunity for the collection of data that can be used to track the positive progress of this group on a national basis and compare their situation with others in their communities.

With suitable reporting the data could also be used to improve evidence about the cost effectiveness that

accrues as people with multiple needs and exclusions receive focused help from local services.

"Fifteen years I was on and off taking heroin... been to jail several times. In fact I've spent most of my life in jail, suffering from mental health problems... Then I finally found [the service], moved in and sorted a lot of my problems out really. I haven't committed no crimes, I've sorted a lot of my mental problems out. I don't take drugs anymore, I come to places like this to try and help people"¹⁵

> As services for people with multiple needs and exclusions develop in local areas there will be an opportunity to build on our understanding of what interventions work best. A national policy framework should therefore support the dissemination of this knowledge across local areas so that they can support each other in the development of effective services.



*A **national policy framework** will lead to **improved outcomes** for people with multiple needs and exclusions. These must be **recognised** and **tracked** on a **national** basis.*

Working together – our promise to you

Making Every Adult Matter will be keeping its promise to the next government. Through our unique coalition we will work with our member agencies and statutory partners to build on their knowledge and enhance services for people facing multiple needs and exclusions. To do this successfully we need the next government to make a promise too and commit to the four-point manifesto outlined in this pamphlet.

Building on the knowledge, skills and experience of our frontline member agencies and their statutory partners we will support the development of services that:

- **Show a multi-agency commitment to the issue in their area:** MEAM will promote services in areas that put the right people and procedures in place to define the group, share information, jointly assess the problems and plan and implement appropriate cross-sector solutions
- **Broker access to mainstream services:** MEAM will promote services that provide a referral or brokerage service to relevant mainstream provision regardless of an individual's diagnosis and effect 'system change' in their local area as a result
- **Plug the gaps in service provision:** MEAM will promote services that plug gaps, either by expanding the scope of existing services (e.g. widening access criteria to talking therapies, psychological interventions or meaningful activities) or developing new responses where they are needed (e.g. residential provision that can cope with multiple needs)



Photo by: Piotr Ciuchta

- **Are personalised and user-led and that empower people to take up their rights and responsibilities:** MEAM will promote services that are shaped by users, offer active choice, deal with problems in a non-linear way, avoid exclusions and build the trust, confidence and empowerment that lead to people taking up their rights and responsibilities
- **Reduce stigma and discrimination and promote recovery and social integration:** MEAM will promote services that actively reduce stigma and discrimination and whose culture and staff attitude helps people towards self-esteem, recovery and integration, whether that means a return to education, training and employment or simply a less chaotic and more fulfilling life

“Somewhere to live, people to talk to, therapy to help with the past.”¹⁶

“A sense of hope, a sense of movement towards feeling better about your life.”¹⁷

- **Recognise the value of meaningful activity, community, family and relationships:** MEAM will promote services that value activity, play a central role in their local communities and that give people the tools to develop friendships and family ties where appropriate
- **Track positive progress and show results:** MEAM will promote services that track progress and use tools to measure results
- **Move towards early intervention and cross-sector knowledge:** MEAM will promote services that seek to move towards early intervention and that develop the knowledge of staff across sectors on issues such as mental health and substance abuse



Photo by: Richard Bailey

We promise to work with our member agencies and statutory partners to achieve change. We need the next government to make a promise too, by committing to this manifesto.



Photo by: Robert Davidson

Closing statement

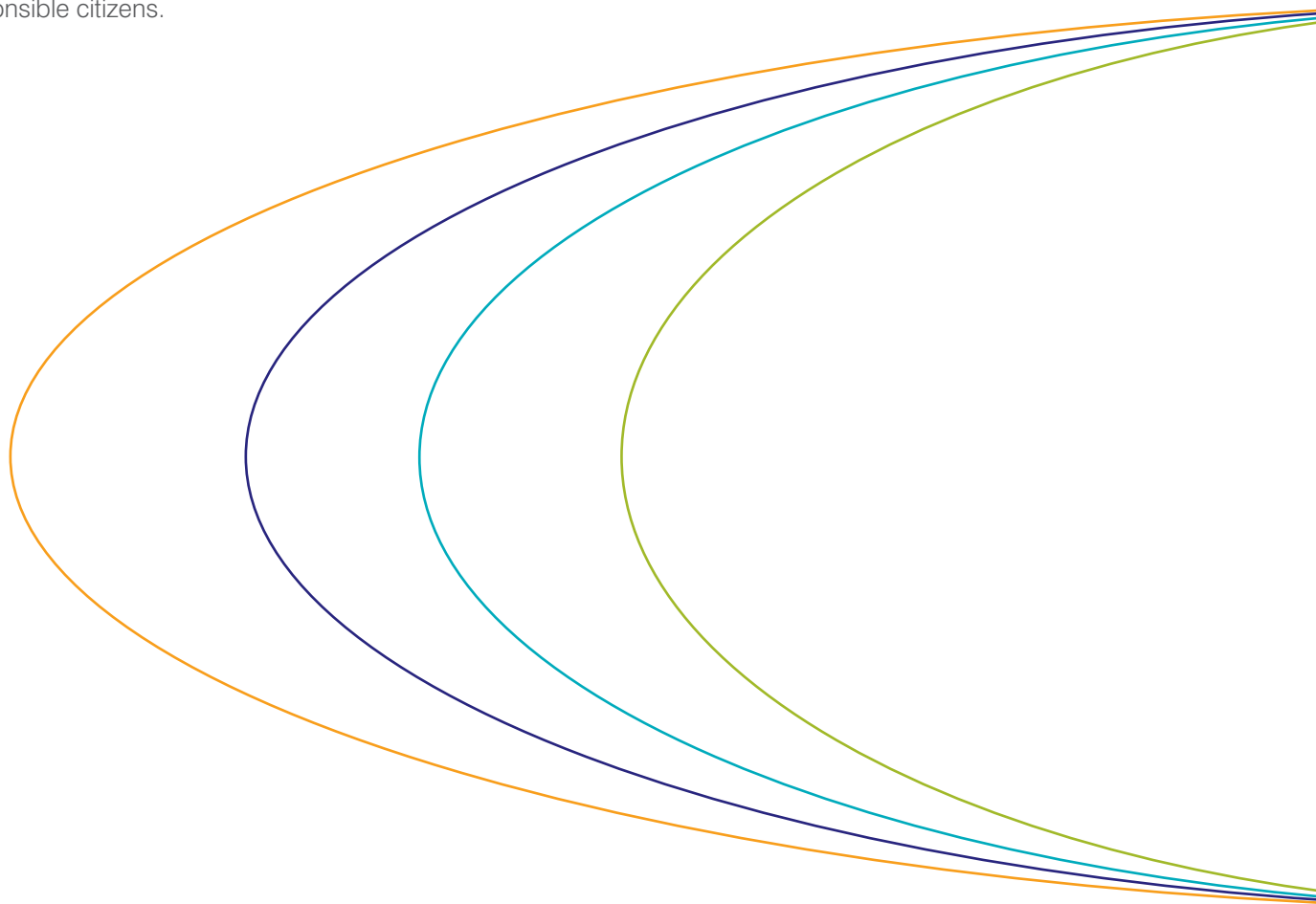
This pamphlet has outlined a joint approach to tackling the injustice of multiple needs and exclusions. We are convinced that practical action at the local level alongside the support of a national policy framework will have a significant impact on improving outcomes for people with multiple needs and exclusions and the communities in which they live.

We also believe that the approach will lead to more cost effective public expenditure across government and voluntary services, which too often fail to provide the coordinated support that people with multiple needs and exclusions need to become active and responsible citizens.

The joint approach will therefore lead to multiple social benefits – better outcomes for the most excluded individuals; the promotion of responsible citizenship; thriving communities; and more cost effective government expenditure on a group that are at present very costly to support.

In these times of increasing fiscal constraint we will need effective services and cohesive communities more than ever.

We look forward to working with the next government to achieve these aims and to helping shape the national policy framework for multiple needs and exclusions.



Notes

- ¹ The Social Exclusion Task Force estimates that around 2-3% of the population suffer from deep and persistent exclusion – equivalent to 1-1.5 million people in England - Cabinet Office (2007) *Reaching Out: Progress on Social Exclusion*, Cabinet Office, London, p5
- ² Defining the group using these characteristics is supported by recent government funded studies and previous Homeless Link research. See Schneider (2007) *Better outcomes for the most excluded*, University of Nottingham and Nottinghamshire Healthcare NHS Trust; Bloor et al (2007) *Service responses and outcomes for adults described as having chaotic lives and multiple needs*, CESU and Keele University, and; Homeless Link (2002) *Multiple Needs Good Practice Briefing*, Homeless Link, London
- ³ See studies in footnote 2, above
- ⁴ Schneider (2007) *Better outcomes for the most excluded*, University of Nottingham and Nottinghamshire Healthcare NHS Trust p.16. MEAM calculations take the very minimum figure for these populations in England as 140,000. This comprises 81,162 in the prison population (Home Office *Population Bulletin* July 2009, excluding five Welsh prison populations); around 42,000 bed spaces in the non-statutory homelessness sector (Homeless Link *Survey of Needs and Provision*, 2009); 15,000 individuals in statutory homelessness temporary accommodation without children (CLG, *P1E statistics* Q1 2009); and 483 rough sleepers on any given night (CLG, rough sleeping statistics, 2009).
- ⁵ Homeless Link's *Survey of Needs and Provision 2009* shows that 41% of people in homelessness projects have multiple needs (p.64). Research by Schneider (above, p.15) shows that around 40% of people in prison suffer from mental illness and substance abuse.
- ⁶ In 2002, Local Implementation Teams were tasked with defining clients with Dual Diagnosis in their areas as part of a national response to an increasingly recognised problem. The guidance stated that 'local services must develop focused definitions of dual diagnosis which reflect local patterns of need and clarify the target group for services' and that 'these definitions must be agreed between relevant agencies.' Source: Department of Health (2002) *Mental Health Policy Implementation Guide: Dual Diagnosis Good*

Practice Guide, Department of Health, London, p.4. In South London, the **New Directions Team**, being piloted as part of the ACE programme, is already using a coordinated local approach to identify people with multiple needs and exclusions for a focused service response. Source: www.cabinetoffice.gov.uk/social_exclusion_task_force/adults/pilots/pilot_7.aspx

- 7 Based on previous work by Homeless Link (**Multiple Needs Briefing**, 2002) Making Every Adult Matter (**In From the Margins**, 2007), Revolving Doors Agency and the studies in note 2, above.
- 8 Focus group participant, 2009.
- 9 The total cost of crime is estimated to be at least £57bn. The criminal justice system's response constitutes nearly 20% of this total, or £11bn (original figures for England and Wales were £60 billion and £11.6 billion. These have been adjusted using the populations of England (49.2m) and Wales (2.9m) in 2000). Figures from: Brand and Price (2000) *Home Office Research Study 217 - The economic and social costs of crime*, Home Office, London p.54. The average cost of prison has been estimated at £23,585 per person per year. Figures from: Matrix Knowledge Group (2007) **The Economic Case for and Against Prison**, Matrix, London.
- 10 The overall cost of mental ill health is estimated at £77.4bn a year, of which £8.4bn is public sector cost. Figures from: Sainsbury Centre for Mental Health (2003) *The economic and social costs of mental illness*, SCMH, London p.1,&5. The breakdown is as follows: £12.5 billion health and social care costs (£8.4 billion of which is public sector cost); human costs £41.8 billion; and output losses 23.1 billion.
- 11 Every problem drug user costs government £10,402 a year in reactive expenditure and society £35,455 in social costs. That's a total of £3.3bn a year in costs to the state and £11.2bn to society. Figures from Godfrey et al (2002) *The economic and social costs of class A drug use in England and Wales, 2000*, Home Office Research, Development and Statistics Directorate, London (original figures for England and Wales were £3.5 billion and £11.9 billion. These have been adjusted using the populations of England (49.2m) and Wales (2.9m) in 2000). Every £1 spent on drug treatment saves a minimum of £9.50 in associated health and crime costs. Figures from: Godfrey et al (2004) Economic analysis of costs and consequences of the treatment of drug misuse: 2-year outcome data from the National Treatment Outcome Research Study (NTORS) in *Journal of Addictions*, 99 (6) p.704 (data excludes fraud offences, which if included raise the ratio to 18:1).
- 12 Supporting People services for single homeless people create a net financial benefit of £127.7m compared to a scenario in which Supporting People is not provided. Figures from: Ashton and Hempenstall (2009) *Research into the financial benefits of the Supporting People programme 2009*, Capgemini, for the Department of Communities and Local Government, London. The £127.7 million figure is the sum of the net financial benefit for single homeless people in settled and temporary accommodation (£30.7m and £97.0m respectively, p.10). This equates to a £1,174 saving for each individual in settled accommodation and a £7,529 saving for each individual in temporary accommodation. The model from which these costs are derived has been limited to immediate or near immediate costs to which a financial value can be attributed. It therefore excludes immediate or near immediate unquantified benefits to users and long-term reductions in both the need for support and social exclusion. The savings stated are therefore likely to be significantly understated (p.9). Some of the costs modelled accrue to individuals rather than the exchequer (p.14, also 53, 57)
- 13 See Appendix 1 for breakdown of costs.
- 14 See Appendix 1 for breakdown of costs.
- 15 Focus group participant, 2009.
- 16 Staff member, Local Mind Association.
- 17 Staff member, Local Mind Association.

Appendix One – costs

Previous costs for T:

Cost	£	Source
Crime costs	£25,500	Police, court and prison costs (of which prison = £10,000). Home Office (2005); Home Office (1999)
Drug treatment and detox costs	£16,000	Curtis, L (2008)
Accommodation costs	12,500	Housing Benefit – assume £60 week
Medication	£350	Based on prescription charge
TOTAL	54,350	-

Costs for T (latest 5 months):

Crime costs	£0	-
Hospital costs	£0	-
Drug treatment	£1200	Curtis, L (2008)
Mental Health support	£1,500	At day centre. Assumes same cost as session at older people's day centre. Curtis, L (2008)
Medication	£80	Based on prescription charge
Accommodation and support costs	£3,700	Ashton and Hempenstall (2009)
TOTAL FOR 5 MONTHS	£6,480	-

Previous costs for W:

Crime costs	£152,000	Police, court and prison costs. Home Office (2005); Home Office (1999)
Hospital costs	£8,500	Inpatient and outpatient stays. Curtis, L (2008)
Outreach costs	£ 37,000	Kenway, P & Palmer, G (2003)
Drug treatment and detox costs	£32,000	Curtis, L (2008)
Accommodation and support costs	£178,000	Service provider
TOTAL	£407,500	-

Costs for W (latest year):

Crime costs	£0	-
Hospital costs	£150	Curtis, L (2008)
Drug treatment	£3,000	Curtis, L (2008)
Medication	£400	Based on prescription charge
Day Centre (art)	£1800	Assumes same cost as session at older people's day centre. Curtis, L (2008)
Accommodation and support costs	£19,000	Service provider
TOTAL – ONE YEAR	£24,350	-

Important note: these calculations include obvious government expenditure only. The previous costs would be much larger if the social costs of crime or of rough sleeping were included.

Cost sources:

Home Office (2005) *The economic and social costs of crime against individuals and households 2003/04*, Home Office Online Report 30/05, Home Office, London

Home Office (1999) *The cost of criminal justice – research findings 103*, Home Office Research, Development and Statistics Directorate

Curtis, L (2008) *Unit costs of health and social care*, PSSRU, University of Kent

Kenway, P & Palmer, G (2003) *How Many, how much: Single homelessness and the question of numbers and cost*, Crisis, London

Ashton and Hempenstall (2009) *Research into the financial benefits of the Supporting People programme 2009*, Capgemini, for the Department of Communities and Local Government, London

Making Every Adult Matter – coalition members:

Clinks

Clinks is a membership body that supports and develops the work undertaken by voluntary organisations within the criminal justice system in England and Wales.

Clinks is a registered charity no. 1074546 and a company limited by guarantee, registered in England No. 3562176

DrugScope

DrugScope is the UK's leading independent centre of expertise on drugs and the national membership organisation for the drug field.

DrugScope is a registered charity no. 255030 and a company limited by guarantee, registered in England No. 926236

Homeless Link

Homeless Link is the national membership organisation for frontline homelessness agencies in England. Its mission is to be a catalyst that will help to bring an end to homelessness.

Homeless Link is a registered charity no.1089173 and a company limited by guarantee, registered in England No. 04313826

Mind

Mind is the leading mental health charity in England and Wales. It works to create a better life for everyone with experience of mental distress.

Mind is a registered charity no. 219830 and a company limited by guarantee, registered in England No. 424348

MEAM is supported by: Calouste Gulbenkian Foundation

The Calouste Gulbenkian Foundation is a charitable foundation with cultural, educational and social interests. Its purpose is to help enrich and connect the experiences of individuals in the UK and Ireland and secure lasting and beneficial change. It has a special interest in those who are most disadvantaged

Making Every Adult Matter (MEAM) is a coalition of four national charities – Clinks, DrugScope, Homeless Link and Mind – formed to influence policy and services for adults with multiple needs and exclusions. Together the charities represent over 1600 frontline organisations working in the criminal justice, drug treatment, homelessness and mental health sectors. The coalition is supported by the Calouste Gulbenkian Foundation.

The **MEAM** vision is of a society where every adult matters, regardless of the complexity of their needs:

- Where people with multiple needs and exclusions are explicitly recognised in government policy as a group requiring specific help to achieve positive outcomes; and where
- Every adult who needs it is appropriately supported by a range of services (statutory and voluntary) to achieve their part in the rights, roles and responsibilities of society.



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Clinks is a registered charity No. 1074546 and a company limited by guarantee, registered in England No. 3562176

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