Call for Evidence
Preventing and Responding to Homelessness

Presentation to Sheffield City Council’s Panel

by Dr Maureen Crane, Senior Research Fellow
& Dr Louise Joly, Research Associate
Social Care Workforce Research Unit, King’s College London
14 August 2015
Presentation

- Homelessness expertise and response to call
- Experiences and housing outcomes for homeless people who are resettled
- The provision of housing support
- Case studies
- What is needed - recommendations
Research on homelessness (Dr Maureen Crane)

- Research into homelessness since 1989

- Developed homelessness research programme:
  - University of Sheffield (1996-2011)
  - King’s College London (2011-)

- Studies: causes of homelessness; problems and needs of homeless and formerly homeless people; exits from homelessness; mappings and evaluations of homelessness services

- Started April 2015: evaluation of different models of delivering primary health care to homeless people
Research on homelessness (Dr Louise Joly)


- Studies: interagency working to support the health needs of homeless people; multiple exclusion homelessness; evaluation of The Lodge (hostel for older rough sleepers); longitudinal study of the resettlement of homeless people.

- Current research: Delivering primary health care to homeless people; service provision for older homeless people with and without memory problems; evaluation of St Mungo’s Broadway’s Peer Advice Link (PAL).
Response to call

Responding to the following question:

➢ What kind of support is most effective in terms of preventing homelessness?

In a unique position to respond:

➢ Conducted large, longitudinal study of the resettlement of homeless people and their outcomes over five years

➢ First of its kind in UK
Drawing on two studies

**FOR-HOME Study**
- Funded by Economic and Social Research Council
- Examined outcomes over 18 months for 400 homeless people resettled
- Interviewed at time of resettlement, and after 6 and 18 months
- Study sites: London, Leeds, Sheffield and Nottingham

**Rebuilding Lives Study**
- Funded by NIHR School for Social Care Research
- Examined longer-term outcomes for 297 FOR-HOME participants
- Interviewed after 5 years.
- Also interviewed 46 support workers

The views expressed in this presentation are those of the presenters and not necessarily those of the ESRC, NIHR School for Social Care Research or the Department of Health, NIHR or NHS.
Collaborating homelessness sector organisations
Experiences and housing outcomes post-resettlement
Study participants

- 296 men and 104 women aged 17+ years

- Problems
  - 63% mental health
  - 33% alcohol
  - 57% drugs
  - 18% literacy

- Length of time homeless
  - 16% less than 12 months
  - 14% longer than 10 years

- 40% homeless 2+ times

- 49% had never previously lived alone in a tenancy
Housing outcomes over five years (n = 285)

- 74% remained housed throughout the five years (some moved during this time)
- 26% became homeless at least once
- People most likely to have become homeless
  - young people aged 17-19 when resettled (42%)
  - those who moved to private-rented sector (58%)
  - those who had been homeless 10+ years (36%)
  - those who stayed in hostels 12 months or less before resettlement, and in last hostel for 6 months or less (39%)
Homeless episode since resettled by age

- 17-19: 42%
- 20-24: 29%
- 25-39: 25%
- 40-49: 17%
- 50-59: 31%
- 60+: 20%
Homeless episode since resettled by housing tenure

- Local authority: 22%
- Housing association: 18%
- Private-rented: 58%
Reasons for tenancies ending

- Financial problems leading to rent arrears
- Ending of fixed-term lease (mainly PRS)
- Poor condition of accommodation or problems with landlord (mainly PRS)
- Participant’s anti-social behaviour
- Difficulty coping or loneliness
- Problems with neighbours or local people
Coping at 60 months (n = 223 still housed)

- 75% had created a ‘home’ and were looking after their tenancy
- 25% struggling to cope due to dirty living conditions or hoarding
- 35% in housing in serious disrepair (damp, mould, faulty heating or wiring, flood damage). All housing tenures affected.
- Financial difficulties common – 75% had debts at 60 months (31% owed £1,000+)
  - low incomes (65% income below UK poverty threshold)
  - social security benefits stopped or sanctioned
  - employed casually or on zero-hours contracts
  - high rents in PRS for those employed
- Increase over time in debts – especially among young people.
Debts of £1,000+ (age at 60 months)

Note: Does not include student loans
The provision of housing support
Receipt of housing support

- 51% received support from services when resettled - 32% at 60 months

- People receiving support at 60 months more likely to have long homeless histories, and mental health or substance misuse problems

- Less likely to have support over the five years:
  - young people
  - those in PRS

These two groups most likely to have experienced subsequent homelessness.
Housing support at 60 months by age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>20-24</td>
<td>5</td>
</tr>
<tr>
<td>25-29</td>
<td>10</td>
</tr>
<tr>
<td>30-39</td>
<td>35</td>
</tr>
<tr>
<td>40-49</td>
<td>37</td>
</tr>
<tr>
<td>50-59</td>
<td>37</td>
</tr>
<tr>
<td>60+</td>
<td>69</td>
</tr>
</tbody>
</table>
Types of support

Support provided for a wide range of problems:

- Social Security benefit claims
- Managing money, budgeting and debts
- Bills and paperwork
- Rent problems, eviction threats and moving
- Housing problems linked to repairs and neighbours
- Emotional, personal and family problems
- Linking into health and substance misuse care
- Linking to education, training and employment
Who provided housing support?

Housing support provided by various workers:

- Tenancy support and housing support workers
- Homelessness sector staff
- Housing wardens and housing officers
- Substance misuse workers (mainly drugs workers)
- Advice and advocacy workers
- Others e.g. mental health workers
Extent of support differed by workers

- Tenancy support and housing support workers – support across SPECTRUM OF PROBLEMS

- Drugs workers – various types of support but rarely housing problems

- Advice workers – help with social security benefit claims, bills, paperwork

- Wardens and housing officers – help with rent or housing problems

- Homeless sector staff – budgeting, emotional problems, linking to ETE
Unmet support needs at 60 months

- 38% identified unmet support needs

- Most common types of help needed:
  - finding employment or training
  - budgeting and managing debts
  - social security benefit claims
  - changing accommodation

- Young people, and those now in their 30s and 50s, were more likely to report unmet needs
Case studies

Some people need long term housing support and experience difficulties when support stops
Case study 1: Arthur

- Long history of homelessness, slept rough, stayed in hostels
- Mental health, alcohol and drug problems
- Never lived alone before; rehoused in independent flat, aged 33.

<table>
<thead>
<tr>
<th>Time</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months</td>
<td>Enjoying living alone. Flat clean and tidy. Started skills training. Support worker visited fortnightly.</td>
</tr>
<tr>
<td>18 months</td>
<td>Doing well. Stopped training as premises closed. Renewed family contact – see occasionally as live far. Monthly visits from support worker.</td>
</tr>
<tr>
<td>3.5 years</td>
<td>Abandoned flat as drug users moved in and took over his flat. Homeless and on streets. Irregular visits from support worker during the preceding months as workers kept changing.</td>
</tr>
<tr>
<td>5 years</td>
<td>Rehoused in accommodation with support worker on site 5 days/week. Worker linked him into mental health &amp; drug services. Helped with social security benefits as they had stopped. Exploring volunteering opportunities with him.</td>
</tr>
</tbody>
</table>
Case study 2: Joe

- Homeless 5 years following relationship breakdown
- Slept rough, stayed in hostels
- Problematic drinking and history of gambling
- Rehoused in flat on large isolated estate at age of 57

<table>
<thead>
<tr>
<th>Time</th>
<th>Condition and Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months</td>
<td>Doing well, no debt, not worked, reduced drinking. Flat clean and tidy. Started volunteering. <strong>Regular visits from support worker</strong> - helped with utilities, bills, getting furniture, arranging volunteering</td>
</tr>
<tr>
<td>18 months</td>
<td>Doing well. Worked part-time for short period so stopped volunteering. Uses homeless day centres; no family contact. <strong>Occasional visits from support worker</strong></td>
</tr>
<tr>
<td>5 years</td>
<td>Flat and clothing very dirty. Drinking increased ++. On Work Programme but unlikely to be offered employment. Worried about benefits stopping. No debts. <strong>Tenancy support ended two years ago. No support.</strong></td>
</tr>
</tbody>
</table>
Case study

Some people require intermittent housing support at times of difficulties
Case study 3: Patricia

- Came to UK 30 years ago. Worked and lived in hotel which closed
- Homeless 6 years – in hostel and shared housing
- Physical health problems - depression intermittently
- No alcohol or drug problems. Rehoused aged 53.

<table>
<thead>
<tr>
<th>Time</th>
<th>Status and Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months</td>
<td>Happy with accommodation. Unable to work due to physical health problems. Received Incapacity Benefit. Struggling to pay bills but no debts. <strong>Support from friends.</strong> Tenancy support first 2 months only.</td>
</tr>
<tr>
<td>18 months</td>
<td>Happy with flat. In hospital twice since last seen (physical health problems). Still struggling to pay bills but no debts. <strong>Support from friends.</strong></td>
</tr>
<tr>
<td>5 years</td>
<td>Happy with flat. Physical health problems worsened. Welfare benefits changed to ESA 14 months ago - ESA stopped 2 months ago. No income. Unable to afford food or heating. Has debts. Friends have lent her money. <strong>No contact with support services.</strong></td>
</tr>
</tbody>
</table>
What is needed?

Recommendations
Adequate preparation before resettlement

- Planned resettlement for homeless people works and should be encouraged.

- Important that homeless people receive adequate preparation before they are resettled.

- Stays of 12+ months in supported accommodation before resettlement provide opportunities for homeless people:
  - to resolve or come to terms with problems that led to homelessness
  - to access support services and address problems such as substance misuse
  - to learn or practise independent living skills
  - to restore confidence and self-belief, and plan ahead for the future
Regular & flexible housing support

- Many homeless people are vulnerable when rehoused and require support.

- Some require *regular long term* housing support and are likely to need this for the foreseeable future.

- Some require *flexible and easily-accessible* housing support at times of difficulties.

- Support should be provided by designated tenancy support / housing support workers who can address the spectrum of needs.
Help for people with both high and low support needs

- Current tenancy support services are effectively targeting many with complex needs.

- Support services should also be available to people with:
  - lower support needs
  - little experience of independent living

- Support services should be more readily available to young people and PRS tenants, including help for PRS tenants when fixed-term tenancy agreements end.
Addressing housing problems

- Support workers should link with local housing advice services that can advocate on behalf of tenants living in homes in disrepair.

- Public health practitioners should help tackle poor housing conditions.

- Personalised support plans for people self-neglecting, in squalor or who are hoarders.
Tackling financial problems

- More advice and coaching on managing finances and avoiding debts for homeless people both before and after resettlement.

- Those with large debts should be assisted to access specialist debt advice services.

- Assistance by Jobcentre staff and other workers to help formerly homeless people access regular jobs, rather than relying on casual work or zero-hours contracts.
Assisting with welfare benefits

- Assistance should be given by DWP advisers & support workers to vulnerable people when benefits change or stop.

- The risks of suspending social security benefits should be assessed by DWP managers in the case of formerly homeless people who are highly vulnerable and whose tenancies could be at risk by such actions.
Conclusion

Resettlement for homeless people works. However, many who are resettled face problems in the first few years.

The keys to successful resettlement are the availability of support workers who can:

- identify people who are having difficulties but may not seek help
- respond to unmet needs in order to enable tenancy sustainment and prevent further homelessness.
Further information

Homelessness Research Programme
www.kcl.ac.uk/scwru/res/hrp/index.aspx

FOR-HOME final report
www.kcl.ac.uk/scwru/res/hrp/past/for-home.aspx

Rebuilding Lives summary report
www.kcl.ac.uk/scwru/res/hrp/hrp-studies/rebuilding.aspx
Contact details

Email: maureen_ann.crane@kcl.ac.uk

Social Care Workforce Research Unit,
King’s College London, Strand, London WC2R 2LS