

A wide-angle aerial photograph of Edinburgh, Scotland, showing the city built on a volcanic plug, with the castle on a hill in the background and a large green park in the foreground.

Changing Course: *delivering a preventative approach to ending homelessness through public service reform.*

Report authors: Beth Reid, Maeve McGoldrick, Sarah Walters
October 2026

Contents

Foreword 3

Executive summary 5

 Part 1: Literature review 6

 Part 2: Sector expert essays – visions for systemic success 7

 Part 3: Roadmap for systems change and implementation 7

 Part 4: Economic analysis and key costings.....9

 Part 5: Conclusion and recommendations.....9

Introduction 11

Background 13

 Making housing and household stability a statutory responsibility 13

 What do we mean by housing and household stability? 14

 Ending homelessness in Scotland 15

PART 1: Literature review of systems changes: what works 18

 Why housing and household stability should be everyone’s business 18

Prioritising prevention: reforming public services to work better together to achieve housing and household stability 24

 Overcoming barriers to delivering on effective prevention.....25

Integrating public services 27

 Services working together to intervene early 27

 What we know works so far for preventing homelessness 31

PART 2: Expert essays 37

PART 3: Systems change: the need for a robust implementation plan 49

 3.1 Leadership 49

 3.2 Urgently scale up the pilot learning programme across Scotland 52

 3.3 National infrastructure 55

 3.4 Personalisation 61

 3.6 Empower lived experience and the frontline 67

 3.7 Building the local ecosystem 68

PART 4: Costings 73

 4.1 Pre-commencement costs 74

 4.2 Post-commencement costs 76

 4.4 Cost avoidance 78

PART 5: Conclusion and summary of recommendations 81

 Summary of full recommendations 82

With special thanks to Francesca Albanese, Rhuaraidh Fleming, Abigail Fletcher, Paul McGarry and James Mullaney from Crisis, the team at Alma Economics and the expert contributors.

Foreword

As members of the Scotland Lived Experience Panel at Crisis we wanted to bring our thoughts as the Foreword to this report. We would like to begin with one simple message:

Pay for it now, or pay for it later. This report considers the cost to prevent homelessness in Scotland, what needs to happen next, and the savings and benefits that come if we get it right.

The numbers in this report matter. But what no report can fully count is the person spared trauma, the person spared addiction, the child who does not have to move school, the relationships that hold together rather than break apart.

Homelessness can affect so many people, in the most everyday ways. A job lost, a relationship ended, a bill that cannot be paid. Prevention means reaching people before the harm is done. When we think about our own stories, that is what gives us hope, that others will not have to go through what we went through.

Last year nearly 54,000 people in Scotland were homeless or threatened with homelessness. People like us make up this number. This report shows that many people are in touch with service after service before they lose their home.

Every one of those contacts is a chance to ask. We ourselves tried to get support to the point our asks became cries for help, and the opportunity to act was missed every time.

Nobody wants to be in trouble or to face these challenges. We want to succeed. But we need a platform to succeed from, and a stable home is that platform.

The idea at the heart of the new duties came from people with lived experience: ask us what we need, and then act on it. Getting that right now depends on delivery. It means the funding, the people and the joined up working this report sets out, so that every service that meets someone at risk is ready and able to act.

That takes ambition. Scotland has the chance to build something genuinely better, a system designed to prevent harm rather than respond to it, and to move step by step away from one that only acts once people are already in crisis. We should be bold enough to take that chance.

Do that, give people belief, and they will see the hope we see now.

Crisis Scotland's Lived Experience Panel

Executive summary

The need for action to stop crisis demand

Scotland stands at a critical juncture in its approach to housing, social care, and public service delivery. While the Scottish Government and COSLA have stated their commitment to ensure homelessness is rare, brief, and non-recurrent, recent national indicators demonstrate that the homelessness system is under unprecedented strain, where rough sleeping has risen by 20%, and households in temporary accommodation are at record levels. This crisis carries severe financial consequences: local authority expenditure on temporary accommodation easily exceeds £160 million annually and some local authority homelessness services face systemic failure.

In response, Part 5 of the Housing (Scotland) Act 2025 introduces statutory “Ask and Act” duties to prevent homelessness, taking effect in November 2028. This legislation will also require local authorities to take preventative action at least six months prior to potential housing loss. Crucially, it extends responsibility beyond housing departments to specified public bodies, including NHS Health Boards, Integrated Joint Boards, Police Scotland, Registered Social Landlords, Prisons, Special Health Boards, and Social Security Scotland. These bodies must systematically identify (‘Ask’) whether service users face housing risk and take appropriate early action (‘Act’). However, statutory duties alone cannot transform practice; legislative reform must be accompanied by public service integration, workforce development, cultural change, and sustained resourcing.

Part 1: Literature review

The importance of housing stability

The first part of the report reviews the literature, and considers the centrality of housing and household stability. There are strong links between housing – its affordability and conditions – and poverty, ultimately leading to homelessness. Downstream crisis responses represent classic “failure demand”, absorbing vast resources across emergency healthcare, policing, and temporary shelter without resolving root causes. The systemic costs of housing failure across public services are immense. Poor quality housing costs NHS Scotland approximately £530 million annually, while acute healthcare use by people with experience of homelessness generates an additional £900 million in demand. Just for individuals facing severe and multiple deprivation the provision of homelessness assistance costs £530m a year.

Conversely, effective homelessness prevention yields immediate fiscal returns, saving an average of **£9,266 per person per year** in direct public expenditure. Recent analysis shows that strengthening homelessness prevention practice in Scotland could be one of the most impactful ways to reduce the worst forms of homelessness over the next 15 years.

Public service reform and early intervention

In 2011 the landmark Christie Commission report highlighted four essential pillars for effective public service reform: shifting away from ‘failure demand’ and acute crisis management, to a presumption of prevention and structural embedding of early intervention across public services, systematically increasing the proportion of public expenditure over time, and moving away from ineffective service models.

Still to be implemented, the Scottish Government has revisited these in its Public Service Reform Strategy spurred on by urgent fiscal necessity and a forecast £4.7 billion budget shortfall by 2029–30 under current operating models.

Public service integration and stabilising housing

Achieving housing stability requires moving beyond fragmented signposting toward genuine structural integration. New research shows public opinion strongly supports integrated early action.

Lessons from pilots and other good practice demonstrate that prevention models emphasise personalised and relational working styles, co-ordination of support, co-locating multi-agency services in community hubs, training and deploying multidisciplinary teams, facilitating “warm handovers”, the value of data for screening and early identification, and offering flexible support such as Cash First. Cross-sector working requires culture change and deliberate focus.

However, local authority feedback highlights that while frontline homelessness teams desire to work preventatively, acute pressures and funding uncertainties severely constrain early intervention. Much work is needed to move from ambition to practice.

Part 2: Sector expert essays – visions for systemic success

Contributions from policy leaders and practitioners reinforce that legislative mandates must be animated by political leadership, shared accountability, and public health methodologies:

- **Cross-Government Leadership:** Former Housing Minister Kevin Stewart emphasizes that homelessness prevention must be driven jointly across Health, Social Justice, Justice, and Public Service Reform.
- **Public Health Lens:** Derek McGowan (City of Edinburgh Council) argues that homelessness should be formally recognized as a public health issue. Drawing parallels to violence reduction models, he highlights that advanced data linkage is essential to identify at-risk cohorts—such as single men aged 18–44—and intervene before housing loss occurs.
- **Justice and Relational Practice:** Karyn McCluskey (Community Justice Scotland) underscores that housing stability is essential to reduce

reoffending and break cycles of trauma, advocating for leadership that grants frontline workers discretionary power to deliver flexible support.

- **Systems Integration:** Nicky Miller (Turning Point Scotland) notes that prevention succeeds by transforming existing public service pathways through shared metrics, open communication, and pooled budgets.
- **Political Will:** Matt Downie (Crisis) calls for sustained political leadership to bridge the gap between high-level ambition and operational reality, noting that effective implementation could halve the most severe forms of homelessness by 2041.

Part 3: Roadmap for systems change and implementation

To prepare for national commencement in November 2028, the report establishes a comprehensive systems change implementation framework:

Vision, strategy, and leadership

The Scottish Government must articulate a unified national vision and explicit Theory of Change that embeds housing stability into the National Performance Framework and Public Service Reform Strategy.

Urgently scaling up learning from pilot work

Learning from the 15 “Ask and Act” pilot areas must be expanded into a second stage of national piloting prior to 2028 to maintain momentum and prevent loss of expertise. National leaders on prevention across different bodies can provide the necessary stewardship to support implementation.

Developing national infrastructure

Clarity on policy direction and funding commitments for implementation is needed as soon as possible. Strong statutory guidance demonstrating collaborative leadership at national level will be essential. National government must lead the development of an integrated, secure data-sharing infrastructure. Linking administrative data across local authorities, health boards, prisons, and social security will allow services to detect early warning indicators—such as rent arrears or institutional release—enabling proactive outreach.

The implementation plan must set out a clear accountability structure showing who will be responsible for delivery and who else must support them. A strong monitoring framework with metrics measuring tenancy sustainment over 12 to 24 months are needed to demonstrate impact and outcomes. Audit Scotland

and statutory regulators should establish a joint scrutiny framework drawing on those metrics. A national public awareness campaign should also be deployed.

Personalisation

Culture needs to shift towards a more person-centred and relational working approach so that support is personalised and co-developed to meet individual needs, starting from a universal basic support framework. Service delivery should consider diagnostic triage tools and co-designed Personal Support Plans.

Integration and co-ordination of services

Housing, health and social care are deeply interconnected and recommendations from Public Health Scotland and NICE around stronger joint planning and commissioning, shared needs assessments and personal plans must be taken forward. For people with complex or multiple needs, multiagency co-ordination has been shown to be highly effective and is an essential element of support for some people.

Frontline empowerment and lived expertise

Frontline staff across all statutory bodies require trauma-informed training co-produced with experts by experience. This should be informed by a mapping exercise to establish training needs.

Building local ecosystems

Community Planning Partnerships (CPPs) must provide strategic local leadership, aligning commissioning practices around relational approaches. Co-ordination of services locally at strategic and operational levels has been shown to be key in the pilots. Local delivery must incorporate third-sector providers and adapt to geographical challenges in rural communities.

Part 4: Economic analysis and key costings

Part 4 of the report contains an independent economic assessment by Alma Economics which evaluates the resource requirements and fiscal savings associated with the 2028 statutory duties across all relevant public bodies.

It identifies the need for upfront investment in training, workforce development, data-sharing capability and IT integration as key costs between 2026 and 2028 in the lead-up to commencement of the duties. Estimated costs across public bodies are £49 million in 2027 and £48 million in 2028 (January – October).

Total annual expenditure peaks in 2028, reflecting the convergence of final pre-commencement preparation and initial post-commencement operational delivery.

From November 2029 onwards, when the duties are in full force, ongoing delivery costs stabilise as routine early intervention replaces system setup, with an annual operational cost of between £35 and £38 million a year up to 2031.

Local authorities and health boards bear the primary operational responsibilities. Local authority expenditure rises to £19 million in 2028 before settling at £9 million annually after commencement. Health board costs start at £15-17 million prior to commencement, before stabilising at £8–£10 million thereafter.

On the other hand the analysis suggests significant cost avoidance, with net cost avoidance to the public purse of between £76 and £82 million a year.

Part 5: Conclusion and recommendations

Shifting Scotland’s homelessness system from reactive crisis management to early intervention embodies the vision of the Christie Commission. Enforcing statutory “Ask and Act” duties across public bodies, backed by cross-portfolio political

leadership, unified data architecture, workforce development, and front-loaded financial investment, offers a viable path to permanently reduce demand on acute public services. With two years remaining before statutory commencement, the Scottish Government must urgently publish a resourced implementation roadmap to ensure every household in Scotland achieves housing stability in a safe, permanent home.

Crisis makes 12 detailed recommendations to make this happen, here summarised in short. We recommend:

1. Strengthening cross portfolio leadership by creating an agreed vision of success, alongside a robust implementation plan, and the establishment of governance structures across all relevant government portfolios
2. Intensify the learning and scaling of the pilot programme; allowing for best practice to be shared nationally to drive forward a two-year implementation programme
3. Investing early in the national infrastructure required for prevention systems change, in addition to funding for the new legal duties.
4. A cross-departmental approach is taken to developing national guidance

5. Investing in a new, national data-sharing capability between public bodies
6. Establishing clear lines of responsibility for implementation, with accountability measures in place
7. Funding and delivering a national awareness and engagement campaign, designed to encourage greater public take up of support at a much earlier stage
8. ‘Personalisation’ tools are established and embedded into the design and delivery of Ask and Act
9. The strategic integration and coordination of services to establish a holistic model of support
10. A bold new training programme be rolled out nationally to prepare for full commencement and achieve the necessary culture change
11. Community Planning Partnerships provide strategic leadership to build a coherent ecosystem of localised co-ordinated support
12. In the upcoming budget, Scottish Government allocates £100 million of funding for a pre-commencement programme of infrastructure and capacity building, and between £35-38 million per year from November 2028 up until 2031 for post- commencement delivery of the new legal duties.

Introduction

The Scottish Government has a major agenda for public service reform, including a strong focus on prevention and early intervention to reduce avoidable demand for high level or crisis public services¹.

Simultaneously, but separately, the homelessness world has been considering how best to prevent homelessness and stabilise housing for individuals and households². This culminated in legislation in the recent Housing (Scotland) Act 2025, which places new requirements on local authorities to act earlier when someone is at risk of homelessness, and on a range of public bodies to find out about their service users' housing circumstances and act appropriately if a risk is identified. This report looks at why improving housing and household stability matters for Scotland's wellbeing and economic prosperity, and for getting the most out of our public services. And crucially, the report looks at what is needed between now and the legislation coming into force, to successfully shift from crisis management to preventing homelessness and the harms that come with it, so that everyone has a stable home in which they can thrive.

A prerequisite to achieving housing stability is having enough of the right kind of homes in the right places across Scotland, so the successful delivery of the Scottish Government's Affordable Housing Supply Programme³ is central to this. Nevertheless, even with having enough suitable homes available, people

also require effective support services that meet their household needs. Both increasing housing supply and being able to access good quality, personalised support are key factors in achieving greater housing and household stability across Scotland. This report is intended to support Scottish Government and its partners in mapping out the immediate work and investment required to deliver a new, preventative model of integrated support - a key pillar in the strategy to end homelessness for good.

The report consists of four main sections: Part 1 summarises the literature on public service systems change, focusing on prevention. Part 2 is a collection of essays by key figures involved in developing the homeless prevention agenda. The essays outline what success should entail and how to get there. Part 3 provides detailed recommendations for practical action needed now to prepare for commencement of the legal duties in two years' time. Part 4 is the final substantive section, containing findings of an independent economic analysis, conducted by Alma Economics and commissioned by Crisis, on the costs of both implementation and of delivery of the new legislation. The report concludes with a summary of the recommendations.



Background

Making housing and household stability a statutory responsibility

A year ago, in November 2025, the Housing (Scotland) Act 2025 was passed. Part 5 of the Act is designed so that public services intervene early to stabilise people's housing and prevent them becoming homeless. It will place duties on local authorities to act at least 6 months prior to crisis, where they are aware that someone is under threat of homelessness, and it will require a range of public bodies to identify ('ask') if the people using their service are at risk of homelessness, and to intervene ('act') appropriately on that information.

These have become known as the 'ask and act' duties.

The bodies listed in the legislation are:

- NHS Health Boards (including the regional health boards and special health boards such as the Ambulance Service, the State Hospital, Public Health Scotland, Healthcare Improvement Scotland and NHS 24)

- Integrated Joint Boards of Health and Social Care Partnerships
- Local authorities (including functions beyond housing and homelessness such as children's services and social work)
- Police Scotland
- Registered Social Landlords
- Prisons and Young Offenders Institutes
- Social Security Scotland.

These groundbreaking duties will come into effect in just two years' time, by no later than November 2028.

This legislation was first mooted in 2018 in the recommendations of the Homelessness and Rough Sleeping Action Group, commissioned by former First Minister, Nicola Sturgeon. Further flesh was put on the proposals by the Homelessness Prevention Review Group (HPRG)⁴, which reported its recommendations in 2021. When Scottish Government consulted on the proposals made by the HPRG the following year the proposals received resounding support in principle and in detail, with little exception⁵.

From the beginning it was acknowledged that whilst legislation is a driver of practice, it is just one element of a much-needed wider reform. The Review Group emphasised that "statutory duties are not a sufficient tool by themselves."⁶ The group identified the necessity of a shift in culture, supported by training and clear guidance, phasing of work, appropriate resourcing, and data collection tools to monitor operation of the system and outcomes for individuals, and provide effective regulation and oversight. The original Scottish Government / COSLA Ending Homelessness Together Action Plan⁷ echoed this, stating "Our work to develop a new wide-ranging prevention duty will help drive better join up in planning, resourcing and delivery."

To support this shift, the Scottish Government commissioned a Task and Finish Group⁸ made up of experts from a wide spectrum of public bodies (many later named in the Housing (Scotland) Act), alongside strategic public body representatives, the third sector and people with lived experience of homelessness. It consulted widely with over 100 frontline stakeholders and reported its findings and recommendations in June 2023, identifying a range of actions to support preparation for the culture shift required

to embed housing stability as a key principle and requirement across public service delivery.

Finally, most recently, Scottish Government funded a pilot programme during 2025⁹, which is testing how the duties might work in practice, to inform the development of further legislation, guidance and implementation next steps. Initial findings are emerging and full evaluation will be completed in 2027.

What do we mean by housing and household stability?

One of the challenges of implementing the incoming homeless prevention agenda is the current lack of consensus for what success looks like: how we define prevention, what a new operating model should look like, and how we get there. So far, there is no shared vision or language for the range of outcomes we want to achieve, the culture we want to create and, crucially, the experience we want people to have. As it stands, various sectors and services approach the issue of housing and household stability very differently.

1. Scottish Government (2025) Scotland's Public Service Reform Strategy: Delivering for Scotland <https://www.gov.scot/publications/scotlands-public-service-reform-strategy-delivering-scotland/>
2. Homelessness Prevention Review Group (2021) Preventing Homelessness in Scotland: Recommendations for legal duties to prevent homelessness: A report from the Prevention Review Group <https://www.crisis.org.uk/media/244558/preventing-homelessness-in-scotland.pdf>
3. <https://www.gov.scot/policies/more-homes/affordable-housing-supply/>
4. Homelessness Prevention Review Group (2021) op cit. p19.
5. SG / COSLA (2022) Prevention of Homelessness Duties: A Joint Scottish Government and COSLA Consultation Analysis of Consultation Responses Final Report.

6. HPRG op cit. 19
7. Scottish Government / COSLA (2018) op cit. p39.
8. Homelessness Prevention Task and Finish Group (2023) Final report and recommendations <https://www.gov.scot/publications/homelessness-prevention-task-finish-group-final-report-recommendations/>
9. Scottish Government / Scottish Federation of Housing Associations / Homeless Network Scotland (SG/ SFHA/HNS) (2026) Housing Associations Going Upstream to Prevent Homelessness in Scotland Learning Report from the Scottish Government 'Upstream' Homelessness Prevention Fund 2025-26 <https://www.sfha.co.uk/our-work/learning-report-upstream-homelessness-prevention-fund>; Advice Direct Scotland (2026) Ask and Act Test and Learn prevention pilots quarterly reports <https://advisedirectscotland.halocrm.io/portal/kb?btn=61&faqlist=47&id=81>.

In the housing world we talk about helping people to sustain their tenancy. Health and social care services might consider the support needed to allow someone to live independently, whether the support is required due to old age, youth, physical or learning disability or impairment, mental illness, substance misuse or other issues. In the poverty world we might talk about income maximisation or budgeting support to address rent or mortgage arrears, debt or fuel poverty. And in the homelessness sector we talk about actions to prevent someone becoming homeless.

Whatever terminology is used by one public service or another, the circumstances which undermine the stability of people's living situations are what really matter, and these will often cut across service areas. It is addressing the root causes of those circumstances through a collective effort that will lead to success. This is the ambition underlying the 'ask and act' duties.

It has been argued that using the term homelessness in this context "focuses our attention on the acute problem at the point of crisis rather than when the early warning signs begin to emerge"¹⁰. Therefore, in this report, we try to use the phrase housing and household stability and talk about people having stable homes wherever possible. Nevertheless, we are talking about a prevention support agenda that minimises and mitigates the

harm caused by housing instability and risk of housing loss, and the harms of being homeless.

Ending homelessness in Scotland

Back in 2018, Scottish Government and COSLA stated their intent that homelessness should be "rare, brief, and non-recurrent due to effective prevention and a rapid response when people have become homeless or are at risk of homelessness." Their vision is that everyone has a home that meets their needs, and that homelessness is ended¹¹. The most recent Programme for Government reaffirms that commitment and emphasises the ambition to shift from crisis management to prevention and rapid rehousing¹².

However, homelessness trends continue in the wrong direction. In the latest statistics, there was a 10% increase in the number of people in the homelessness system over the last year, and a shocking 20% increase in the numbers of people sleeping rough before receiving assistance. The numbers of households in temporary accommodation are at record levels, also up by 10% in the last year¹³. The Housing Regulator has assessed that two local authority homelessness services are in systemic failure, with another nine at ongoing heightened risk¹⁴.

As the number of people trapped in the homelessness system continues to rise, and with the largest numbers of households on record spending longer in damaging and costly temporary accommodation, delivering effective ways to staunch the flow of households into the homeless system must be a high priority for Scottish Government if it is to achieve its goal of ending homelessness for good, improving outcomes for the population and reducing public spending on systems failure.

Crisis Scotland's vision to end all forms of homelessness for good by 2040

Crisis Scotland strongly believes that homelessness is not inevitable. In advance of the 2026 Scottish parliamentary election, we set out a manifesto containing clear policy proposals for a long-term strategic approach to ending all forms of homelessness for good by 2040¹⁵. This will require a phased approach, but key immediate actions we recommended are taken in this parliamentary term are to enable people to access help with their housing needs much earlier and in a more holistic way, and to provide strategic long-term

funding, assigned to clear outcomes for all public services delivering to prevent homelessness.

There is a strong desire to do more preventative work from councils, as well as other services in health, social care, employment, prisons and education etc. For instance, enhancing prevention is one of six key recommendations in Fife Council's Housing Emergency Action Plan¹⁶ and one of the six strategic objectives in Edinburgh Council's equivalent strategy¹⁷. In 2022, Crisis published examples of best practice from around Scotland and beyond demonstrating the range of work that is already taking place to address this issue at local level¹⁸. The latest findings from the 2026 Homelessness Monitor Scotland demonstrate that maximising our capacity to prevent homelessness is one of the most powerful tools to reduce the worst forms of homelessness¹⁹.

But direction is needed nationally to take this work forward. In our election manifesto report, we state that "a clear vision and strong leadership on prevention is needed for the success of this step change in approach. A priority for this government must be to create an implementation plan for preparation of the commencement of the prevention legal duties in 2028."

10. Homelessness Prevention Task and Finish Group (2023) Final report and recommendations <https://www.gov.scot/publications/homelessness-prevention-task-finish-group-final-report-recommendations/>.
11. Scottish Government / COSLA (2018) Ending Homelessness Together High Level Action Plan.
12. Scottish Government (2026) Programme for Government 2026-2031 <https://www.gov.scot/publications/programme-government-2026-2031/>.
13. Scottish Government (2026) Homelessness in Scotland 2025/26
14. Scottish Housing Regulator (2026) Our risk assessment of social landlords: summary outcomes - April 2026 <https://www.housingregulator.gov.scot/landlord-performance/the-risks-we-will-focus-on/our-risk-assessment-of-social-landlords-summary-outcomes-april-2026/>

15. Crisis (2025) Ending homelessness in Scotland by 2040.
16. Fife Council (2025) Fife's Housing Emergency Strategic Statement: Options to deliver medium-term change to the housing system <https://www.fife.gov.uk/housing/housing-emergency>.
17. <https://www.edinburgh.gov.uk/housing/housing-emergency-action-plan/3>.
18. Dunn, L (2022) 75 Ways to prevent homelessness: A collection of practical examples to share, inspire and add to. London: Crisis
19. Beth Watts-Cobbe, Glen Bramley, Hal Pawson, Gillian Young, Lynne McMordie, Rhiannon Sims & Suzanne Fitzpatrick (2026) Homelessness Monitor Scotland 2026



PART 1: Literature review of systems changes: what works

Why housing and household stability should be everyone's business

Having a safe place to live is a primal human necessity, providing shelter, safety and security. Without this stable foundation, relationship and community, good mental wellbeing and the ability to self-actualise are all undermined. Without a roof over our head, basics like health, employment, community and even family are hard to sustain.

Economist Professor Duncan MacLennan writes of the fundamental importance of housing to the Scottish economy and to the prosperity and wellbeing of the population. Yet "in most policy framings of the route to prosperity and wellbeing, there is little attention to what role the large housing system with its complex outcomes plays... it is imperative to think of housing as economic infrastructure

and to construct policy governance that recognises the systemic, relational nature of housing and its critical significance in national wellbeing."²⁰

Beyond this, housing stability is foundational for the effective delivery of a wide range of public services and priorities in Scotland. Conversely, a lack of housing stability has huge costs to society, undermining the health, wellbeing, social connections and economic contribution of individuals and households. We discuss a few of these impacts below in more detail.

Housing stability and poverty

Housing and poverty are deeply interconnected. Just by itself, housing cost pushes an additional 100,000 people in Scotland into poverty²¹. Child poverty is the strongest predictor of homelessness among young people²², and the younger someone experiences homelessness, the more likely they are to have five or more episodes of homelessness in their lives²³.

20. MacLennan, D, Fleming, J (2025) Prosperity begins at home: Disruptions to improve Scotland's housing system. David Hume Institute, p22. <https://static1.squarespace.com/static/59b82ed532601e01a494df34/t/68d7a8aaf7755c0349b4187d/1758963882908/Prosperity+begins+at+home%2C+D+MacLennan%2C+David+Hume+Institute+September+2025+FINAL.pdf>.
21. Scottish Government (2026) Poverty and Income Inequality in Scotland 2022-25 https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2026/03/poverty-and-income-inequality-in-scotland-2022-25/documents/poverty-and-income-inequality-in-scotland-2022-25/poverty-and-income-inequality-in-scotland-2022-25/govscot%3Adocument/Poverty%2Band%2Bincome%2Binequality%2Bstatistics%2B2022_25.pdf.
22. Bramley, G and Fitzpatrick, S. (2018) Homelessness in the UK: Who is most at risk? Housing Studies, 33(1), 96–116.
23. Mackie, P. & Thomas, I. (2014) Nations apart? Experiences of single homeless people across Great Britain. London: Crisis.

In addition, thousands of households live in homes that are overcrowded or are cold, unsafe or unhealthy²⁴. When housing is not affordable or manageable in these ways, it destabilises people's home lives, affecting health and wellbeing, family and community relationships, ability to work or study, further compounding the effects of poverty²⁵.

Access to the right social security support, work that pays, debt, money and energy advice, as well as support to address repairs, are critical to both tackling poverty and preventing homelessness.

Housing stability and health

As Derek McGowan points out in part 4 of this report, stable housing and homelessness prevention is a public health issue. It has the power to lessen or exacerbate health inequalities, and an integrated approach which joins up housing, health and social care is essential²⁶.

It is estimated that poor housing costs the Scottish NHS around £530 million

each year²⁷. For patients who have ever experienced homelessness, healthcare use increases exponentially across a range of acute services²⁸, estimated at an additional £900m²⁹.

The Scottish Health Equity Research Unit (SHERU) suggests that "The focus on prevention [as codified in the Housing (Scotland) Act 2025] provides a clear upstream approach which, if effective, would reduce inequalities in a key social determinant of health for low-income households"³⁰.

Housing stability, offending and substance misuse

Housing First has demonstrated the significance of having a stable home for people who have faced severe and multiple deprivation, who may be affected by mental ill health, involvement with the criminal justice system, substance misuse and / or homelessness³¹. The pathfinder evaluation demonstrated the benefits to homelessness, police, criminal justice and health services of having stable housing

with the necessary support, with costs reducing from an average estimated £23,000 per person to £5,600. Similarly, the Making Every Adult Matter programme evaluation showed that taking a more co-ordinated and co-produced approach to supporting people facing multiple disadvantage could stabilise housing, improve people's experience of support and help them achieve personal goals and reduce service use in health and criminal justice. It found that "stable accommodation is a key springboard for people to achieve positive change in other areas of their lives."³² In a context where more than one in ten people become homeless again within five years³³ these findings are significant.

Yet one study notes that, while there have been intensive efforts in recent years to reduce the barriers faced by people who experience severe and multiple deprivation, "progress usually hinged on the goodwill of committed individuals at the local level rather than being symptomatic of broader systems change"³⁴.

For people leaving prison, the SHORE standards are often seen as a gold standard for supporting people into

housing and avoiding a homelessness trajectory. Yet their implementation has been patchy, undermined by the absence of clear accountability or mechanisms to ensure compliance³⁵.

Recently published research analyses the marginal costs of severe and multiple deprivation (the intersection of homelessness, offending and substance misuse) in Scotland, and estimates them to be at least £5.8 billion a year, or £30,600 per person. This is the equivalent of the entire education budget³⁶.

Homelessness: systems failure and crisis demand

Nearly 54,000 people were found to be homeless or threatened with homelessness in 2025-26, including 14,400 children³⁷. Research has shown that many households have contact with public services before they become homeless.

For example, one qualitative study by Crisis Scotland interviewed 15 people who had experience of homelessness and found that between them they had been in touch with at least 80 services

24. Scottish Government (2026) Scottish House Condition Survey 2024: Key Findings <https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2026/02/scottish-house-condition-survey-2024-key-findings/documents/scottish-house-condition-survey-2024---key-findings/govscot%3Adocument/Key%2BFindings%2B2024%2B-%2BComplete%2Breport%2B-%2Bvol2.pdf>.
25. Shelter Scotland (2025) In their own words: Children's experiences in temporary accommodation https://scotland.shelter.org.uk/campaigning/childrens_experiences_in_temporary_accommodation
26. Public Health Scotland (PHS) (2026) Health and homelessness briefing
27. Boyd et al (2025) Housing Quality and Health - an Economic Analysis: Report to Scottish Futures Trust and Public Health Scotland https://housingevidence.ac.uk/wp-content/uploads/2026/01/Housing-Quality-Health-An-Economic-Analysis-FINAL_120126.pdf.
28. Waugh, A et al (2018) Health and homelessness. National Records of Scotland
29. Bramley et al (2019) Hard Edges Scotland: New conversations about severe & multiple disadvantage
30. Scottish Health Equity Research Unit (SHERU) (2025) Raising the roof: Can Scotland's Housing to 2040 Strategy help as an approach to reduce health inequalities? p17
31. Scottish Government (2025) Learning from 25 years of preventative interventions in Scotland.

32. Cordis Bright (2022) MEAM Approach evaluation: final report <https://meam.org.uk/wp-content/uploads/2022/10/MEAM-year-5-summative-report-FINAL.pdf>.
33. Scottish Government (2026) Homelessness in Scotland 2025/26
34. Johnsen and Bleckinsopp (2024) Hard Edges: The reality for women affected by severe and multiple disadvantage
35. Scottish Government (2026) Sentencing and Penal Policy Commission - call for evidence: analysis of responses <https://www.gov.scot/publications/sentencing-penal-policy-commission-call-evidence-analysis-responses/pages/6/>
36. WPI (2026) Severe and multiple disadvantage in Scotland: Economic costs and potential savings: A WPI Economic technical report to support The Level <https://homelessnetwork.scot/wp-content/uploads/2026/10/No-Wrong-Door-economic-analysis-Technical-Report-051026.pdf>
37. Scottish Government (2026) Homelessness in Scotland 2025/26

prior to needing homelessness assistance. On average, each had been in contact with five services, which included health services, domestic abuse services, justice services, Jobcentre Plus, and social work or education³⁸. Research into the Homelessness Reduction Act in England showed that GPs, hospitals and mental health services are some of the most common points of interaction, along with Jobcentres and social work³⁹. This has also been starkly evidenced in health and homelessness data linkage research and elsewhere⁴⁰.

Each of these interactions represents a missed opportunity to prevent needs escalating and housing being lost. The duplication in terms of service contact as part of the effort to get help is costly, not only in terms of time and energy for the applicant, but also as a monetary cost in time and public resources.

On the other hand, ensuring someone's home situation is stabilised can avoid the costs of homelessness – personal and public, direct and indirect.

In 2024, data from a Freedom of Information request suggested that the cost of temporary accommodation to local authorities was over £160 million⁴¹. Since then, costs have continued to rise with a 16% increase in the use of temporary accommodation since then⁴². Edinburgh Council spent £67 million last year purchasing temporary accommodation⁴³, while temporary accommodation cost Glasgow £106 million⁴⁴. The research mentioned above estimates the cost of homelessness just for people experiencing the combination of severe and multiple deprivation as £530m a year⁴⁵.

The wider costs of homelessness and housing instability are well documented, including direct and long-term costs across a range of services. One study from 2015 examined a series of scenarios where people either became homeless or had their homelessness prevented. On average, it was estimated that preventing homelessness for one year would result in a reduction in public expenditure of £9,266 per person and in some cases could be as high as £796,000.

Based on the average saving, the report shows that public spending in England would fall by £370 million if 40,000 people were prevented from experiencing one year of homelessness⁴⁶. The results echo similar studies in both the US and Australia which report comparative costs.

The 2026 Homelessness Monitor suggests that strengthening prevention through the new legal framework and spreading best practice could be one of the most significant ways of reducing the worst forms of homelessness over the next 15 years, reducing the worst forms of homelessness by 16% by 2041⁴⁷.

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- 38. Mullaney, J (2024) Window of opportunity. Crisis <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/services-and-interventions/a-window-of-opportunity/>.
 - 39. Crisis (n.d.) Crisis evidence for the Communities and Local Government Select Committee Inquiry: One year on since the introduction of the Homelessness Reduction Act <https://www.parliament.uk/globalassets/documents/commons-committees/communities-and-local-government/Crisis-written-evidence-HRA-one-year-on.pdf>.
 - 40. Waugh, A et al (2018) Health and homelessness in Scotland, National Records of Scotland. Sutton-Hamilton et al (2022) 'I hoped there'd be more options' Experiences of the Homelessness Reduction Act 2018-2021. London: Crisis.
 - 41. Riding, J (2024) Scotland aimed to cut temporary accommodation but now it is spending more, February 2024, Inside Housing <https://www.insidehousing.co.uk/insight/scotland-aimed-to-cut-out-temporary-accommodation-for-homeless-people--but-now-it-is-spending-more-84606>.
 - 42. Scottish Government (2026) Homelessness in Scotland 2025/26
 - 43. <https://www.scottishhousingnews.com/articles/edinburgh-signs-ps155m-contract-to-expand-supported-homeless-accommodation>.
 - 44. <https://www.heraldscotland.com/news/25298772.glasgow-city-council-spent-100m-homeless-fight/>.
 - 45. WPI (2026) op cit.

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- 46. Pleace and Culhane (2015) Better than Cure? Testing the case for Enhancing Prevention of Single Homelessness in England <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/cost-of-homelessness/better-than-cure-2016/>.
 - 47. Watts-Cobbe et al (2026) Homelessness Monitor Scotland 2026.



Prioritising prevention: reforming public services to work better together to achieve housing and household stability

Fifteen years after the publication of the seminal Christie Commission report (2011)⁴⁸, its recommendations still feel fresh, relevant and even radical. Focused on the future delivery of public services, it drew out a number of key actions:

- Shifting resources away from failure demand – the downstream consequences of failing to tackle the causes of poverty, ill health and crime
- A presumption in favour of prevention, structurally embedding preventative action across public services, moving away from siloed, institutionally based responses towards integrated services and community-based interventions which build on people's needs, aspirations and strengths
- Indicative budget targets, systematically increasing the share of public budgets applied to preventative interventions year on year

- Disinvestment in ineffective services, moving away from traditional or reactive services that lack positive impact or are no longer fit for purpose, so that public services constantly seek to improve performance and reduce costs, and are open, transparent and accountable.

In doing this it was argued that we would reduce overall system demand and achieve better long-term social and economic outcomes.

These objectives remain unrealised. In tight economic circumstances, prevention is often 'the first thing to go' as acute service response and meeting statutory requirements are prioritised⁴⁹. Scottish Government revisited this agenda last year with the publication of its Public Service Reform Strategy⁵⁰. Based on three pillars: prevention, joined up services and efficient services, it seeks to provide the foundations and workstreams needed for improved health, equality and prosperity.

48. Commission on the future delivery of public services (2011) Report ("Christie Commission") <https://www.gov.scot/binaries/content/documents/govscot/publications/independent-report/2011/06/commission-future-delivery-public-services/documents/0118638-pdf/0118638-pdf/govscot%3Adocument/0118638.pdf>

49. Dunn (2022) op cit.

The need for reform is urgent: based on current expenditure Scottish Government predict that by 2029-30 there would be a £4.7 billion shortfall in resource and capital spending⁵¹.

To develop this agenda, earlier this year the Scottish Government set up a specialist unit within government. The Prevention Unit has produced several resources to support the development of prevention thinking and practice, including a report evaluating a pilot approach to preventative budgeting in the Scottish budget, a review of preventative learning over the past 25 years and a toolkit of resources to support services to develop preventative approaches⁵². However, to date, this work is not directly part of the homelessness prevention systems change work being developed in Scottish Government, primarily by the Homelessness Unit. This illustrates the challenges with existing silos that sit even at the heart of government thinking, and its operational model.

The public service reform agenda provides a timely opportunity to radically alter this way of working; allowing public services to work better together and coalesce around a set of shared outcomes with housing and household stability at its core. The same approach is needed at all levels of government: successfully preventing homelessness and achieving housing

stability at scale across Scotland will need to be a shared endeavour across multiple portfolios if it is to be successful.

Overcoming barriers to delivering on effective prevention

The Scottish Government recognises that prevention is not yet prioritised within public services across Scotland. Some of the known barriers to taking a more preventative approach include⁵³:

- **Silos in policy making, service delivery and scrutiny** at all levels - from national government to localised practice, silos which fragment the needs and experiences of the person or household requiring support
- **Lack of a clear and consistent vision** or goal for what prevention looks like
- **Short-term funding cycles** meaning work starts and stops and then starts again
- **Separate budgeting processes with conflicting objectives and motivations**, whereby benefits and costs often accrue in different budget streams

- **Lack of, or unclear, lines of accountability** of prevention agendas resulting in counterproductive power imbalances
- Confusion over **leadership**, or tensions in leadership
- **Challenges with data**, where it is not the right data, not granular enough, not shared across services, and not measured consistently
- **Challenges evidencing prevention impact**, sometimes due to lack of measurement or accountability frameworks, sometimes due to the difficulty of proving a counterfactual or to the slow nature of change – often longer than a budget cycle or even a political cycle
- Narratives about individual responsibility for the problems people face, **failing to recognise the structural factors** at play
- An absence of communications strategies designed to engage populations early, before more serious problems arise.

Further challenges – and opportunities – emerge when public services are restructured. In the early stages of the development of the homelessness prevention proposal, it was expected that a large portion of adult social care and other services would be siphoned off into a new National Care Service. That proposal has fallen by the wayside, but in the last few months, Scottish Government has proposed major restructures of both local government and NHS health boards⁵⁴.

Uncertainty about major service structures make it difficult to plan effectively when implementing new legislation and reconfiguring services. Nevertheless, there could be a valuable opportunity to recognise and place the stability of people's home at the centre of effective service delivery and of the population's health and wellbeing, as long as housing is given the prominence argued for by Professor Maclellan and others⁵⁵; regional structures do not become too focused on housing as infrastructure at the expense of individual experience of home; and the Public Service Reform Strategy principles of prevention and joined up services can be the foundation for delivering a new early action housing support system.

50. Scottish Government (2025) Scotland's Public Service Reform Strategy

51. SPICE (2026) Key issues for session 7 <https://www.parliament.scot/chamber-and-committees/research-prepared-for-parliament/research-briefings/2026/5/12/sb-2625/pdf>.

52. <https://www.gov.scot/collections/scottish-government-prevention-unit/>.

53. SG (2025) Public service reform strategy; Davies, Teixeira, Hurst (2025) A smarter approach to homelessness: Prioritising prevention in the 2025 spending review. Centre for Homelessness Impact / Institute of Government <https://www.instituteforgovernment.org.uk/publication/smarter-approach-homelessness>; Homeless Network Scotland (HNS) (2026) The Level: Raising the Floor for No Wrong Door <https://homelessnetwork.scot/wp-content/uploads/2026/09/The-Level-web.pdf>

54. Scotland's 32 councils could be cut to six under government plan, 1 September 2026

<https://www.bbc.co.uk/news/articles/ck3wj23ze7n0o>; Swinney to cut number of health boards from 14 to two, 21 September 2026 <https://www.bbc.co.uk/news/articles/c9dw5x611qpo>.

55. Maclellan and Fleming (2025) op cit.

Integrating public services

Services working together to intervene early

Reviewing the literature looking at models of intervening early, some of the key principles and models include:

- **Shifting to primary prevention:** Targeting the root causes - poverty, family conflict and debt before things escalate⁵⁶; and dedicating strategic funds for shifting to prevention⁵⁷. Previous examples of this from the Scottish Government include the Whole Family Wellbeing Fund and the Integrated Care Fund to support the development of Integration Authorities. (This was also supported by a Change Fund)⁵⁸.
- **Co-location of services and community hubs:** Using settings which are familiar and accessible to people, such as schools, GP practices, or community centres can reduce

barriers to seeking help⁵⁹. Bringing together services into one location can improve communication and relationships between services⁶⁰. Evidence from the US suggests that people receiving bundled services, along with intensive coaching, are three to five times more likely to achieve economic stability than people receiving just one isolated service⁶¹.

- **Multidisciplinary teams and integrated care models:** Working across service boundaries in co-ordinated ways with shared priorities is more likely to ensure holistic support⁶² and ensure people don't fall through gaps, for example by providing wrap-around support as they leave institutions⁶³.
- **Relational and flexible engagement:** Prioritising relational support over process. Where people have experience of trauma, trauma-informed approaches, being proactive and offering opportunities for sustained engagement will be important⁶⁴.

- **Maximising income:** Maximising people's finances through debt and money advice can reduce financial stress⁶⁵, as can targeted cash transfers such as the Cash First⁶⁶ approach.
- **Using data to look ahead:** Administrative data on council tax, rent arrears and benefits deductions can provide important information which can help identify people in emerging financial difficulties and potential housing risk⁶⁷. It can also flag people who are leaving institutions such as the care system, prisons, hospitals, asylum housing or the armed forces so that support can be put in place early.

Structural integration mechanisms such as Integrated Joint Boards or multi-agency panels are key to breaking down siloes by establishing shared outcomes, pooling budgets and enabling resource movement across pathways⁶⁸. Another systemic enabler is to involve people with lived experience to ensure services design

is grounded in reality, is non-stigmatising and responsive⁶⁹. And finally sustained investment protecting early intervention budgets from being raided to manage short-term acute pressures, recognising that "integration costs before it pays"⁷⁰.

Challenges for preventing homelessness

Above we identify a number of barriers that stop effective prevention work. There are also specific barriers to prioritising homelessness prevention which need to be considered. An analysis by the Centre for Homelessness Impact and the Institute of Government⁷¹ found that, alongside generic barriers, within the homelessness and housing system itself there can be specific factors that may stop the prevention agenda from flourishing. They provide examples of perverse incentives, such as a more substantive support or housing offer for people who become homeless⁷², as well as an inability to identify people at risk through data systems and a lack of a clear objective for homelessness prevention.

56. Slocock C (2022) Why don't we invest in early action? Lessons from the Early Action Taskforce, 2010-2021.
57. SG (2025) Learning from 25 years of preventative interventions; Slocock (2022) op cit.; Bennett, E, et al (2016) Early Action Neighbourhood Fund: Learning and Evaluation: Year 1 Programme report.
58. Hendry, A et al (2016) Improving outcomes through Transformational Health and Social Care Integration – The Scottish experience, Healthcare Quarterly 19(2):73-79; McTier, A (2024) National Guidance for Child Protection in Scotland 2021: Analysis of local implementation final report.
59. Scottish Government (2025) Learning from 25 years of preventative interventions in Scotland; OECD (2024) An integrated approach to service delivery for people with multiple and complex needs https://www.oecd.org/content/dam/oecd/en/publications/reports/2024/03/an-integrated-approach-to-service-delivery-for-people-with-multiple-and-complex-needs_a7fe6844/d837a06a-en.pdf Centre for Homelessness Impact (CHI) (2023a) Integrating health and social care for people experiencing homelessness
60. CHI (2023a) op cit.
61. Bowen, R (n.d.) Achieving financial stability for individuals and families through integrated service delivery: Highlights form the United Way System
62. Centre for Homelessness Impact (2023b) What Works Evidence Notes: Mental Health and Homelessness; CHI (2023a) op cit.; Centre for Homelessness Impact (CHI) (2024) What Works Evidence Notes: Prison Discharge and Homelessness.
63. OECD (2024), OECD Toolkit to Combat Homelessness, OECD Publishing, Paris, <https://doi.org/10.1787/0fec780e-en>.
64. Bramley et al (2019) op cit.; CHI (2023a) op cit.; SG (2025) Learning from 25 years of preventative interventions.

65. SG (2025) Learning from 25 years of preventative interventions; Centre for Homelessness Impact (CHI) (2026) Exploring the relationship between problem debt and risk of homelessness.
66. Scottish Government (2023) Cash-First - towards ending the need for food banks in Scotland: plan.
67. CHI (2026)
68. Slocock (2022) op cit.; SG (2025) Learning from 25 years of preventative interventions; CHI (2023a) op cit.; Donaldson C, Knight P, Noble AL, Strathearn S. (2024) Health and Social Care Integration in Scotland: Evidence vs Rhetoric. International Journal of Integrated Care; 24(1): 4, 1–4
69. CHI (2023a) op cit.
70. Slocock (2022) op cit.
71. Davies, Teixeira, Hurst (2025) op cit.
72. The HRPG identified this as a particular risk within the Scottish system, where most homeless people are housed in social housing, and the proportion of social homes being let to homeless households have increased substantially. This could disincentivise some people from engaging with prevention activity, where it is perceived that they are more likely to get a social home through the "homeless route".

Mackie (2022) identifies six factors that can either act as barriers or enablers to effective homelessness prevention: effective universal prevention, political will, systematic integration, collaboration and buy-in between public bodies, appropriate resourcing, and equal access to support across equalities characteristics⁷³.

The reality on the ground

Research, partly commissioned by Crisis Scotland for this report,⁷⁴ surveyed members of the public on what they thought would make a difference to getting the support needed before problems became more serious.

- Three in five (63%) felt having one person who could help them access and co-ordinate different types of support would make a great deal of difference (89% felt it would make at least some difference)
- Consideration of whether someone might need support with other issues when they seek help for one problem was thought to be helpful by 86% of people surveyed, and being offered help when there are signs they might be struggling (rather than having to seek it out themselves) would make a difference according to 83% respondents.

- Co-locating services in one place was thought to be helpful by 87% of respondents.
- 86% people felt being able to access more types of face-to-face locally would make a difference, but three quarters (74%) also felt remote access online or by phone would make a difference. There was little variation between respondents in rural or urban areas on these questions.

They were also asked what they thought might happen if someone tried to get help with interconnected problems such as issues with health, money or housing.

- Very few, around 16%, thought they would be able to get help with the different problems through a joined-up process that considers all of their needs.
- 85% thought they would have to explain their situation multiple times, and a similar proportion (83%) thought they would have to go to several different places to get the help they needed.
- When trying to access help, two thirds of people (68% in urban areas, 61% in rural) expected that there would be long waiting times before receiving help, and half felt different local

organisations might not work well together (52% in urban and 48% in rural areas). Around a third thought there could be a lack of the types of support people need (35% in urban areas, 32% in rural).

- People in rural areas were more likely to believe there would be difficulties travelling to access support services, or that support services would be too far away (44% and 40% compared to 32% and 22% in urban areas respectively).

In terms of seeking out help in the first place, the majority (58%) felt people would not know where to find information about support, and over half (56%) felt there is a lack of awareness that support is even available. Perhaps surprisingly, stigma was considered more a barrier to asking for help in urban areas than in rural areas (50% compared to 43%).

These findings suggest that there is a strong appetite amongst the public for much more joined up services which look at people's needs holistically and operate in ways that make them more accessible. Help to navigate services and consideration of what other support needs someone might have was valued. But very few people thought they were likely to get

such person-centred support, even when the services were available. Crucially, most respondents felt that people would not know where to look for support.

Turning to the perspectives of local authorities across Scotland around homelessness prevention more specifically, findings from the 2026 Homelessness Monitor Scotland survey of local authorities (not just those involved in the pilots)⁷⁵, demonstrate that currently they feel only able to prioritise homelessness prevention to an extent. This is due to a mix of focusing on existing 'reactive' statutory duties, particularly in relation to temporary accommodation (with homelessness prevention not being a core statutory duty in the same way), and due to funding concerns. These were particularly in relation to lack of dedicated funding and uncertainty about key funding streams. Where authorities did feel able to prioritise prevention, funding in local budget settings processes and strong relationships with the relevant partners were key factors for success.

Significant concern was expressed by local authorities about the lack of clarity on what relevant bodies will be expected to do, and the level of resourcing that will be made available to support implementation. They noted an appetite to work differently but expressed concerns regarding the

73. Mackie (2022) Preventing Homelessness and Housing Exclusion: A Focus on Early Intervention <https://orca.cardiff.ac.uk/id/eprint/154851/1/P%20Mackie%202022%20preventing%20homelessness%20postprint.pdf>.

74. Diffley Partnership September 2026, Scotland's Rural Voice, n=3,314. Figures were broken down by urban and rural. They are listed here as the urban figure unless there is more than 2 percentage point difference between urban and rural, when both figures are provided.

75. Watts-Cobbe et al (2026) Homelessness Monitor Scotland 2026.

current level of day-to-day pressures, perhaps not surprising given that the Regulator has identified risk of systemic failure in a significant proportion of local authority homelessness services in recent years. They also identified that established understandings of the service's role could limit joint working and early intervention, underlining the shift in culture that will be required to support the new emphasis on prevention.

What we know works so far for preventing homelessness

New research has identified four protective pillars that are needed for universal homelessness prevention, or in the language of public health, primary prevention⁷⁶:

1. A decent income through work and/or social security
2. Access to safe, affordable housing, provided some of this is targeted towards those who need it most
3. Supportive social relationships, which can provide buffers against crisis, and facilitate access to support and economic opportunities. (Conversely, relationship breakdown and being asked to leave are the biggest triggers of statutory homelessness, and domestic abuse is the largest cause of homelessness for women).

4. Good physical or mental health, or appropriate support for health challenges.

The authors argue for an approach of progressive universalism, targeting support at those who are most in need of it. They provide powerful examples of using data linkage across services to do so.

Beyond primary prevention, we need to consider other levels of prevention – secondary prevention, targeting those at particular risk, and tertiary prevention to prevent re-occurrence of problems once they have happened. The system transformation that we are seeking should address all of these, but the homelessness prevention duties themselves are initially focused on those at higher risk and ensuring that problems do not recur.

In 2022, Crisis gathered practice on preventing homelessness from around Scotland and beyond⁷⁷. As well as showcasing powerful examples of existing work across prevention levels and different services, it drew out principles emerging from the practice. Some of the core messages were:

- **The central role of relationships unites many interventions:** finding better ways to communicate, understand and build trust between people was key, both among those using services and those providing them
- **Trauma-informed approaches inform a range of intervention types:** understanding that people have reasons

for what they do or don't do can help unpack issues such as hoarding, self-neglect and neighbour disputes

- **Cross-sector working needs culture change, time and deliberate focus.** It's not a quick fix, and embedded, co-located, navigating, connecting and co-ordinating roles have a big part to play.
- **People with experience of homelessness (or other social harms) can change service culture, as well as enhance engagement**, overcoming stigma and shifting power dynamics, changing staff attitudes and understanding of the root causes of difficulties.
- **Training and ongoing awareness-raising** have key roles to play if preventing homelessness is to really become 'everybody's business' and services can work across disciplines.

In addition the report highlighted some more practical points, including:

- how low threshold and hub type services can catch problems early especially if situated where people already do
- the important role of data and screening in identifying at-risk groups early on, including people we may not have expected
- the difference tenure makes in access to assistance, and the need for private rented sector prevention approaches

- the ingredients of more 'upstream' interventions are very similar across many different public services, suggesting that they have wider benefits than simply stabilising housing for people – who do not live in sector silos, but in communities.

As mentioned, Scottish Government has funded two rounds of pilots to inform the delivery of the new homelessness prevention measures. £1 million was allocated to registered social landlords during 2025-26⁷⁸, and £4 million was distributed across 15 pilot areas to test out how the Ask and Act duties might work in practice, particularly in relation to the public bodies listed in the legislation.

Key themes emerging from the pilots⁷⁹ are:

- Recognising risk before symptoms have emerged. Routinely asking across diverse settings such as ambulance callouts, police welfare checks, hospital admissions, school interactions and social housing management can identify hidden issues. Identifying hidden homelessness such as temporary stays or sofa surfing is vital
- "Ask"
- Ask: Relational, trauma informed and person-centred approaches rooted in empathy, trust and deep listening, rather than transactional, bureaucratic processes.

76. Fitzpatrick and Mackie (2026) Working toward 'universal' homelessness prevention: protective pillars at national and local levels. In Teixeira and Hurst (eds) How to use evidence to end homelessness: For smarter, more impactful action. pp70-85.

77. Dunn (2022) op cit.

78. SG / SFHA / HNS (2026) op cit.; Advice Direct Scotland (2026) op cit.

79. SG / SFHA / HNS (2026) op cit.; Advice Direct Scotland (2026) op cit.

- Ask: The quality of the conversation is central. Asking about housing circumstances works best when part of a natural enquiry into wellbeing, using flexible and stigma free language
- Ask: An effective “ask” about housing circumstances must be brief, relevant, easy to understand, proportionate to the staff members’ role, and linked to clear next steps.

“Act”

- Act: Acting is complex, because the underlying issues – such as debt, mental health or tenancy disputes – are complex, and can take significant time to resolve
- Co-ordinated support, warm handovers and multiagency working provide much better outcomes than signposting or providing contact details
- Cash First interventions and discretionary budgets have been one of the most effective ways of sustaining tenancies
- Act: In social housing community connector and tenancy support roles can help where people have disengaged from housing management support.

Systemic barriers and lessons for roll out:

- Time to prepare is essential. There were significant initial delays in the pilots particularly relating to complex multiagency recruitment processes and the lack of lead-time prior to starting the pilots
- Existing IT structures, databases and CRM tools were not able to capture and track data or outcomes. Holdups emerged relating to the pace of agreeing data sharing protocols and carrying out Data Protection Impact Assessments
- Frontline staff need support for psychological safety, including trauma-informed training and clear threshold guidance so they feel capable and supported when hearing about difficult situations. This protects them from burn-out and enables them to operate in a more relational way
- Lack of affordable housing and rapid rehousing options creates bottlenecks and hinders effective prevention work.

Moving from ambition to system transformation

Transforming the homeless system from a crisis management model to a prevention first model will not be easy. The laws and policy agenda have been agreed, but the delivery plan for systems change is yet to be determined.

Implementing the provisions in Part 5 of the Housing (Scotland) Act 2025 is only a small part of the picture. The Scottish Health Equality Research Unit⁸⁰ point out that “passing legislation alone... will not be sufficient; the impact of the Housing (Scotland) Bill will depend on adequately designed, sufficiently resourced delivery mechanisms to ensure effective implementation to allow the realisation of improved health outcomes”, and, one might add, other improved outcomes. The Auditor General recently blogged about the challenges Scottish Government experiences on delivering effective policy: “My audits, and those of my predecessors, have shown repeatedly that Scottish Government is good at setting out its vision, producing strategies, frameworks, and plans. But it has struggled to deliver on policy ambitions...”

He goes on to write about the opportunities provided by public service reform. He notes that “Setting out that goals will be achieved by the end of this parliament will not be enough. Ministers need to explain to the public and the Scottish Parliament what stepping stones will be taken so that they get there. And the devil will be in the detail of those delivery plans... Without clear priorities, robustly costed and adequately resourced policies, agreed delivery timelines, and well understood measures of success, meaningful reform will be difficult to deliver.”⁸¹

Crisis Scotland believes this applies as much to delivering on a modernised homeless prevention support system that achieves greater housing and household stability outcomes as it does to delivering the public service reform agenda, as they are much the same.

Analysis of experiences from England of trying to implement homelessness prevention measures through the Homelessness Reduction Act 2017 suggest “widespread under-preparedness at system level”⁸². Beyond the creation of a very broad legal framework, there has been little progress over the past five years around the wider approach and culture shift needed to support housing stability and homelessness prevention, further undermined by structural issues including welfare reforms and lack of affordable housing. We need to act urgently to mitigate similar challenges as we embed these protections in Scotland.

There is a lot of learning available about what works, what doesn’t work and what is needed in order to build a system which acts early to prevent housing and household instability, to the benefit of individuals, society and public services. The rest of this report focuses on how we might make this a practical reality.

80. SHERU (2025) op cit. p18

81. Auditor General (2026) Attention to detail a must for public service reform, 24 August 202 <https://audit.scot/publications/auditor-general-blog>.

82. Davies et al (2025) op cit. p16

"Setting out that goals will be achieved by the end of this parliament will not be enough. Ministers need to explain to the public and the Scottish Parliament what stepping stones will be taken so that they get there. And the devil will be in the detail of those delivery plans... Without clear priorities, robustly costed and adequately resourced policies, agreed delivery timelines, and well understood measures of success, meaningful reform will be difficult to deliver."

Stephen Boyle, Auditor General for Scotland

PART 2: Expert essays: Visions for Success

In part 2 of this report, we hear from people who have been instrumental in bringing housing and household stability to the forefront in Scotland through political action and practice.

Former government minister, Kevin Stewart, lays out his plea for a cross-government and cross-sector agenda which puts people's homes and experiences of support at the centre of public service delivery. Karyn McCluskey, pioneer of violence reduction and now Chief Executive of Community Justice Scotland, argues that ambition and leadership, together with joined up and tailored approaches which meet individuals where they are at, are critical ingredients to end the disgrace of homelessness in 21st century Scotland.

Derek McGowan, Service Director of Housing and Homelessness at Edinburgh Council, highlights the crucial role data could play in helping us act early, and the necessity of looking at these issues through a public health lens.

Nicky Miller from Turning Point Scotland, instigators of Housing First in the UK, writes about the process of bringing systems together and some of the milestones on the way to preventing harms connected to homelessness. And finally, Crisis chief executive, Matt Downie, writes about the political will and leadership required to bridge the gap between aspiration and reality to end homelessness in Scotland.



Kevin Stewart Former SNP MSP and Scottish Government Minister

Kevin Stewart was MSP for Aberdeen Central for 15 years. He is one of the longest serving ministers for housing in recent years, from 2016 to 2021, and subsequently was Minister for Mental Wellbeing and Social Care for two years.

Ending Homelessness Together was the clarion call that came from the work of the Homelessness and Rough Sleeping Action Group (HARSAG), that I established when I was Housing Minister, and no-one can argue with that ambition. We all owe a debt of thanks to HARSAG members and its chair, Jon Sparkes, who was chief executive of Crisis at that time. I think many would agree that since HARSAG's recommendations were published there have been a lot of advances, but also many setbacks in achieving the aim of Ending Homelessness Together.

The latest Housing (Scotland) Act has put our legislation in a place where homelessness prevention is key. Designated public bodies, such as councils, health boards and the police must now proactively ask people about their housing situations and intervene early to help those who are at risk of losing their homes. However, we know that some bodies interpret legislation differently from others and we cannot afford for that to be the case.

Best practice should be exported across our local authority, health board and public sector in order to achieve positive outcomes for people. Data collection, sharing and case handling should be uniform, but allow for innovation and continuous improvement. I also hope that eradicating homelessness will be considered as a key component in shaping the future through the Scottish Government's public service reform agenda. The pooling of budgets, the demolition of silos and much more joint working on preventing homelessness must become the norm and not the exception. Getting this right could save lots of public money, but more importantly will save the human costs that will occur if we get it wrong.

It is important from a Scottish Government perspective to ensure that homelessness prevention is seen as an issue for all ministers and not just a matter for the Cabinet Secretary responsible for housing and his or her team. There is an opportunity to beef up the advisory, scrutiny and continuous improvement roles of the Homelessness Prevention and Strategy Group and for ministers from across the portfolios to be much more involved in the important deliberations of this multi-disciplinary working group. Finally, the voices of lived experience must be listened to so that we shape the right path, the right laws and most

importantly the right services that work for people. Progress has been made on that front, and the work of the Lived Experience Prevention Commission was vital in helping to shape the new legislation. However, those with the lived and experience and knowledge are often not heard at a local level and that must change. We need to know what works for people and what doesn't in every airt and pairt to improve service delivery across Scotland.

My plea to ministers, councillors and public sector leaders is to work together with third sector organisations such as Crisis, the Simon Community and housing associations to co-operate,

and to implement the new prevention legislation, adhering to the spirit of the law rather than searching for loopholes to stymie change. And please, please listen to those who have gone through the pain of homelessness, so you make the right decisions for them.

The old adage that states that prevention is better than cure is right, so we must do all that we can to prevent people falling into homelessness. Let us all truly commit to heed to HARSAG's original clarion call, let it resonate once again and let's all commit to Ending Homelessness Together.



Karyn McCluskey Chief Executive of Community Justice Scotland

Karyn McCluskey is the founding chief executive of Community Justice Scotland and on the board of Simon Community Scotland. With a background in forensic psychology, nursing and policing, she was key in establishing the Violence Reduction Unit initially within Strathclyde Police and then working across Scotland. She is one of Scotland's leading advocates for prevention, public health, and justice reform.

How do you stay out of crime if you have nowhere to stay?

If I could do one thing to make the justice system work better, it would be to tackle homelessness.

We talk about prevention in justice: diversion, rehabilitation, recovery, reducing reoffending. Yet often we invest enormous effort helping people move forward, only to watch them fall back because they have nowhere stable to live. I know a young man who contacts me almost every day. Every few months his messages become more disjointed, his mental health deteriorates and his home begins to fall apart around him, a tenancy harder to sustain.

What he needs is not a crisis intervention six months down the line. He needs someone to check in regularly, who

notices when things are starting to slide and can help him hold on to the stability he has.

Across the justice system I see versions of this story every day. People careering towards homelessness. We have become inured to the fact that, in one of the wealthiest countries in the world, people do not have a safe place to call home.

Connected problems need connected action. Homelessness doesn't sit neatly in a housing box. It's bound up with mental health, addiction, poverty, family breakdown, trauma, isolation and contact with the justice system. Yet we still organise our responses as though these things exist separately. We spend significant sums helping people through recovery, programmes to reduce offending and supporting people leaving prison. Unless there is somewhere safe and stable for them to come home to we shouldn't be surprised when progress unravels.

People need connection and belonging: neighbours, community, relationships. For many people, homelessness is not simply the absence of housing, it's the absence of place.

Ask people what they need. People are usually the best diagnosticians of their own circumstances. They are not passive recipients of services, they understand their own lives.

Helping them get there takes discretion and creativity, not a tick list and an existing menu of services. Active listening, followed by a verb in the sentence. A doing word.

I remember speaking to a woman whose life was beginning to unravel. Her children weren't attending school regularly, her home was chaotic, and she was exhausted and fragile. When I asked what would make the biggest difference, she said, "I'd really like a cleaner."

When the house got on top of her, she no longer knew where to start. Her answer was simple and relatively cheap. By contrast, public services can be very expensive indeed.

Meet people where they are. Too often we design systems around how we would like people to behave rather than how they actually live. We send letters to people regularly on the move, we book appointments and penalise people for missing them. We expect perfect compliance from people navigating imperfect lives.

Trust people to do the right thing. Some of the most compassionate people I know work in housing and homelessness services, across the public and third sectors. They hear stories of trauma, desperation and hardship, yet they are often constrained by processes, targets and rules.

We need cultures that trust professional judgement and look after the workforce that is looking after everyone else.

Simon Community Scotland has been buying flats to let to people who have experienced homelessness, and I love the test they apply: If this were my son or daughter, what would I do? What support would they need to make this a home? It's a question every one of us could ask more often.

Leadership matters. I remember hearing Kezia Dugdale, the former Scottish Labour leader, reflect on how much she wished she had understood homelessness better earlier in her political career. She went on to chair Shelter Scotland. That honesty stayed with me, because homelessness grows more complex the closer you get to it, and it needs leaders who understand both the complexity of the challenge and the urgency of the response.

At the moment, responsibility feels dispersed across many organisations and sectors. When everyone is responsible, nobody truly is. We need leadership that stays the course, outlasts electoral cycles, and is prepared to be held to account for results.

Aim higher. When I walk down Princes Street in Edinburgh, I see tents. I know the reasons are complex and there are no easy answers. But I remain struck by how little public outrage there is that people have nowhere safe to return to at night.

It is a policy choice, a societal choice and a leadership challenge. If we are serious about prevention, justice and about giving people the chance to build stable lives, then homelessness cannot sit at the margins of our agenda. It has to sit at the centre. Anything less is simply unacceptable.



Derek McGowan

Service Director, Housing and Homelessness at The City of Edinburgh Council

Derek is the Service Director for Housing and Homelessness at the City of Edinburgh Council and has a strong interest and experience in anti-poverty work, community learning and justice services, equalities and prevention and early intervention practice. Previously he was chief officer for early intervention and community empowerment at Aberdeen City Council.

What question are we trying to answer when we discuss preventing homelessness?

There are a number of questions that help us understand the system to a degree – including its drivers, consequences, key players and costs. Research has been continually updated to tell us how many homes are needed, what tenure they should be, and over what timescale.

While helpful, they don't address the fundamental knowledge gap in the system: we don't know how many people are actually homeless in Scotland. Reasons for this include legislation that provides people with eligibility for housing in multiple Council areas simultaneously, likely under reporting and assessment of homelessness – all underpinned by

ongoing concerns about sharing data. We can see a picture, but up close the strokes are broad.

The new 'Ask and Act' duty will add detail to the picture, and hopefully the Ask and Act pilots underway will identify the operating system required. But are we prepared for what it will look like?

There is an important comparator in recent public policy. When Police Scotland strengthened its response to domestic abuse, reporting and investigations rose significantly. This was welcomed but the problem had not suddenly grown; it was being identified more effectively and responded to more systematically.

With eight relevant bodies subject to the 'Ask and Act' duty the same result is predictable, and without centralised recording of relevant data, and appropriate linkage and analysis we will remain strategically and operationally incapable of making the shift needed, but with an increased workload and cost. Put simply, if we don't have an accurate understanding of who is homeless, where, and why, we cannot design a system capable of preventing it.

We may find that the scale of homelessness is greater than we currently believe; or smaller and requiring less, or

more concentrated than we think. Any of these realisations would change our understanding of the national housing emergency and the investment needed.

Homelessness is a tragedy of our making: education, economy, employability, social mobility, physical and mental health all shape the likelihood of someone having no place to call home. These are precisely the factors a prevention-focused public health system seeks to address.

This brings us to what I believe is the correct question: 'Is homelessness a public health priority in Scotland'?

If the answer is yes, our policy has not caught up with our ambition. A significant improvement in the sharing, collection and analysis of data is required, because where data is analysed well, important insights emerge. The Scottish Health Equity Research Unit recently identified and explored the policy gap affecting single men aged 18-44, a cohort that accounts for around half of all homeless presentations in Edinburgh. Systematic collation and analysis of related datasets is fundamental in identifying the targeted investments and interventions required to prevent homelessness. Our ambition should be to both predict homelessness where possible and then prevent it.

This requires focus and infrastructure. Scotland has a strong history of public health approaches and of world leading public health legislation where the evidence is clear it matters. Smoking cessation, cancer screening and the public health response to violence all demonstrated what evidence-led prevention can achieve. In each case, investment delivered better outcomes, reduced demand on services, reduced cost and generated wider social benefits when approached at population level.

In 20 years time we should have added homelessness prevention to that list of public health achievements. We have never had a better opportunity.

Some practical steps I believe are needed ahead of implementation of the Ask and Act duties include:

1. Formally recognise homelessness as a public health issue
2. Examine the homelessness system through a health economics lens to better understand the cost of failure and the value of prevention
3. Develop a trauma informed, data led system that enables local, regional and national understanding of homelessness.



Nicky Miller Head of Homelessness and Prevention at Turning Point Scotland

Turning Point Scotland is the country's leading social care developer and provider, supporting people to build community and be active citizens. Head of Homelessness and Prevention Nicky Miller is responsible for the delivery of a range of services across Scotland and TPS' internal and external strategy on homelessness in Scotland and in Europe.

The homelessness prevention duties: what should success look like?

We like to think that Turning Point Scotland (TPS) is known for developing and delivering innovative services across social care, including homelessness and prevention, alcohol and other drugs, justice, mental health and learning disability. Because we deliver this vast range of services, we see across the whole of the social care system just how siloed and disjointed it is, especially for those who experience it most closely. This is why, at TPS, we believe that in order to prevent homelessness, we cannot respond by just introducing more services, we need to commit to systems change – both a cultural shift in terms of shared responsibility and a shift in where funding comes from and how we measure success.

Ultimately, the prevention duty will have succeeded when people at risk of homelessness have access to the support that they need to prevent that homelessness from happening. The real success will be in improved experiences for people who need that support, and in the prevention of homelessness wherever possible. But we will only achieve this success through a shift in culture and in practice that will, in turn have a much wider impact. The success of the prevention duty should be measured in terms of whole system improvement.

One of the main premises of the prevention duty is that the responsibility – and the ability – to prevent homelessness does not belong to the homelessness system alone but is shared across the public service system. Whatever a public service is trying to achieve – improved physical or mental health, reduced alcohol or other drug related harm, sustained recovery, reduced reoffending and safer communities – the person's housing situation matters. Housing stability will help to deliver these goals, and delivering these goals will help to deliver housing stability – it is a shared responsibility and a shared reward.

Another is that anyone involved in public service delivery may have the opportunity to help prevent homelessness. The duty asks us to think about what the person might need beyond the service that we offer, and crucially to make a connection

with other agencies that might be able to meet that need. This is a challenge to the siloed and fragmented way in which our public services often operate, despite efforts towards integration. The work to implement the duty gives us an opportunity to address the barriers that have kept our public services so segregated.

The success of the duty will be evident in how well it supports and facilitates services to come together and make those connections. We'll know we are making progress when we see:

- Improved understanding of the local service delivery landscape and how each agency fits in
- Local integration structures that support effective joint working
- Innovation and development of approaches that combine efforts to respond to local priorities
- Open and clear lines of communication and the safe and efficient sharing of information.

These will all support efforts to identify and respond to risks of homelessness, as well as strengthening our public services more generally. They are also crucial elements of a whole systems approach, rather than the introduction of new services to fill the gaps.

We're often asked how to start with systems change. And our answer is you start from where you're at. In the early stages, success will look like starting a shared conversation with people and agencies around the table who have a

shared commitment. In the medium term, success can look like learning as you go. Identifying where the barriers are and working to remove them.

The systems change we need doesn't have to be big or structural and it doesn't need to happen all at once; small, organic changes that work for local practice will add up to the bigger cultural shift that we need. The expertise, the ideas, the will and in many areas the momentum is already there in our communities. This needs to be supported by strategic vision, leadership and – crucially – investment that encourages and facilitates these new ways of working; The Scottish Government play a crucial role in this, not just in the housing portfolio but in public service reform, in justice and across the board.

The prevention duty isn't going to change everything, but it is the biggest step forward we've taken in articulating what needs to change in our public service delivery. We shouldn't lose sight of the purpose of the duty – this is about preventing homelessness, preventing harm, and ensuring that people have the best possible support when they need it most. It is about changing the way public services work, rather than introducing new services to work around gaps. But in this case, the success may be in the outputs as well as the outcomes. If we set the right milestones, invest properly in supporting changes in culture and practice and coordinate efforts across Government portfolios, the success of the prevention duty will be not only in preventing homelessness, but in delivering a public service system that works better for us all.



Matt Downie MBE Chief Executive at Crisis

Matt Downie has been chief executive of Crisis since 2022, having worked there since 2014. He was the lead author of Crisis' seminal Plan to End Homelessness⁸³, published in 2018 to mark Crisis' 50th year of existence. In 2019 he was awarded an MBE for services to tackling homelessness and in 2022 became Chief Executive.

Building a new different path

At Crisis our vision for Scotland is that homelessness is ended by making it rare, brief and not repeated. We strongly welcome the First Minister's aspiration to 'end homelessness for everyone' and 'shift from crisis management to prevention and rapid rehousing'.

We recently published our latest Homeless Monitor Scotland research¹ showing just how acutely these changes are needed. On any given night, around 1,000 people are sleeping rough in Scotland – more than double the low point reached during the pandemic. Councils are struggling to find the resource to prioritise prevention amidst huge demand for homelessness support. Without effective intervention, the rates of the worst forms of homelessness are projected to remain worryingly high over the coming 15 years.

Losing your home rarely happens unexpectedly. Usually, it is the breaking point of a combination of economic poverty, job loss, relationship breakdown, poor physical and mental health, a lack of strong social relationships and connections and, for some people, trauma and adverse childhood experiences which may have led to involvement in the criminal justice system and substance misuse. As this report demonstrates, often there are many opportunities for, and many failures by, public services to have intervened earlier. It is homelessness services that pick up the pieces – the ultimate failure demand.

The Monitor findings⁸⁴ also illuminate a different path, showing that reducing homelessness is achievable. Political decisions can make the difference between ending homelessness and letting it continue unabated: the right policy interventions could cut the level of the most severe forms of homelessness almost in half by 2028. Full implementation of the incoming homelessness prevention duties is among the levers forecast to have the most powerful impact on reducing homelessness.

83. Crisis (2018) Everyone In: How to end homelessness in Great Britain

84. Watts-Cobbe et al (2026) op cit.

The focus now is to bridge the gap between the First Minister's aspiration and reality. To make homelessness rare we must do everything within our gift to stop people losing their homes in the first place.

This will require a culture shift in how we work, from the frontline through to the top of Scottish Government. It will require vision and leadership. We will need to look beyond our service boundaries, work out how to talk to each other more effectively, share money and pool resources, look for goals beyond our immediate targets and workstreams. We will need to recognise that homelessness is not only a housing issue and the support required to prevent it will need to go far beyond traditional housing support. Services need to be approachable and centred around people, not putting barriers in the way of those trying to seek help, but placing household stability at the centre of every conversation, decision and plan.

This is not easy. But it will be worth it.

Alma Economics' analysis demonstrates that transforming public services to move away from crisis management and towards prevention has a cost. Frontloading funding in the upcoming Scottish budget is an essential first step to underpin a successful two-year implementation programme of work.

But the research also reveals that if we sow well now, there are manifold financial benefits to be reaped in the future across public services and, most importantly, better outcomes for the most vulnerable people in our communities.

Change is a process, not a one-off event, and ambition is nothing without effective delivery. Preparation will be key to success. A fully resourced delivery plan is a must. And the end goal must be that agencies work closely and strategically together towards clear shared outcomes that achieve greater household stability across Scotland.

The potential for transformation is huge - embodying the spirit of the Christie Commission, reducing the failure demand of homelessness and creating a presumption in favour of prevention.

Combining full implementation and resourcing of the new prevention duties with more social housing that is accessible, and support to sustain a settled home, can set Scotland on a clear path to ending homelessness for everyone, a goal we believe can be achieved by 2040 - provided the political will and leadership is there.



PART 3: Systems change: the need for a robust implementation plan

As stated earlier in this report, the most recent Programme for Government sets out clear and bold ambitions to end homelessness for everyone by shifting from crisis management to prevention and rapid rehousing. But this report's section on 'moving from ambition to systems transformation' makes it clear that policy intent is not enough, that a clear and precise plan is necessary to guide such a transformation, combined with leadership, progress measures and sustained funding linked to clear results. In this section of the report, we begin to identify the core elements needed for such an implementation programme to be successful. In addition, we make a series of recommendations, aimed at both a national and a local level.

The recipe for successfully implementing the homelessness prevention measures to achieve housing and household stability is very similar to that for any other prevention systems change agenda. Whilst we do not have to reinvent the wheel here, we will have to build on what we know and learn from the successes and mistakes of other prevention focused agendas and on the preparatory work carried out prior to the development of the legislation, by the HPRG, the Task and Finish Group and the consultation on the HPRG's proposals.

85. Mackie, P (2022) op cit.

3.1 Leadership

Evidence shows that good delivery of outcomes is based around effective leadership at all levels. Professor Pete Mackie comments that "achieving a significant shift in responses to homelessness, often with high upfront investment and an upheaval of prevailing systems, requires considerable political will. Its absence at any level of government can be a key barrier to the delivery of interventions that work."⁸⁵

Leadership takes many forms and constitutes a range of qualities and features. However, there are certain essential elements that are consistent with success: providing a clear vision and being able to articulate it in a way that resonates with those tasked with delivery, having a strategy and associated action plan the workforce understands and buys into, and having measures in place to monitor progress along the way. And, possibly mostly importantly, being clear on what success looks like – so that everyone is working towards a shared end goal and funding is directed at achieving this impactfully.

A vision of success and a theory of change

We have discussed the importance of housing and household stability as a foundation for economic success and personal wellbeing, as well as the failure of public policy to recognise this effectively in previous years. Home is the cornerstone of a place-based approach or any consideration of community. Home, therefore, should be central to national and local government's vision of success for Scotland, and this should be reflected in the national performance framework that will underpin future public service reform.

For the current homeless prevention pilots, investing significantly in "the early, explicit and positive articulation of vision, mission and values"⁸⁶ has been key to successful implementation. Developing this at a national level is a much needed first step towards the national roll out of a systems wide reform for achieve housing stability and preventing homelessness. Following a recent legislative review process in Wales, similar to HPRG in Scotland⁸⁷, Welsh Government responded by publishing their plans for new homelessness legislation⁸⁸, laying out their intentions and vision in a 168 page White Paper⁸⁹.

The Welsh housing minister stated in her foreword: "We have long recognised

that homelessness cannot be prevented through housing alone and that all public services and the third sector have a role to play in ending it... the entire Welsh Government is committed to this approach and these ambitious and widescale proposals will create the homelessness system that makes this vision a reality... our proposals will transform the experience of those who are homeless and at risk of homelessness and will fundamentally change the homelessness system and the role of professionals working within and around it... By widening responsibility for preventing homelessness, we create an opportunity to prevent the wider disadvantage, trauma and disruption that homelessness can cause. In so doing, we have an opportunity to improve individual well-being and life chances, lower health risks and increase life expectancy. As a consequence, over the longer term, we can lessen the burden on our public services."

Yet there has been no detailed statement as yet from the Scottish Government setting out its vision for how a new framework for homelessness prevention across services would look in practice, nor is there clear articulation on a cross-government commitment to tackling homelessness or clarity regarding the intended impact this work would have on wider life chances in the population, or its connection to the public service reform agenda.

86. Scottish Government (2026) Test and Learn Prevention Pilots Q3 2026 report p4.

87. Expert Review Panel (2023) Ending homelessness in Wales: a legislative review <https://www.crisis.org.uk/media/uqgbuwpp/ending-homelessness-in-wales-a-legislative-review.pdf>.

88. Homelessness and Social Housing Allocation (Wales) Act 2026 <https://www.legislation.gov.uk/asc/2026/3/contents>.

89. Welsh Government (2023) Welsh Government Consultation on the White Paper on Ending Homelessness in Wales https://www.gov.wales/sites/default/files/consultations/2023-10/ending-homelessness-white-paper_0_0.pdf.

In a report setting out how best to shift towards the prioritisation of homelessness prevention at national level, the Centre for Homelessness Impact and the Institute of Government state the importance of a unified vision and clearly communicated ambition of homelessness prevented. They argue this should be accompanied by a unified Theory of Change, clarifying the mechanisms by which the vision and ambition will be achieved⁹⁰.

On the other hand, whilst applauding Scottish Government's Housing to 2040 strategy for its aspiration, the Scottish Health Equity Research Unit (SHERU)⁹¹ notes "significant implementation challenges... in how integration is operationalised, understood and evaluated". They comment that "implementation [of national aims and local implementation] is being hampered by short-term budgets rather than sustained multi-year funding, adjustments to funding commitments, varying stakeholder interests, and difficulties related to the targeting and delivery of resources". They note "a key challenge remains balancing upstream preventative strategies with urgent action to meet immediate housing needs and reduce existing inequalities in housing and health" and they reiterate calls for a clear implementation plan.

With two years left before national commencement, there is an urgent need for a clear theory of change and plan for implementing the incoming homelessness prevention duties - and ultimately

transforming how vulnerably housed people receive the support they need to stabilise their situations.

Helpfully however, the newly established Scottish Government Prevention Unit recently published a toolkit for achieving just this. The toolkit should be used at both a national and a local level, helping to navigate the pathway to bringing about successful housing and household stability.

As a starting point, Scottish Government could identify how this agenda aligns with other strategic government priorities, for example the ambitious Public Service Reform strategy, the Child Poverty Delivery Plan and in particular Whole Family Support, the Population Health Framework and any forthcoming human rights legislation. In addition, understanding where and how outcomes align would be of strategic benefit. Specifically, clarity on where household and housing stability would sit under the newly proposed National Outcomes Framework, for which indicators are due to be published soon.

Lessons may also be drawn from the OECD's Toolkit on combatting homelessness, which states that "Effective strategies define and assess the scale and scope of homelessness; set measurable targets to reduce homelessness; co-ordinate initiatives across relevant policy domains (including housing, health, and social protection); and embed systematic monitoring and evaluation into the policy making process."⁹²

1. We recommend strengthening cross-portfolio leadership by creating an agreed vision of success, alongside a robust implementation plan, and the establishment of governance structures across all relevant government portfolios

- Recognising the importance of housing and household stability in the national indicators supporting the new National Outcomes, so that different legislation and public service priorities align and overcome potential silos in delivery.
- Establishing a clearly defined vision for success, specifying the outcomes that a reformed early action support system will seek to achieve, and what an effective operating model should entail. The vision should be explicit in the guidance for the new duties, as well as the training programmes and the associated desired culture change.
- Working jointly with the Prevention Unit, develop a coherent theory of change to underpin delivery of the vision.
- Establish a cross-portfolio oversight group to provide strategic leadership and overcome barriers to integrated working.

3.2 Urgently scale up the pilot learning programme across Scotland

The Ask and Act pilots have demonstrated the complexity of bringing together partners at local level, bridging different service cultures, languages, priorities, pressures and ways of working.

The work has continued at pace but timeframes have proven challenging, despite significant enthusiasm and buy-in from across partners. The most recent quarterly report stated that "for many pilots the end of quarter 3 [of 4] felt more akin to a halfway point" with "several pilots still involved in onboarding staff, building relationships with new partners and signing off core protocols"⁹³. This demonstrates that building a new preventative support system takes time. With only two years until national commencement, scaling up the pilot learning across Scotland needs to start imminently.

In 2023, the Homelessness Prevention Task and Finish Group, commissioned by the Scottish Government and COSLA⁹⁴, identified immediate actions to be taken to prepare for the impending duties and the culture shift that they would play a part in creating, including the development of an implementation plan with clear review landmarks within it. It is not clear what work has taken place in the meantime to progress these actions.

90. Davies et al (2025) op cit.

91. SHERU (2025) op cit.

92. OECD (2024), OECD Toolkit to Combat Homelessness, OECD Publishing, Paris, <https://doi.org/10.1787/0fec780e-en>

93. Scottish Government (2026) Test and Learn Prevention Pilots Q3 2026 report p4.

94. Homelessness Prevention Task and Finish Group (2023) op cit.

Other recommendations include implementation support teams, similar to the teams set up by the government in England to support implementation of the Homelessness Reduction Act, or funds to support specific actions and challenges, similar to the Rapid Rehousing Funding pot of a few years ago, a coordination role to connect infrastructure and national networks, and a national framework to support place-based approaches. Alongside these, the group recommended having national leaders including a national training lead to support implementation.

2. We recommend intensifying the learning through a second stage of piloting; allowing for best practice to be shared nationally

- Urgently scale up ambitions to expand and evolve the Ask and Act pilot programme through to commencement, so that learning and best practice is shared nationally, progress can continue and barriers to delivery and successful outcomes are addressed locally, or at national government level where appropriate.

- Implement the Prevention Implementation Task and Finish Group recommendations as appropriate.
- Consider introducing national coordinator and thematic leader roles to provide the necessary stewardship for scaling up learning and sharing best practice.

Public health prevention to avoid the worst outcomes: Scottish Violence Reduction Unit

The Scottish Violence Reduction Unit started as a Police Scotland initiative in January 2005, initially in Strathclyde, then dubbed the ‘murder capital’ of Europe. It was swiftly expanded across the country the following year.

The Unit adopts the belief that violence is preventable, not inevitable. It takes a public health approach, treating violence in all its forms as a disease, targeting all forms of violent behaviour including street/gang violence, domestic abuse, school bullying and workplace bullying.

Data and analysis are key to understanding violence and targeting resources. They seek to diagnose and analyse the root causes of violence in Scotland, starting with poverty, lack of jobs and adverse childhood experiences, secondary preventative measures intervening early with young people at risk of gang involvement, and tertiary prevention, offering rehab, mentoring and support for those already involved to interrupt the cycle. They then develop and evaluate solutions which can be scaled up across the country⁹⁵.

The team is made up of serving police officers, civilian police staff and experts. People with lived experience are central to the Unit’s work. Together they work closely with colleagues and partners across health, education, social work and many other fields.

In its 20-year existence, homicide has fallen by 67% and the cost of crime to Scotland has nearly halved⁹⁶. The model has now been replicated throughout the UK.

95. <https://www.svru.co.uk/about-us/>

96. Scottish Violence Reduction Unit (2026) Unfinished business: Violence reduction in Scotland 2026 https://www.svru.co.uk/wp-content/uploads/2026/02/SVRU001_State-of-Nation-Report_Digital.pdf

3.3 National infrastructure

Sustainable resourcing

At the time the Housing Bill was passing through parliament, a Financial Memorandum⁹⁷ was produced setting out what the homelessness prevention duties were expected to cost. Because the bill only provided a very broad legal framework it was challenging to determine what the new legal requirements were likely to involve.

The Financial Memorandum recognised that the measures in the bill would not be implemented until 2028 at the earliest. However, it estimated that local authorities would require £2.8 million in each of 2025-26 and 2026-27 (and a further £2.2million in 2027-28) to begin to implement the statutory duties contained within part 5 of the Bill.

The Memorandum looked solely at the costs to local authorities of implementing the measures and did not comment on the costs for relevant bodies or look at costings beyond the legal requirement. The costings used were based on a survey of local authorities issued just a few weeks before the draft legislation was finally published.

The Finance and Public Administration Committee scrutinising the bill raised “significant concerns” that the £2 million costing was insufficient⁹⁸, and another committee found evidence that the Memorandum was “unrealistic” and recommended it be updated while the bill was going through parliament, although this did not happen⁹⁹.

In the 2025/26 budget, £4 million was allocated to 15 small scale targeted pilots¹⁰⁰, seeking to deliver on the new duties in order to inform guidance and regulations ahead of commencement. A 10 year £50 million Homelessness Prevention Fund has been announced, of which £1million will go to building on the work of the Upstream pilot¹⁰¹ helping housing associations strengthen prevention work. It has not been announced what the remaining £49 million is for. As yet there is no information on how much money will be available to local areas to support preparation and implementation of the duties and the concurrent service shifts required.

3. We recommend investing early in the national infrastructure required for prevention systems change, in addition to funding for the new legal duties.

- Front load expenditure of the £50 million Prevention Fund in the upcoming Scottish Budget to

enable the necessary transformation of the systems, culture and infrastructure needed to deliver these new duties successfully. (We discuss the costings in greater detail in section 4 of this report).

- Provide clarity to local authorities and other bodies as soon as possible (and at maximum 18 months prior to full commencement – April 2027) regarding what assistance will be provided centrally by Scottish Government, COSLA and / or other partners to support implementation of the new approach to housing stability, including for example confirming funding levels for each year towards implementation.

National guidance

National guidance to support the legal duties is currently in development. Early drafts make helpful links with wider government agendas. It will be important that these are developed and strengthened through joint working with other parts of government.

Guidance should set out the Government’s vision and ambition clearly (see above) and provide practical guidance and support through examples of good practice to enable effective systems reform.

Lessons from the Homelessness Reduction Act in England demonstrate the importance of a statutory code of practice with clear and enforceable standards¹⁰². It must also make strong links with other relevant guidance, including guidance on community planning, the Public Sector Equality Duty, statutory commissioning guidance, and draw on the other relevant recommendations in this report.

4. We recommend a cross-departmental approach is taken to developing national guidance

- We recommend that guidance should have a foreword jointly written by the Cabinet Secretaries for Social Justice and Housing, Public Service Reform and Health and Care to demonstrate collaborative leadership.

Cross-body data sharing capability

Data usage has the potential to significantly enhance or undermine the new prevention system¹⁰³. There is powerful potential in the data available, for facilitating planning and commissioning, measuring progress and impact and allowing effective accountability and transparency. There is an opportunity to augment this still further to proactively identify people at risk of homelessness and other harms and act early, thus strengthening outcomes.

97. Scottish Parliament (2024) Housing (Scotland) Bill Financial Memorandum <https://www.parliament.scot/-/media/files/legislation/bills/s6-bills/housing-scotland-bill/introduction/financial-memorandum-accessible.pdf>
98. Finance and Public Administration Committee (2024) Letter from the Convener to the Convener of the Local Government, Housing and Planning Committee of 7 October 2024, p2 https://www.parliament.scot/-/media/files/committees/finance-and-public-administration-committee/correspondence/2024/housingbillfm_convenertolghpconvener_7oct24.pdf
99. Social Justice and Social Security Committee (2024) Stage 1 report on Housing (Scotland) Bill: Part 5 (homelessness prevention) and Part 6 (other housing matters – fuel poverty), p44 <https://www.parliament.scot/chamber-and-committees/committees/committee-reports/sjss/2024/9/20/sjss062024r10/pdf>
100. <https://www.gov.scot/news/further-investment-to-prevent-homelessness/>
101. SG/SFHA/HNS 2026 op cit.

102. Sutton-Hamilton et al (2022) op cit.
103. Crisis (2018) Everyone In: How to end homelessness in Great Britain.

Working together to house people from prison

Built for Zero is a data-driven methodology to reduce homelessness. Rhondda Cynon Taf’s Built for Zero Community in Wales has seen brilliant progress with housing people on release from prison, against a backdrop of increasing numbers of people entering prison, and homeless applications for people leaving prison.

Key factors in this success have been the community’s alignment around

- a **shared definition of success** across housing, probation and prison services, so that outcomes move beyond avoiding street homelessness
- **robust shared data** through a ‘By Name List’ shared between partners and reviewed in regular meetings. Project data shows that someone referred to the BNL within 90 days of their release is much more likely to be housed than someone referred after that
- being **proactive and intentional with their relationships** and focus on the person leaving prison. Working in a constantly shifting environment including changes in legislation puts pressure on services with an inclination to revert back to previous ways of working, so being intentional and proactive with new processes and relationships helps to keep the work progressing.

As a result, Rhondda Cynon Taf County Borough Council are the best performing council in Wales in terms of having no one sleeping rough on release from prison.

This needs to be co-ordinated centrally to ensure data consistency and quality – too often it is done “ad hoc and made in isolation, rather than in a systemic way to prevent homelessness and other harms. This prevents joined-up commissioning and delivery of services and is a barrier to effective performance management and optimisation of systems¹⁰⁶, meaning that the value of prevention cannot be assessed across the services involved. This is supported by the findings of the Upstream pilot¹⁰⁷, whose report called for national leadership on data sharing and digital systems integration, and clarity on a culture of lawful data sharing.

The Prevention Task and Finish Group refer to the value of shared language across services, and this must be echoed in the development of data sharing capability so that systems can ‘talk’ to each other.

We welcome the Centre for Homeless Impact and Institute of Government¹⁰⁸ recommendation that “government should invest in improved data sharing and architecture.

To facilitate this, the government must play an even more active role in supporting local areas to effectively collect, report and act on data, offering specialist analytical advice and guidance, and implementing robust quality assurance measures to ensure data accuracy... and consider boosting investment in data infrastructure to enable LAs to become fully data drive.”

5. We recommend investing in a new, national data-sharing capability between public bodies

- In partnership with COSLA and other public sector representative bodies, take a lead coordinating role in the development of new cross-body data sharing capability across public services. This should enable the linkage of data systems and be supported by a clear framework for performance measurement and tracking of outcomes (see below) and guidance around lawful data sharing.

Data sharing has emerged as an area of complexity in the pilots, taking significant time for agreements to be developed between partners, requiring new systems of recording to be developed and further complicated by varied data systems that cannot be used to talk to each other. However, where data systems could be used effectively and processes streamlined, they note this can increase efficiency and may save time and costs in the longer term¹⁰⁴.

The Centre for Homeless Impact and the Institute of Government argue that national government should take a proactive role in developing data architecture, boosting investment in data capability to enable local authorities and other public services to become fully data driven. In their words: “High-quality granular data is the foundation on which truly transformational preventative approaches are built”¹⁰⁵. This is of course part of the ambition of the Public Service Reform Strategy.

104. SG (2026) Test and learn pilot report Q3.
105. Davies et al (2025) op cit. p31.

106. Davies et al (2025) op cit. p20.
107. SG/SFHA/HNS (2026) op cit.
108. Davies et al (2025) op cit. p31.

Data integration in Denmark: In 2009 Denmark created a national homelessness data system to gather standardised data from local authorities that allows the tracking of individuals' and households' pathways in and out of the system.

Twice a year data is collected from a wide range of homelessness services and others such as psychiatric hospitals, jobcentres and day centres. A detailed questionnaire is completed for each person they know of who is experiencing homelessness. This may include people who are sofa surfing or staying with friends or family, providing they are in contact with services.

It allows identification of those at highest risk and allows trend analysis and evaluation of different interventions. The system has been key to a shift towards Housing First and more preventative approaches, and has strengthened co-ordination and accountability¹⁰⁹.

Effective measurement, monitoring, scrutiny and access to justice

Accountability and transparency will be essential in the implementation of the new homeless prevention duties. The SHERU argue that conceptualising and measuring homelessness and prevention is critical to preventing and ending it altogether. This will not be straightforward, but the preparatory work done for the implementation plan drafting in the tools created by the Prevention Unit should support this, alongside the work of the Task and Finish group on monitoring and evaluation of homelessness assistance, which reported in 2023¹¹⁰.

It will be important to recognise within such a framework that outcomes may take longer to emerge or be measured than short term funding cycles, or even political cycles, often allow. For example, a successful outcome may be represented by tenancy sustainment of 12 months or more¹¹¹. The Making Every Adult Matter programme evaluation looked at outcomes over a two-year period¹¹².

A core part of the HPRG's work focused on access to justice to resolve problems. There is a clear justice gap within the homelessness framework. Many other statutory systems such as the social security system, private tenancies or the additional support needs system have recourse to a tribunal, an interim step between an internal service review and judicial review.

109. Davies et al (2025) op cit. annex D.

110. SHERU (2025) op cit.; Measuring Impact Task and Finish Group (2023) Final report and recommendations <https://www.gov.scot/publications/measuring-impact-task-finish-group-final-report-recommendations/>.

111. Scottish Government / Scottish Federation of Housing Associations / Homeless Network Scotland (2026) op cit.

112. Making Every Adult Matter op cit.

6. We recommend establishing clear lines of responsibility, with accountability measures in place

- Include within the implementation plan a RASCI framework (Responsible, Accountable, Supporting, Consulted, Informed) to provide clarity of roles, particularly given the cross-cutting nature of the work
- Publish a clear monitoring framework to track delivery of the duties and prevention outcomes. This must join up with other relevant work including the monitoring and outcomes of homelessness assistance and allow for the monitoring of longer-term outcomes.
- Regulators have an important role in ensuring the delivery of new duties leads to better outcomes for people. The Task and Finish Group recommended that Audit Scotland coordinate a strategic scrutiny group bringing together the relevant actors to develop a framework for what scrutiny of such a system would like. We recommend that this be revisited.
- Given the extreme vulnerability of having no home, Scottish Government should work with partners to consider how accountability can be increased within the new framework beyond beyond internal review processes, both for individuals trying to access

support, and for services where there are failures to comply with their responsibilities and work together effectively. As recommended by the HPRG, needs and support should be documented in a personalised support plan, which will support transparency and accountability.

Public awareness campaign

While the duties have been designed so that public services should proactively identify the risk of housing instability, it will be important to raise public awareness of the new preventative support that is available, particularly so that that people seek assistance to prevent homelessness much earlier than they currently do. In line with the Task and Finish Group recommendation this must also seek to destigmatise accessing assistance.

7. We recommend funding and delivering a national awareness and engagement campaign, designed to encourage greater public take up of support at a much earlier stage.

- The communications campaign should be simple in messaging and seek to increase public awareness about the new assistance available to households across Scotland where unmet support needs exist, and homelessness is a risk. It should be designed to encourage people to inquire about the support available at an early stage with a 'here to help' ethos.

3.4 Personalisation

Diagnosis – ‘Ask’

The personalisation of support is critical to achieving successful outcomes. The package of interventions brought about by Ask and Act must be tailored to the household’s needs for the individuals involved to meaningfully engage, and ultimately for housing and household stability to be achieved. Important to ensuring the integrated model offers personalised support is identifying what assistance a household requires and determining who is best to provide this. For example, ‘Ask’ may, in practice, look like a diagnostic tool or triage resource that ideally should be shared by different public bodies, or at least information of that diagnostic should be shared accordingly.

There are several diagnostic tools available publicly, and some pilot areas have developed their own. Consideration should be given as to whether investing in a national diagnostic tool would be beneficial for simplicity, scale and monitoring purposes.

For households who need statutory assistance from the local authority, the assessment is a crucial stage, which must be clearly documented for transparency and accountability. Furthermore, Public Health Scotland recommends that joint assessments are carried out between homelessness, health and social care in appropriate cases¹¹³.

As discussed earlier, findings from the pilots suggest the importance of a culture shift towards ‘curious conversations’ which are flexible and strongly relational, rooted in trust and empathy. They must also result in clear action. Key lessons can be drawn here from the literature on deep value relationships¹¹⁴. This shows that the key elements of an effective relationship, between service provider and service user for example, involve understanding, collaboration, commitment, communication, empowerment and time. This work demonstrates that effective relationships strengthen the likelihood of positive outcomes.

BOX: The Work Programme: Enhanced personalisation through assessment and service flexibility

The Work Programme was a UK-Government welfare-to-work programme which ran between 2011 and 2017 to support long-term unemployed people into work. One of the flagship aspects of the programme was the level of personalisation and tailored support offered, as a result of a “black box” approach, where “significant freedom was given to providers to decide how best to design provision to deliver personalised and tailored interventions suited to the needs of their clients”¹¹⁵.

Assessments were carried out for people entering the Programme using a range of tools and dialogue with participants, and these were used to direct people to the right provision for their needs and goals. One-to-one personal advisors were widely used and were generally highly valued by participants, as was action planning, “setting out the agreed activities to be undertaken by both parties”. Research suggests that participants preferred to be more involved in this process and this could increase their engagement with the programme, and perceived ongoing review and updating of action plans as a supportive process¹¹⁶.

An evaluation of participant experiences¹¹⁷ identified two forms of personalisation:

- Procedural personalisation, “creating friendly, mutually respectful relationships” between participants and advisors including through the assessment and action-planning¹¹⁸, and
- Substantive personalisation, with support and services tailored to individual needs and barriers, as well as the wishes and aspirations of participants¹¹⁹.

The majority of participants said they received support that matched their needs either very or fairly well.

113. PHS (2026) op cit.

114. https://s41967.pcdn.co/wp-content/uploads/Deep_Value-1.pdf Bell, K and Smeardon, M (2011) Deep value: A literature review of the role of effective relationships in public services https://s41967.pcdn.co/wp-content/uploads/Deep_Value-1.pdf

115. DWP (2020) The Work Programme A quantitative impact assessment November 2020) <https://assets.publishing.service.gov.uk/media/5fbce4b2e90e077ee2eadbf2/work-programme-quantitative-impact-assessment.pdf> p19.

116. DWP (2012) Work Programme evaluation: Findings from the first phase of qualitative research on programme delivery <https://www.york.ac.uk/inst/spru/pubs/pdf/rrep821summ.pdf>.

117. DWP (2014) Work Programme evaluation: the participant experience report https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/425081/r892.pdf.

118. p29.

119. p143.

Personalised offer of support – ‘Act’

An effective diagnosis will naturally result in the identification of a range of support services needing to be in place to provide timely assistance. Therefore, in each area there will need to be a range of services available for address housing instability. This will allow for a flexible and personalised offer of support for people requiring assistance, based on their identified needs and goals, and this should be co-ordinated across local relevant bodies. The minimum range of options local authorities and other relevant bodies must provide to meet their new legal duties will be described by Scottish Government in regulations and guidance produced during 2027.

However, we would urge Scottish Government to indicate to local areas what these are likely to consist of as soon as possible to enable them to start planning, budgeting and commissioning. In some cases, areas may choose to share specialist services, or deliver them by partnering with other services or commissioning out to the third sector. For the local authority list, these should include¹²⁰:

- Access to cash and grants, including Cash First approaches
- Money and debt advice
- Private tenancy support and liaison with landlords

- Family mediation
- Support to set up a home, including furnishings and basic items
- Independent living skills training
- Assistance with domestic abuse
- Specialist housing advice
- Protocols with housing associations and other services and agencies
- Housing First.

Personal support plans

Key to personalisation is ensuring the approach focuses on the ‘whole person’, and does not take a siloed approach to each particular individual service intervention. Strengths-based approaches working with individuals also empower people, helping them take control and responsibility for their own lives which can strengthen their sense of agency and lead to more sustainable outcomes. This is in line with the original conception of Ask and Act, developed by a group of people with lived experience – “ask us what we need and then act on that”¹²¹. Various pilots have recently reinforced the value of this¹²².

The PRG recommended creating personal housing plans for all people who need statutory support from the local authority to stabilise their housing. Unlike in England and Wales, this recommendation has not

been taken forward in legislation, but such support plans would provide clarity and transparency for both the applicants and the different services. Having a personalised support plan would capture the actions and responsibilities of different agencies involved, and provide a means of accountability and potentially for access to justice for applicants should things go wrong.

We suggest that the term ‘Personal Support Plan’ is used so it is broader than the local authority’s remit, and this could be integrated with the homelessness, health and social care assessments proposed by Public Health Scotland (see below).

Evidence suggests that homelessness prevention support is more effective where there is a case management system in place, providing benefits in terms of the housing outcome and the well-being of the individual¹²³.

These Personalised Support Plans would be central to case management, co-ordination of support and accountability between and within services. The Centre for Homelessness Impact recommends that employment advice and support should also be integrated into these plans where needed¹²⁴.

The HPRG stressed that the views of applicants must be central to these Plans. The Prevention Task and Finish Group noted that “choice and control are key,

but equally managing expectations is fundamental in areas where choice may be limited. Creative solutions and partnership working will be required by those supporting the implementation of plans. Guidance should convey the wider parameters they can operate in to make plans realised.” They also note the value of collating data from Plans, which could provide useful operational and strategic information, for example about gaps in services.

8. We recommend the following ‘personalisation’ tools are established and embedded into the design and delivery of Ask and Act

- Invest in an effective diagnostic tool, and appropriate training on methods for conducting assessments so that relevant ‘real’, ‘perceived’ and ‘hidden’ needs are all disclosed, root causes are addressed, and holistic support is provided.
- Work with local authorities, health and social care services, other relevant partners and people with lived experience of housing instability to create Personal Support Plans for putting together a tailored package of effective support. Support plans should take a person-centred and strengths-based approach to empower people to take control of their own lives.

120. Crisis (2018) op cit.; HPRG (2021) op cit.; Dunn (2022) op cit.; Housing (Wales) Act 2014; SG / SFHA / HNS (2026) op cit.; Scottish Government (2026) Test and Learn Prevention Pilots Q3 2026 report.
121. HPRG (2021) op cit.; Homeless Network Scotland (HNS) (2026) The Level: Raising the Floor for No Wrong Door <https://homelessnetwork.scot/wp-content/uploads/2026/09/The-Level-web.pdf>.
122. SG / SFHA / HNS (2026) op cit.; HNS 2026 op cit.; Scottish Government (2026) Test and Learn Prevention Pilots Q3 2026 report

123. Centre for Homelessness Impact (2023c) Exploring the effect of case management in homelessness per components; SCIE (2018) A rapid evidence assessment of what works in homelessness services
124. Centre for Homelessness Impact (2020) op cit.

3.5 Integration and co-ordination of services

Integrating housing, health and social care support

A long-standing challenge in national policy making is the link between housing, health and social care. An agenda for establishing greater housing and household stability, alongside the public service reform agenda, provides an opportune time to address this challenge at national and local level.

Public Health Scotland's briefing¹²⁵ provides important recommendations around conducting shared homelessness, health and social care assessments of support needs; joint planning and commissioning of support to prevent homelessness, as well as to end rough sleeping; and around training for healthcare staff around recognising early risks and pathways into homelessness.

The National Institute for Health and Care Excellence (NICE) produced a guideline in 2022 on supporting people facing homelessness¹²⁶. This included emphasis on improving recording of the housing status of patients; stronger joint planning and commissioning of services and support; the consideration of specialist services for groups at particular risk, including women, young people, disabled people, those without recourse to public funds, members of the LGBTQI+ community and other minorities; and on more personal levels, the importance of trusted relationships and longer contact times for some patients in this group and the value of strengths based approaches. While not mandatory in Scotland, such guidelines are recognised as best practice.

For some people who have housing, health and or social care needs, more specialist housing options will be needed. Housing First can play a role as a secondary preventative measure for some groups of people with health and social care needs who may face a higher risk of homelessness¹²⁷, as well as for people who have been homeless in the past and there is risk of this happening again (tertiary prevention)¹²⁸.

125. Public Health Scotland (2026) op cit.

126. NICE (2022) Guideline 214: Integrated health and social care for people experiencing homelessness <https://www.nice.org.uk/guidance/ng214>.

127. Teixeira, L (2025) Why the rise of the housing first philosophy matters more than the model <https://www.homelessnessimpact.org/news/why-the-rise-of-the-housing-first-philosophy-matters-more-than-the-model>.

128. Scottish Government (2025) Learning from 25 years of preventative interventions in Scotland. Some people will have even more significant needs that cannot be met in mainstream housing, even with the level of support provided within Housing First. This was addressed by the HPRG who recommended that primary responsibility for meeting accommodation needs should rest with the Health and Social Care Partnership. This work was further developed by the Supported Housing Task and Finish Group in 2025 <https://www.gov.scot/publications/supported-housing-task-finish-group-main-report/>.

Multiagency co-ordination for complex cases

A core recommendation of the PRG was to have multiagency case co-ordination with a lead worker for people who needed input from multiple agencies, although it was not taken forward in the housing legislation. This is a widely evidence-based approach, most recently emphasised in the Level protocol by HNS¹²⁹, and has been built into the more recent Wales legislation¹³⁰.

This is also coming through the pilots, where "daily or weekly multiagency meetings to review difficult cases are proving their worth", alongside 'sticky person approaches which help people navigate complex systems and appropriate escalation routes as needed.

This is an essential part of the system required to support particular cohorts of people who are likely to have unstable housing, along with a range of other needs, and the benefits are well documented.

Health and social care are critical players in this, and the Homelessness NICE guidelines reinforce this as an important approach within these services.

129. Homeless Network Scotland (HNS) (2026) op cit.

130. Homelessness and Social Housing Allocations (Wales) Act 2026

9. We recommend the strategic integration and coordination of services to establish a holistic model of support

- Through clear cross-government policy directives and associated guidance, ensure the development of a multiagency case co-ordination approach, working across all relevant services, including housing, health, social care and criminal justice services to provide support for people who have multiple or severe needs requiring a co-ordinated or 'sticky' approach.
- As geographical health boards and local authorities are reformed, thoroughly explore the interrelationship between housing and health and social care, and put in place clear arrangements for joint planning, commissioning, data sharing and linkage, and accountability.
- All health settings should review and implement the NICE guidelines on supporting people facing homelessness and Public Health Scotland's recommendations.

3.6 Empower lived experience and the frontline

It has been repeatedly emphasised, since the inception of this work eight years ago, that preventing homelessness is about putting people at the centre and that this is about culture shift, rather than adding some new duties and pathways. Therefore, bold new training across all relevant partners (statutory and beyond) will be necessary.

This must expand understanding of the role of housing and what homelessness and homelessness prevention means. Cross sector, in-person training will build connections, relationships and culture change across services.

The pilots are showing that relationship-based working with both service users and other colleagues adds significant value in terms of establishing trust, warm handovers and quality conversations. Asset based training focused on the whole person enables more holistic support. Caseloads will need to be managed carefully to ensure that staff have the capacity to do the work effectively.

This integrated and personalised approach will demand staff to work in new ways and to feel empowered and confident to take the initiative in supporting individuals, escalating as necessary. For some this will be a shift from previous cultures and ways of working, as was the case in the implementation of the Welsh and English homelessness reduction legislation¹³¹.

It is apparent that trauma-informed practice is vital in this work, given the complexity of experiences some people will have had before they reach public services. Reflective practice to enable people to think about the cases they are dealing with and process the sometimes very difficult experiences they are helping people to work through are important to promote resilience and welfare of staff.

Lived experience expertise

The knowledge and expertise of people who have experience of the issues and systems being developed can add major value to this work. Through the pilots, language used and building trust have emerged as key themes, and in other work input has allowed challenges to come to the surface and be addressed to the improvement of the service¹³².

As work progresses towards commencement, lived experience is crucial to the development of systems, services and protocols. It will continue to add value after commencement. Therefore, lived experience should be core to national and local service development, and should be the foundation for the approach taken in designing and delivering this new model of housing and household stability support.

10. We recommend a bold new training programme be rolled out nationally to prepare for full commencement and achieve the necessary culture change

- Conduct a mapping exercise at national level, led by Scottish Government and replicated in local areas, to identify the skills, training needs and resources that will be needed by the workforce in different sectors to effectively design and deliver a new personalised package of holistic support, and use this as the basis of a workforce development plan.
- People who experience a problem understand it best. Therefore, the voices of lived experience of homelessness should be at the

core of designing the training programme. Learning can be drawn from highly successful models such as 'The Right To Family Life' training module for social workers, designed and run by families in poverty and overseen by the charity ATD Fourth World¹³³.

3.7 Building the local ecosystem

We have set out the national infrastructure areas that need to be addressed in a national implementation plan. The following sections will need to be delivered locally, although they will also need to be part of the national vision and infrastructure.

There is space for collaborations beyond local level, and this is particularly important as other services and relevant bodies operate at a regional or national level, such as Police Scotland, the Scottish Prison Service, and regional Health Boards. This poses challenges which require national leadership and co-ordination. The proposed changes to the structures of local government and NHS Health Boards will also have relevance.

131. Fitzpatrick et al (2017) The Homelessness Monitor: Wales 2017; Sutton-Hamilton et al (2022) op cit.

132. HNS (2026) op cit.

133. <https://atd-uk.org/projects-campaigns/giving-poverty-a-voice/right-to-family-life/>

Strategic local co-ordination and leadership

Community Planning Partnerships (CPPs) have statutory responsibility for improving local outcomes, and do this by planning, resourcing and ensuring public service delivery meet those outcomes. They are key to local service integration and taking a preventative approach to service delivery. Therefore, they must be central to this agenda.

The Improvement Service recently published guidance for CPPs on how to prioritise prevention and embed it in their work¹³⁴, and this provides a foundation on which to build.

The new strategic housing support needs assessments duty contained in the Housing Act provides a vital tool to support more effective planning, commissioning and collaboration between relevant services. Alongside the aforementioned housing, health and social care assessments and joint planning and commissioning recommended by NICE and Public Health Scotland, these provide a solid basis for strengthening local preventative services, sharing budgets and aligning outcomes.

The Ask and Act pilots have identified the importance of senior level buy-in within agencies and necessity of clear governance structures with operational review structures. These have been crucial for the development of effective referral pathways, and in some cases escalation of complex cases. In the pilots this has been a more time-consuming area than anticipated, which means action to scale this up needs to be recognised early in an implementation plan going forward. A 2022 review of prevention practice also noted the “importance of leadership support and buy-in at strategic, often cross portfolio, level”¹³⁵. This learning should be used to inform guidance, including practical examples of how this has worked on the ground.

The role of local commissioning

Commissioning is often neglected in discussions around homelessness support but is likely to be critical to the development of the necessary integrated structures and services to support housing stabilisation.

Recently, Homeless Network Scotland published a report on supporting people facing severe and multiple deprivation¹³⁶, which provides valuable principles which

can be applied to all people facing housing instability, not just those facing the most severe forms of deprivation. Approaches centre on looking at the person and their needs holistically, valuing trusted relationships and the time to build these, that are productive, collaborative and integrative. These are themes that emerge over and over again in the literature and echo the findings from the Upstream and Ask and Act pilots.

Another consideration emerging from the pilots is the role of the third sector. It appears that often the support and assistance that may contribute to the Act duty are provided by the third sector. Many of these, such as community link workers or navigators or low-level housing mental health support may be commissioned by public bodies, but some may not.

Local system co-ordination

Emergent findings from the Ask and Act pilots are highlighting the value of a service co-ordination, including through dedicated staff and co-located space. This function helps ensure that relevant bodies are effectively linked and engaged and that the system functions effectively. This is similar to strategic lead role proposed by the Task and Finish Group. Following the evaluation of the pilots, guidance

and training will need to recognise the importance of this co-ordination function at local level and recognised in funding decisions where necessary.

Rural considerations

The implementation plan should give attention to the impact different geographies may have on implementation. As discussed above, travel is a particular barrier to accessing services for people in rural areas. Rural areas also face a financial ‘rural premium’. They often struggle to develop affordable housing because of the small scale of developments, and may have high incidences of homelessness, particularly hidden homelessness where people don’t seek support for a range of reasons¹³⁷.

It may be appropriate to set up a network to support rural areas in the implementation of these duties, sharing learning and practice and where appropriate digital resources.

11. We recommend that Community Planning Partnerships provide strategic leadership to build a coherent ecosystem of localised co-ordinated support.

- Local senior leaders should ensure effective strategic and operational integration and co-ordination of local services, and this should be clear in guidance.

134. Community Planning Improvement Board (n.d.) Guidance for Embedding Prevention in Community Planning https://www.improvementservice.org.uk/_data/assets/pdf_file/0033/74769/CPIB-Guidance-for-Embedding-Prevention-in-Community-Planning.pdf.

135. Dunn (2022) op cit., p30

136. HNS (2026) op cit.

137. Scottish Human Rights Commission (2024) Economic, Social and Cultural Rights in the Highlands and Islands https://www.scottishhumanrights.com/media/2881/main-report_economic-social-and-cultural-rights-in-the-highlands-and-islands.pdf.

- Commissioning guidance should emphasise the goals of reducing failure demand and prioritising preventative work to achieve housing and household stability, ensuring services are relational and collaborative.
- Guidance should be produced for Community Planning Partnerships to take forward this agenda. Scottish Government should agree with partners who is best placed to develop this guidance. It should be made clear that this work supports other work to prevent harm within the local population.
- National guidance should support flexibility to adapt support and service infrastructure to locally identified priorities and needs, including the challenges faced by rural communities and services, while ensuring a consistent minimum offer.
- Provide clarity in guidance on what role the third sector may play in operationalising the framework, to support appropriate commissioning of services.



PART 4: Costings

In this part of the report, we explore what the costs may be of developing and delivering a new system-wide approach to stabilise people’s housing and prevent homelessness.

Applying a preventative approach to organisational processes and culture requires both dedicated time and sustained investment. However, the full costs associated with this shift in focus have yet to be established. The initial Financial Memorandum for the Housing Bill¹³⁸ did not provide cost estimates for relevant public bodies beyond local authorities, nor did it quantify a number of cost categories subsequently identified through the pilots as critical to successful implementation, both prior to commencement and during ongoing delivery.

Therefore, Crisis Scotland commissioned Alma Economics to undertake an independent assessment of the implementation costs of these duties across all relevant public bodies, and potential cost avoidance to the public purse.

The assessment explicitly addresses the gaps in the Financial Memorandum by including all public bodies subject to the duties and cost categories not originally quantified, alongside IT and additional staffing costs.

The analysis adopts a bottom-up, illustrative implementation approach, providing a broader assessment of the resources required to implement the duties effectively across all relevant public bodies, informed by insights that have emerged since publication of the Financial Memorandum. In addition to IT and additional staffing costs, this analysis includes the potential costs of sector-specific training, cross-body data-sharing infrastructure, coordination and collaboration, and then ongoing training after commencement. It focuses on the impact of the ‘ask and act’ duties on relevant bodies. It does not examine any additional costs (or costs avoided) that might result from the new legal requirement for local authorities to provide homelessness assistance to individuals at six months prior to homelessness, rather than the current two month timeframe. Nor does it look at the costs of non-statutory services delivered by the third sector.

The report, *Cost Analysis of Interventions to Prevent Homelessness*¹³⁹ is published alongside this report and provides costings for:

- 1. Preparation for commencement of the ask and act duties for Nov- Dec 2026, 2027 and then until Oct 2028;
- 2. Implementing the duties after commencement in Nov 2028 up to 2031;

- 3. Costs of implementing by public body;
- 4. Cost avoidance to the public once the ask and act duties are implemented.

It provides cost estimates based on high, medium and low scenarios.

We have cited all three scenarios here, but we focus on the highest estimates. This assumes:

- a. significant investment in a cross-body data-sharing capability as part of wider public service reform, enabling a linkage or collation of data across public bodies, with complementary changes to individual public bodies’ internal IT systems for recording and reporting information
- b. training to a broad range of front-line and related administrative staff to support the cultural change that stakeholders identified as necessary for implementation
- c. the most comprehensive estimate possible, based on available data, of the number of people asked about their circumstances under the new duties

We have focused on these because we believe this would lead to the highest quality framework, with benefits not just for stabilising housing, but for increasing the effectiveness of data integration and cross-body working across a range of public services.

4.1 Pre-commencement costs

Pre-commencement costs focus on the infrastructure need to implement the duties, with costs estimated across the three periods. Total costs are estimated at £2.3 million for the end of 2026, rising to £49.4 million in 2027 and £48.1 million between January and October 2028. These costings draw on some of the findings from the pilots, particularly around data platforms and system co-ordination.

Costs include:

- a. Data sharing arrangements and information governance through a dedicated cross-body data-sharing capability (with potentially a new portal) with the spend apportioned to individual public bodies according to their share of public expenditure
- b. IT systems and digital development: modifications to internal systems, case management, reporting requirements and integration of new data sharing processes
- c. Workforce development and training to support a change in culture: commissioning of training development, delivery and opportunity costs for staff across all relevant bodies (including across housing services, social work and education departments within local authorities)
- d. Organisational and operational infrastructure costs reflecting implementation planning and coordination across relevant bodies.

138. Scottish Government (2024) Housing (Scotland) Bill [Financial Memorandum](#)
139. Alma Economics (2026) *Cost analysis of interventions to prevent homelessness* Independent research prepared for Crisis. For full costs and modelling assumptions please see the full report.

Table 4.1: Pre-commencement costs (£m, nominal values).
Source: Alma Economics (2026) table 1.

Total pre-commencement costs	2026	2027	Jan-Oct 2028
Low	£2.3	£18.4	£16.9
Medium	£2.3	£33.9	£32.5
High	£2.3	£49.4	£48.1

Table 4.2: Pre-commencement costs, high estimate (£m, nominal values).
Source: Alma Economics (2026) table 4.

Type of cost	2026	2027	Jan-Oct 2028
Data-sharing arrangements and information governance	-	£23.0	£23.0
IT systems and digital development	-	£5.7	£5.7
Workforce development and training	£0.7	£10.7	£10.9
Organisational and operational infrastructure	£1.6	£9.9	£8.4
Total pre-commencement costs	£2.3	£49.4	£48.1

4.2 Post-commencement costs

Post commencement costs detail the elements that will ensure that the prevention duty is fully embedded within the wider system from November 2028 onwards. They include:

- a. Staffing and workforce capacity: coordinating roles, ongoing oversight and coordination
- b. System maintenance and administration: maintenance of data sharing infrastructure, ongoing training for all staff in relevant bodies
- c. Continued provision of preventative interventions and support services (not including the funding of third sector provision)

Table 4.3: Post-commencement costs (£m, nominal values).
Source: Alma Economics (2026) table 8.

Total post-commencement costs	Nov-Dec 2028	2029	2030	2031
Low	£4.7	£15.9	£16.8	£16.5
Medium	£10.5	£25.3	£27.5	£26.3
High	£16.3	£34.8	£38.2	£36.1

Table 4.4: Post-commencement costs, high estimate (£m, nominal values).
Source: Alma Economics (2026) table 11.

Type of cost	Nov-Dec 2028	2029	2030	2031
Staffing and workforce capacity	£1.7	£10.3	£10.5	£10.7
System maintenance and administration	-	£2.4	£5.2	£2.5
Continued provision of preventative interventions and support services	£14.6	£22.1	£22.5	£22.9
Total post-commencement costs	£16.3	£34.8	£38.2	£36.1

Note: Costs associated with system maintenance and administration are assumed arise from 2029 onwards.

The conclusion of the authors of the report is that, post-commencement, “the cost of the duties is driven primarily by delivering ‘Asks’, providing interventions and coordinating support for individuals

‘Acts’, while systems maintenance, administration and other supporting activities account for a comparatively small share of ongoing expenditure”¹⁴⁰.

Table 4.5: Costs by relevant public body, high estimate (£m, nominal values).
Source: Alma Economics (2026) Table 14.

Public body	2026	2027	2028	2029	2030	2031
Health boards	£0.3	£15.3	£17.4	£8.4	£10.5	£8.8
Integration Joint Boards	£0.2	£7.6	£7.6	£1.8	£1.9	£1.9
Local authorities	£0.8	£18.7	£19.2	£8.6	£9.0	£9.0
Police Scotland	£0.2	£2.3	£3.5	£8.0	£8.4	£8.3
Registered social landlords	£0.1	£1.5	£4.9	£0.6	£0.8	£0.6
Prisons and young offenders’ institutions	£0.2	£1.3	£1.3	£0.7	£0.8	£0.8
Social Security Scotland	£0.3	£1.6	£8.8	£2.8	£2.9	£2.9
Special health boards	£0.3	£1.0	£1.6	£3.8	£3.9	£3.9
Total	£2.3	£49.4	£64.4	£34.8	£38.2	£36.1

140. Alma Economics (2026), p11.

4.4 Cost avoidance

The report also considers indicative cost avoidance to the public purse in respect of the homelessness-related public expenditure avoided when the prevention duties are successfully deployed. The analysis assumes that 84.5% of individuals¹⁴¹ who receive a prevention

‘Act’ would otherwise have experienced homelessness in the absence of that intervention.

The savings are indicative rather than direct or cashable, reflecting reduction in future demand, but show that the estimated net cost avoidance is £77.2 million in 2029, £76.4 million in 2030 and £81.9 million in 2031.

Table 4.6: Cost avoidance to the public purse (£m, nominal values). Source: Alma Economics (2026) tables 15 and 18.

Type of cost	2028	2029	2030	2031
Contacting mental health services	£1.2	£7.4	£7.6	£7.8
Accessing NHS mental health services	£2.5	£15.2	£15.6	£16.1
Drug and alcohol dependence treatment	£0.8	£4.7	£4.8	£4.9
Contacts with the criminal justice system	£5.8	£35.4	£36.2	£37.3
Homelessness relief services	£2.6	£15.7	£16.0	£16.5
Cost of temporary accommodation	£5.5	£33.5	£34.3	£35.3
Cost avoidance	£18.3	£112.0	£114.5	£118.0
Post-commencement costs (high estimate)	£16.3	£34.8	£38.2	£36.1
Net cost avoidance	£2.0	£77.2	£76.4	£81.9

141. This assumption was informed by the proportion of homelessness applications that result in an assessment of homelessness, with approximately 35,000 households assessed as homeless from around 41,400 homelessness applications ([Scottish Government, 2026](#)).

The modelling by Alma Economics shows that investment will be needed to implement the new duties. To do this well, there are some significant upfront costs linked to investment in implementing the new duties. A new strengthened data-sharing capability across public services will be costly but has potential to reap rewards far beyond housing stability. Training is key to drive a shift in culture towards a more person-centred and integrated approach to public service delivery. And to put these figures in context, the total cost is significantly less than what Glasgow Council alone spent on temporary accommodation last year¹⁴².

On the other hand, there is also potential for significant net cost avoidance, with an estimated demand avoidance of £77 million within the very first year after commencement, and ongoing beyond that.

The Homelessness Monitor shows that maximising our efforts to prevent homelessness is one of the most effective ways of reducing the worst forms of homelessness¹⁴³. The Christie Commission sought to reduce long-term demand for services and achieving better long-term social and economic outcomes. To do this it said we need a presumption in favour

of prevention, and to shift resources away from failure demand, systematically increasing the share of public budgets applied to prevention interventions¹⁴⁴. The recommendations in this report, supported by these costings, demonstrate a way forward to take forward Christie's strategy and progress towards ending homelessness.

We must also note that the challenge is not evenly spread across the country. The highest-pressure housing markets are those who most need to prioritise prevention, yet simultaneously have the most demand on their acute systems. "It's possible that if funding is not earmarked for prevention, resources will be entirely absorbed by the needs of the acute system. However, the acute system must also be funded, until prevention and rapid rehousing dividends start to pay off. This suggests careful consideration should be given to how new prevention duties will be funded"¹⁴⁵.

12. In the upcoming budget, we recommend that Scottish Government allocates funding for a pre-commencement programme of infrastructure and capacity building, and for post-commencement delivery of the new legal duties.

To sufficiently resource the development and delivery of a new system-wide approach to stabilising households and preventing homelessness:

- pre commencement funding of **£2.3 million** in 2026, **£49.4 million** in 2027 and **£48.1 million** between January and October 2028 is required
- post commencement funding of **£16.3** for Nov- Dec 2028, **£34.8** (2029), **£38.2** (2030) and **£36.1** (2031) is required
- Funding allocations must consider particular pressures, including the specific nature of rural prevention, and how areas with the greatest housing pressures can prioritise prevention while continuing to meet the high demand for acute homelessness services.

142. <https://www.heraldscotland.com/news/25298772.glasgow-city-council-spent-100m-homeless-fight/>.

143. Watts-Cobbe et al (2026) Op cit.

144. Commission on the future delivery of public services (2011) Op cit.

145. Dunn (2022) p31

PART 5: Conclusion and summary of recommendations

Homelessness costs. It costs people. It costs homelessness services, and health and criminal justice services... it costs society.

But just as the costs of homelessness are widespread, so too is the responsibility for addressing it. In order to give people the chance of having stable lives, Karyn McCluskey calls for homelessness to be brought in from the margins to be put at the centre of our political agenda. As Matt Downie points out, this depends on political will and strong leadership.

As this report shows, achieving housing and household stability for people across Scotland will take vision, determination and sustained commitment. Derek McGowan recommends a public health approach to homelessness, eradicating it systematically like a disease. Kevin Stewart underlines the centrality of cross-ministerial leadership, along with greater accountability, scrutiny and continual improvement. Nicky Miller notes the importance of clear milestones helping us know that we're making progress on sharing the responsibility.

Now we need to turn ambition into reality on the ground. Scottish Government must set out clear priorities, robustly costed and adequately resourced policies, agreed delivery timelines, and well understood measures of success, backed by cross-portfolio political leadership, unified data architecture, workforce development, and front-loaded financial investment.

Housing stability matters.

This report sets out the case for putting housing and household stability at the heart of public service reform. It lays out the key actions that are required of Scottish Government and its partners to make the vision of early intervention, integrated services and housing stability a reality, reducing the harms connected to losing your home. And it sets out the financial costs – and the potential rewards – of doing so.

Changing course from homelessness crisis management to prevention embodies the vision of the Christie Commission.

It won't be easy. But nothing worth doing ever is.

Summary of full recommendations

1. We recommend strengthening cross portfolio leadership by **creating an agreed vision of success, alongside a robust implementation plan, and the establishment of governance structures across all relevant government portfolios**

- Recognising the importance of housing and household stability in the **national indicators supporting the new National Outcomes**, so that different legislation and public service priorities align and overcome potential silos in delivery.
 - Establishing a clearly defined **vision for success, specifying the outcomes that a reformed early action support system will seek to achieve, and what an effective operating model should entail**. The vision should be explicit in the guidance for the new duties, as well as the training programmes and the associated desired culture change.
 - Working jointly with the Prevention Unit, develop a **coherent theory of change** to underpin delivery of the vision.
 - Establish a **cross-portfolio oversight group** to provide strategic leadership and overcome barriers to integrated working
2. We recommend intensifying the learning through a **second stage of piloting**; allowing for best practice to be shared nationally

- Urgently scale up ambitions to **expand and evolve the Ask and Act pilot programme** through to commencement, so that learning and best practice is shared nationally, progress can continue and barriers to delivery and successful outcomes are addressed locally, or at national government level where appropriate.
 - Review and implement the Prevention Task and Finish Group recommendations as appropriate.
 - Consider introducing **national coordinator and thematic leader roles** to provide the necessary stewardship for scaling up learning and sharing best practice

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3. We recommend **investing early** in the national infrastructure required for prevention systems change, in addition to funding for the new legal duties.
- **Front load expenditure of the £50 million Prevention Fund in the upcoming Scottish Budget** to enable the necessary transformation of the systems, culture and infrastructure needed to deliver these new duties successfully. (We discuss the costings in greater detail in section 4 of this report)
 - **Provide clarity to local authorities and other bodies as soon as possible (and at maximum 18 months prior to full commencement – April 2027) regarding what assistance will be provided** centrally by Scottish Government, COSLA and / or other partners to support implementation of the new approach to housing stability, including for example confirming funding levels for each year towards implementation.
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4. We recommend a **cross-departmental approach is taken to developing national guidance**
- We recommend that **guidance should have a foreword jointly written** by the Cabinet Secretaries for Social Justice and Housing, Public Service Reform and Health and Care to demonstrate collaborative leadership.
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5. We recommend **investing in a new, national data-sharing capability between public bodies**
- In partnership with COSLA and other public sector representative bodies, take a lead coordinating role in the development of **new cross-body data sharing capability across public services**. This should enable the **linkage of data systems and be supported by a clear framework for performance measurement and tracking of outcomes** (see below) and guidance around lawful data sharing.
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6. We recommend establishing **clear lines of responsibility, with accountability measures in place**
- Include within the implementation plan a **RASCI framework** (Responsible, Accountable, Supporting, Consulted, Informed) to provide clarity of roles, particularly given the cross-cutting nature of the work
 - Publish a **clear monitoring framework** to track delivery of the duties and prevention outcomes. This must join up with other relevant work including the monitoring and outcomes of homelessness assistance and allow for the monitoring of longer-term outcomes.
 - Regulators have an important role in ensuring the delivery of new duties leads to better outcomes for people. The Task and Finish Group recommended that Audit Scotland coordinate a strategic scrutiny **group bringing together the relevant actors to develop a framework for what scrutiny of such a system would like**. We recommend that this be revisited.
 - Given the extreme vulnerability of having no home, Scottish Government should work with partners to consider **how accountability can be increased** within the new framework beyond internal review processes, both for individuals trying to access support, and for services where there are failures to comply with their responsibilities and work together effectively. As recommended by the HRPG, needs and support should be documented in a personalised support plan, which will support transparency and accountability.
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7. We recommend **funding and delivering a national awareness and engagement campaign**, designed to encourage greater public take up of support at a much earlier stage.
- The communications campaign should be simple in messaging and seek to increase public awareness about the new assistance available to households across Scotland where unmet support needs exist, and homelessness is a risk. It should be designed to **encourage people to inquire about the support available at an early stage** with a 'here to help' ethos.
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8. We recommend the following **'personalisation' tools** are established and embedded into the design and delivery of Ask and Act
- Invest in an **effective diagnostic tool, and appropriate training on methods for conducting assessments** so that relevant 'real', 'perceived' and 'hidden' needs are all disclosed, root causes are addressed, and holistic support is provided.
 - Work with local authorities, health and social care services, other relevant partners and people with lived experience of housing instability to **create Personal Support Plans** for putting together a tailored package of effective support. Support plans should take a person-centred and strengths-based approach to empower people to take control of their own lives.
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9. We recommend the **strategic integration and coordination of services** to establish a holistic model of support
- Through clear cross-government policy directives and associated guidance, ensure the development of a multiagency case co-ordination approach, working across all relevant services, including housing, health, social care and criminal justice services to provide support for people who have multiple or severe needs requiring a co-ordinated or 'sticky' approach.
 - As geographical health boards and local authorities are reformed, thoroughly explore the interrelationship between housing and health and social care, and put in place clear arrangements for joint planning, commissioning, data sharing and linkage, and accountability.
 - All health settings should review and implement the NICE guidelines on supporting people facing homelessness and Public Health Scotland's recommendations
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10. We recommend a **bold new training programme be rolled out nationally** to prepare for full commencement and achieve the necessary **culture change**
- Conduct a mapping exercise at national level, led by Scottish Government and replicated in local areas, to **identify the skills, training needs and resources** that will be needed by the workforce in different sectors to effectively design and deliver a new personalised package of holistic support, and use this as the basis of a **workforce development plan**.
 - People who experience a problem understand it best. Therefore, the **voices of lived experience of homelessness should be at the core of designing the training programme**. Learning can be drawn from highly successful models such as 'The Right To Family Life' training module for social workers, designed and run by families in poverty and overseen by the charity ATD Fourth World¹⁴⁶.
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11. We recommend that **Community Planning Partnerships provide strategic leadership** to build a coherent ecosystem of localised co-ordinated support.
- Local senior leaders should ensure effective **strategic and operational integration and co-ordination of local services**, and this should be clear in guidance.
 - **Commissioning guidance** should emphasise the **goals of reducing failure demand and prioritising preventative work to achieve housing and household stability**, ensuring services are relational and collaborative.
 - **Guidance should be produced for Community Planning Partnerships** to take forward this agenda. Scottish Government should agree with partners who is best placed to develop this guidance. It should be made clear that this work supports other work to prevent harm within the local population.
 - **National guidance should support flexibility to adapt support and service infrastructure to locally identified priorities and needs**, including the challenges faced by **rural communities** and services, while ensuring a consistent minimum offer.
 - Provide clarity in guidance on **what role the third sector may play** in operationalising the framework, to support appropriate commissioning of services.
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12. In the upcoming budget, we recommend that Scottish Government **allocates funding for a pre-commencement programme of infrastructure and capacity building, and for post-commencement delivery of the new legal duties**
- To sufficiently resource the development and delivery of a new system-wide approach to stabilising households and preventing homelessness:
- pre commencement funding of **£2.3 million in 2026, £49.4 million** in 2027 and **£48.1 million** between January and October 2028 is required
 - post commencement funding of **£16.3** for Nov- Dec 2028, **£34.8** (2029), **£38.2** (2030) and **£36.1** (2031) is required
 - funding allocations must consider particular pressures, including the specific nature of rural prevention, and how areas with the greatest housing pressures can prioritise prevention while continuing to meet the high demand for acute homelessness services.
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146. <https://atd-uk.org/projects-campaigns/giving-poverty-a-voice/right-to-family-life/>.



Crisis Scotland

Cranston House
271 Canongate
Edinburgh, EH8 8BQ
Tel: 0131 209 7700

www.crisis.org.uk

ISBN 978-1-78519-100-8

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Crisis UK (trading as Crisis)
Registered Charity Numbers:
E&W1082947, SC040094
Company Number: 4024938