Clinical Research exploring Nutrition Status in homeless people: What is the Nutrition Status of homeless people residing in temporary accommodation in London?

HEADLINE FINDINGS

Partnership: FEAST and UCL, GET BDA funded

Primary objectives: prevalence of malnutrition

Secondary objectives: nutrient intake, prevalence of food insecurity, obesity and mental illness

Population: homeless people in temporary residence

Sampling: n=200 (n=169 male) (n=122 white) (age 20-72), 18 hostels across London. Data collection Jul-Dec'23.

Methods: ~40mins facilitated questionnaires, MUST, BIA, HGS (hand grip strength), 24HR recall, SFFFQ, PHQ4, 10-point USDA Food Security Survey

Key Findings

Malnutrition

- PEH living in temporary accommodation are at risk of malnutrition, the complications of being underweight or weight loss, related to disease (such as chronic infection or substance misuse)
- 10% of our participants had a Body Mass Index indicating overt low weight
- 60% of them had scores of 2 or above, indicating malnutrition risk.
- Malnutrition risk increased with food insecurity, mental illness and age.

Food Insecurity

- Over 50% PEH living in temporary accommodation had low or very low food security.
- Compared with the general population, participants were 7.8x more likely not to eat for a whole day despite catering provision in some of the hostels.
- Anecdotally, participants reported that it was easier to steal or beg to increase access to food rather than to use charitable donated foods provided, as not all accommodations have cooking and storage facilities.

Low Dietary Quality

- PEH residing in temporary accommodation had poor dietary quality.
- Compared with government Eatwell Guide recommendations, participants had overall lower intakes of energy, fibre (77% had less than 1 portion of fruit or vegetables daily), protein (from both animal and plant sources), vitamins and minerals, corroborating malnutrition risk.
- Dietary intakes of sugary drinks exceeded recommendations.

Moderate Anxiety/Depression

- Approximately half of participants scored with moderate to severe anxiety or depression.
- Other mental illness diagnoses such as psychosis or substance dependence were frequently reported anecdotally.
- Given that poor mental health predicts malnutrition, there is great potential to improve diet through better supports for mental health for PEH in temporary accommodation.

Conclusions

- Nutritional screening practices are insensitive to nutrition risks for this group, and should be improved to promote prompt referrals for nutrition support.
- There is urgent need to develop targeted nutrition standards for temporary accommodation settings.











