GOING FURTHER BACK
Earlier action on multiple needs to prevent homelessness

- Sam Thomas, Making Every Adult Matter (MEAM) coalition: Clinks, Homeless Link and Mind
- Emily Ball, John Flint, Jennifer McNeill and Ryan Powell, The University of Sheffield
- Ed Ferrari, Centre for Regional Economic and Social Research, Sheffield Hallam University

- It has recently been estimated that 160,000 households experienced homelessness at any one point in time in Great Britain during 2016. There has been a steady rise in the level of homelessness over the last five years, including rough sleeping and people living in unsuitable temporary accommodation.

- There is an opportunity to act earlier to support people with the multiple needs that accompany homelessness. Based on in-depth research in two case study areas, this briefing argues that services should be designed to respond sensitively to trauma; commissioning should reflect the importance of trusting relationships; and that government and local areas should invest in co-ordinated, preventative support.

- Our recommendations set out a more coordinated approach to prevention, and how both national and local policy can support this, focusing on the importance of recognising opportunities to intervene earlier.
EARLIER ACTION ON MULTIPLE NEEDS TO PREVENT HOMELESSNESS

CONTEXT

Homelessness is often accompanied by a range of wider, multiple needs, including substance misuse, offending and mental ill health. It also tends to occur at a relatively late stage in a sequence of events that is highly predictable, and likely to include adverse experiences such as poverty, trauma and abuse. Research has shown that women are more likely to experience violence and abuse, particularly in its most severe forms.

A range of local areas are bringing together services to support people once they become homeless, for example using the MEAM Approach and through the Big Lottery Fund-supported Fulfilling Lives programme. These have parallels to earlier family intervention projects, which placed intensive, multi-agency support around families in challenging circumstances.

Far less attention has been paid to how people’s multiple needs change over time, and how services respond as they become more challenging. This is despite a recognition that at certain key transition points – for instance, between children’s and adult’s services, or institutions such as prison and hospitals – this response often falls short.

This research, produced in collaboration with peer researchers from West Yorkshire-Finding Independence with lived experience of multiple needs, aims to address this gap. It explores what has been referred to as ‘systems prevention’ (Canadian Observatory on Homelessness, 2017). Focusing on the institutional and systems failures illustrated below, we aimed to understand:

- how people come to experience multiple needs that result in homelessness
- why current service responses fail to identify their needs at an earlier stage
- where they can be improved to prevent people becoming homeless.

“*If they’re picked up early they can turn their lives around and we’ve seen it.*”

Police officer, London borough

RESEARCH FINDINGS

PEOPLE AT RISK OF EXPERIENCING MULTIPLE NEEDS

Our research provided a clear picture of the risk factors and causes of multiple needs. Practitioners indicated that while services designed to respond to complex needs have a good awareness of these background issues, they typically encounter people at a point where other services have failed to provide appropriate support.

Respondents told us that forms of vulnerability are complex, multiple and interlinked; spanning the life course and including experience of traumatic events such as abuse, sudden bereavement and domestic violence. Individuals often have histories of negative interaction and/or non-engagement with agencies and support services, which can embed existing trauma. Reducing the risk of crisis requires a recognition that traumatic experiences earlier in the life course already have a significant and continuing impact on individuals.

“This is why [people] turn to addiction, isn’t it? Because alcohol is a suppressant, it covers that emotion. They don’t want to feel it, they also don’t want it going round in their heads. When I work with a service user, I don’t look at the addiction. I go further back: ‘why is this person doing this? Why is their behaviour like that?’”

Peer mentor, West Yorkshire

Many individuals have a pathway from one phase and site of vulnerability to another, including child to adult transitions, being in care, living in hostels and periods of custodial sentences. Practitioners argued these issues need to be seen both in the context of the life-course, including trauma in childhood, and the wider social context of exclusion, poverty, inequality alongside government policies around austerity and welfare conditionality.

“My experience with care leavers in prison was that they’d had desperately traumatic lives...so a criminal justice pathway to prison was kind of the next step.”

Health commissioner, London borough

FOCUS OF THIS RESEARCH: SYSTEMS PREVENTION
Successful interventions help individuals cope with situations and prevent future periods of escalating crisis. It was argued that early intervention necessitates earlier referrals from agencies, but this also adds to pressures on already stretched services, especially where intensive support is needed over an extended period.

**RECOMMENDATION: DESIGN PREVENTATIVE SERVICES THAT RESPOND SENSITIVELY TO PAST TRAUMA**

People's motivation and ability to engage with services are heavily impacted by experiences of trauma in childhood and beyond, particularly if they have been let down by services in the past. It is therefore vital that services are trauma and gender-informed.

- Statutory services working with vulnerable individuals should ensure staff have appropriate training and confidence in identifying and responding to trauma.

**CURRENT SERVICE RESPONSES**

Practitioners described how individuals with complex needs often experience feelings of shame and guilt, are reluctant to disclose personal information and circumstances, and struggle to comply with the requirements of service providers. Mainstream services were often not able to respond accordingly, and as a result individuals struggle to engage with, navigate or sustain interactions with mainstream services. It was clear that previous negative experiences can lead to mistrust of authorities and agencies.

“The shame, guilt, all those things, [they] want to keep it a secret. Coming here is quite public. It’s an acknowledgement that you have a problem so quite a lot of people don’t want to actually acknowledge that. I think it’s quite a brave thing to do.”

Substance misuse worker, London borough

This non-engagement frequently results in further exposure to risk and vulnerability, exacerbating periods of crisis. There is an important distinction between vulnerable individuals’ motivations to change their circumstances and engage with services and their ability to do so. Even where an individual is willing to engage, services may not be able to adapt to their needs, or to respond at a time when it is both practical for the person and when they are sufficiently motivated to benefit.

Practitioners highlighted the importance of establishing trust and rapport, and demonstrating early tangible positive outcomes from support, as well as being flexible about the time and place it is offered. A focus on individuals’ assets and capacities, rather than the challenges they face, is particularly important for people with negative experiences of support services in the past.

“Everybody has an asset who comes through this door. Everybody has something good about them, something they’re passionate about, even if they’re not passionate anymore and we start working with clients in that way from day one.”

Substance misuse service manager, West Yorkshire

Respondents saw effective support as adopting a voluntary ethos that recognises the agency of the individual, involving them in the development of support plans and requiring them to assume some responsibility for their own progress.

Both engagement and changes to behaviour and circumstances were understood to be complex, non-linear and fluid, with periods of progress and relative stability punctuated by moments of crisis or regression. Flexibility and responsiveness to this fluidity is essential, and support workers need to balance an empathetic and non-judgemental approach with being assertive and explicit about required actions and potential consequences.

**RECOMMENDATION: COMMISSION PUBLIC SERVICES THAT BUILD RELATIONSHIPS AND TRUST**

The support that an individual receives is more likely to succeed if it reflects the goals and aspirations that they have, beyond the immediate goals of a service or commissioner. By taking an approach to commissioning and delivering services that focuses on people’s potential, they can be set up to succeed in the long term.

- Commissioners of substance misuse, healthcare and housing-related services should specify outcome measures that reflect individual progress, allowing services to work with people in a flexible way that builds trust and rapport.

**OPPORTUNITIES TO IMPROVE SERVICES**

There is a need to recognise the scale of the challenges facing the most vulnerable individuals, particularly as they are often referred to support services at a period of acute crisis. In some cases, management of crisis, reducing immediate risk of harm and preventing escalation of vulnerability were more realistic goals than more sustained transformation.

Some outcomes that could be viewed as minor by funders, such as help with benefits or accessing harm reduction services like a needle exchange, may represent considerable achievement and significance for individuals given their high levels of vulnerability. Small, successful steps could lead to positive outcomes in the longer-term and help develop trust and rapport.

Practitioners felt that that this ethos was undermined by the significant reductions in funding for services over recent years. Austerity has impacted negatively on provision and resulted in the closure of some specialist services, increased thresholds of need at which other services now offer support, and reduced the capacity of mainstream services to interact with vulnerable individuals.

“Just because of the pressures that are put on those services, we’re finding that we now have to pick up the pieces because we’re the last line of defence. So if someone is getting to the point where police have to take them into hospital it’s because they’re in such a crisis state that something somewhere along the line has been unchecked.”

Police officer, London borough

However, some practitioners indicated that scarcity of resources had required new models of delivery that made multi-agency partnership working essential.
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RECOMMENDATION: INVEST IN COORDINATED PREVENTATIVE SUPPORT
Organisations working with people at the point they become homeless are being placed under increasing pressure as other services that could intervene earlier are affected by funding cuts. If it continues, this situation will result in increased costs and poorer outcomes, and we should therefore act now to invest in preventative services.

- In the next Budget, the Chancellor should invest in services that play a preventative role in addressing multiple needs associated with homelessness, including substance misuse treatment and mental health care for at-risk groups, and services supporting women experiencing violence and abuse.
- Local authorities should work with partners in the voluntary sector to explore a multi-agency approach to addressing multiple needs at an earlier stage. They should evaluate the benefits this generates both in terms of outcomes for individuals and service costs.

NEXT STEPS
This briefing has recommended steps that would support better prevention for people experiencing multiple needs, but the findings also point to deeper issues about our institutional structures, and how they affect people at all stages of their lives.

Over the coming year, the MEAM coalition will work with a range of partners to coordinate a programme of work on systems prevention that builds on this research:

- We will explore how young people leaving care or who have been in contact with children’s services can be supported in their transition to adulthood. We will work closely with the Children’s Society, who are investigating the way that children facing multiple disadvantage can benefit from effective pathway planning, and support reintegrating with services as adults.
- We will explore how improved collaboration across and between statutory agencies, criminal justice system and the voluntary sector can improve support for people with complex needs, at key transition points such as on first contact and release from custody.
- As signatories to the Prevention Concordat for Better Mental Health, Homeless Link and Mind will explore opportunities for earlier action on the mental health problems that lead to homelessness.

To find out more about this work and how you or your organisation can contribute, contact Sam Thomas (sam.thomas@meam.org.uk).

FURTHER READING

- Agenda (2015), Hidden Hurt
- Canadian Observatory on Homelessness (2017), A New Direction: A Framework for Homelessness Prevention
- Crisis (2017), Homelessness projections: Core homelessness in Great Britain. Summary Report
- Revolving Doors (2016), Understanding the Whole Person

This research is the result of a collaboration between the University of Sheffield, Making Every Adult Matter coalition and West Yorkshire Finding Independence. It was made possible by the Crook Public Service Fellowship scheme, which allows future leaders in the public and not-for-profit sectors to work closely with academics to influence their sector and potentially wider society.

The Making Every Adult Matter (MEAM) coalition is made up of the national charities Clinks, Homeless Link and Mind. Working together, they support local areas across England to develop an effective, coordinated approach to multiple needs. www.meam.org.uk

West Yorkshire-Finding Independence (WY-FI) is a Big Lottery Fund-supported programme supporting people with multiple needs. wy-fi.org.uk

The research consisted of a literature review and 15 in-depth interviews with a range of practitioners and managers drawn from substance misuse services, healthcare providers, the police, housing services, anti-social behaviour teams and multi-agency teams specialising in multiple needs. The study focused on two geographical case study areas; a London borough, and West Yorkshire. Both have ethnically diverse populations, and contain areas of severe economic deprivation. Each has implemented a distinct multi-agency approach to supporting people with multiple needs.

The research has been carried out by a multi-disciplinary team comprising academic researchers, policy staff from voluntary sector organisations and peer researchers with lived experience of multiple needs, who led the research process in one of the case study sites. Collaborating with peer researchers ensured that the perspectives of those who have accessed support were integral to the research process.

Sheffield Solutions in an ambitious initiative of the Faculty of Social Sciences at The University of Sheffield, which supports events, activities and outputs aimed at connecting social science perspectives to policy makers, practitioners and other external audiences in order to tackle pressing global issues. For further information contact sheffieldsolutions@sheffield.ac.uk.