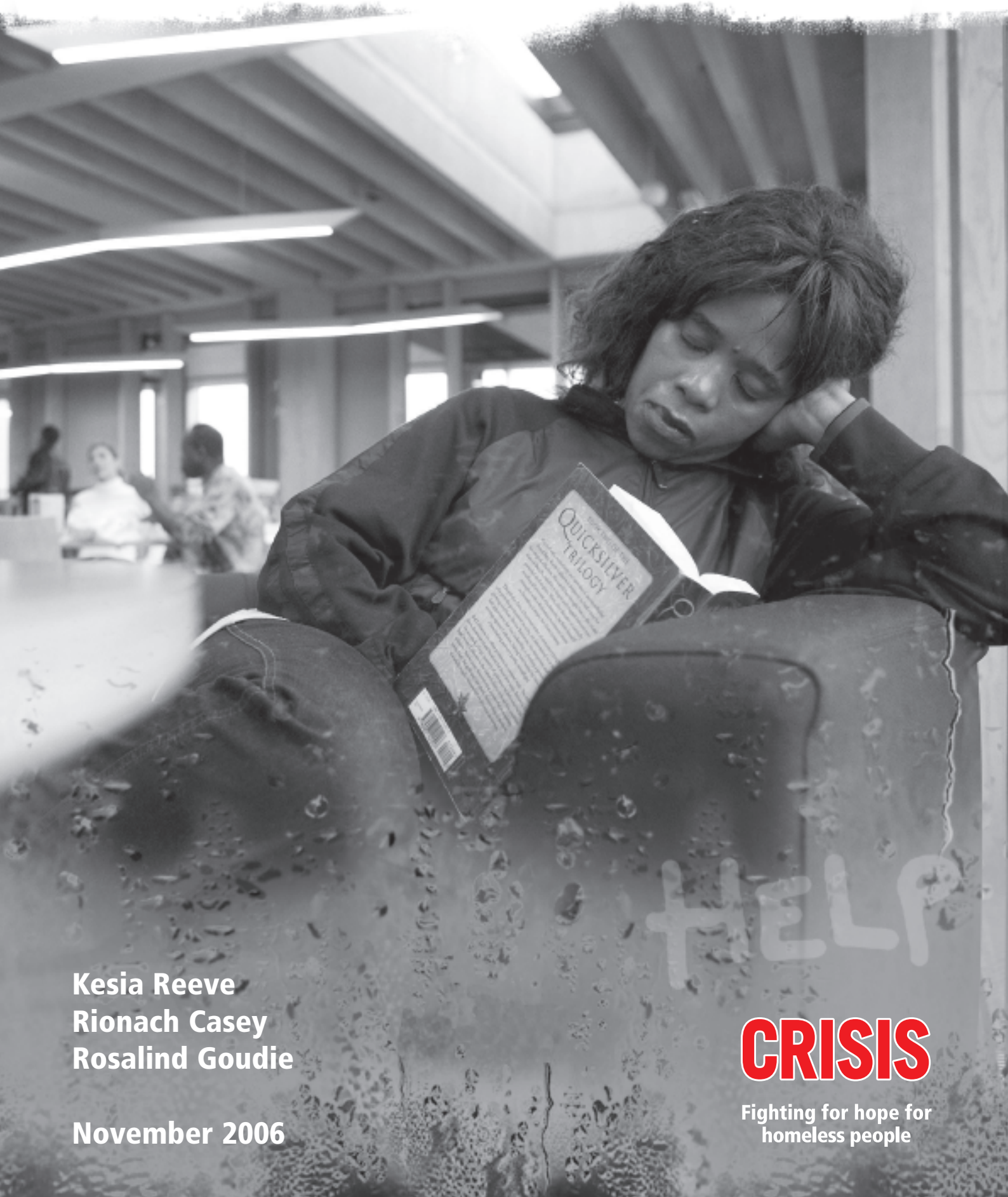
Homeless Women:
Still being failed yet striving to survive



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November 2006

CRISIS
Fighting for hope for homeless people

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Foreword

The findings in this report are shocking. Homeless women are telling us that they lead traumatic lives and are not getting access to housing and the support they urgently need. These women are hidden from view and hidden from services. Many are left with no choice but to sleep rough, squat, rely on the goodwill of friends or family, or form unwanted sexual partnership to get a bed for the night. Their individual situations and accumulated vulnerabilities are not being adequately taken into account by local authorities, and services are failing to reach those most in need.

I was struck by the ways in which these women described their attempts to manage their homelessness, trying to maintain their dignity and their hope of a better future and somewhere they can call 'home'.

This research should be a wake-up call to all of us concerned with homelessness and women's issues. We must take a fresh approach to the challenges of homelessness amongst women. We must ensure that we deliver the services, accommodation and support that they desperately need.

Leslie Morphy
Chief Executive, Crisis

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We are very grateful to all the numerous individuals within agencies across the country who found the time to assist the research team with accessing homeless women, and who allowed us to conduct surveying and interviewing in their services. Without these organisations the research would not have been possible. But most of all we would like to thank the homeless women who generously gave up their time and talked to us so openly about their situations and experiences. We only hope we have done them justice in this report.

We would like to make clear that this report is based on research undertaken by the authors and that the analysis and comment contained within does not necessarily reflect the views and opinions of Crisis or any of the participating agencies. Of course, we accept all responsibility for any inaccuracies or omissions in the text.

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Executive Summary

Much research about homelessness is not explicitly gendered, but is inadvertently dominated by the experiences and views of homeless men. While homeless people, regardless of gender, will share many common experiences, a failure to adequately understand the (sometimes distinct and unique) situations and experiences of homeless women can ultimately result in a failure to develop appropriate responses, and a failure to effectively tackle and prevent homelessness amongst women. Research focused specifically on homeless women is scarce and national statistics, surveys and datasets provide little by way of information about the female homeless population. In an effort to address this deficit in information and understanding this report explores the experiences of homeless women, as opposed to homeless people, and is informed by recognition of the potential influence of gender on homelessness experiences, circumstances and strategies to negotiate and manage these circumstances.

The report suggests that despite advances in homelessness policy and legislation over the past decade, homeless women are enduring traumatic and difficult homelessness situations and experiences. Many are not receiving the assistance they require with accessing accommodation, reflecting the fact that their wider situations, needs and vulnerabilities are not always adequately taken into account by local authorities. As a result, many are sleeping rough, placing themselves in danger of assault and sexual attack, and many more are living in a range of hidden and marginalised housing situations. Very vulnerable women who have already experienced traumas in their lives are still becoming homeless and are not getting help to address their other needs.

About the research

The research on which this report is based was conducted between January and July 2006. A questionnaire survey collecting profile information and information about women's housing situations, their needs, and use of services was conducted with 144 single homeless women across 19 towns and cities in England. In addition, in-depth interviews were carried out with 44 single homeless women in London, Leeds, Norwich, and Sheffield. Concerted efforts were made to include minority ethnic women, women across all age groups, and women living in different accommodation situations in the survey and interview samples. Women were surveyed and interviewed in a range of services and other places including day centres, soup kitchens, hostels, B&Bs, rehabilitation centres, health centres and on the streets.

The main findings to emerge from the research are presented below. In addition, each chapter concludes with a summary of the main issues contained within that chapter.

The accumulation of homeless women's traumatic life experiences

There are high levels of vulnerability evident within the female homeless population – mental ill-health, drug and alcohol dependencies, childhoods spent in the care of the local authority, experiences of physical and sexual abuse and other traumatic life experiences were commonplace amongst respondents.

Homelessness is rarely the consequence of a single event, action or issue but is the culmination of a complex range of experiences and events which together bring women to the point of losing their accommodation. The immediate 'triggers' of homelessness mask a host of underlying issues, experiences and processes, all of which influence the likelihood of a homeless outcome. There were clear links between women's traumatic life experiences – for example sexual abuse, neglect and abandonment, reproductive health issues and experiences of violence – and their subsequent homelessness.

Over 20 per cent of respondents left their last settled home (i.e. became homeless) to escape violence from someone they knew – whether a partner, family member or associate.

Worryingly, very vulnerable women were those most likely to stay in the most insecure and difficult situations – care leavers, women with mental ill health and dependencies were all more likely to have slept rough, squatted, and stayed in emergency accommodation such as night shelters and B&Bs than women without these vulnerabilities.

There was also evidence that very vulnerable women were those most likely to face difficulties meeting their needs because of active exclusion from services – care leavers, women who self-harm and women with coping difficulties were those most likely to have been excluded from services.

The situations and experience of homelessness can have severe consequences for women's physical and mental health and well-being. Physical health problems, the onset of mental ill health, suicide attempts, drug and alcohol abuse, and 'coping crises' were commonly reported by respondents and attributed to their homelessness. Respondents were also separated from their children because they had nowhere settled to live and others resorted to forming unwanted sexual partnerships with men in order to put a roof over their heads.

Negative experiences of local authority assessments, decisions and practices

The majority of women reported very negative experiences of approaching local authorities as homeless, with some being 'turned away at the door' or deterred by front-line staff from making an application. Over one third did not approach a local authority as homeless or could not remember doing so. Of those who did make an application less than one third were awarded priority need status and 28 per cent were found to be intentionally homeless.

Many respondents were unaware of the outcome of their application raising the possibility that homelessness decisions are failing to reach applicants, and the 'advice and assistance' provided by local authorities was often deemed useless.

Nearly one third of the 'single' homeless women (i.e. those without dependent children) participating in this study were not childless. Many had children not living with them who they hope to reunite with once they secured settled accommodation. Yet many were being treated by services and by local authority housing departments as childless women, with no consideration or acknowledgment given to their potential 'family' status.

Repeat homeless appears to be very common. Nearly half the women surveyed had been homelessness on at least one previous occasion and many had experienced homelessness several times. For some, settled accommodation was an exception in a housing career otherwise characterised by homelessness – indeed survey respondents were more likely to have lived in homelessness accommodation such as hostels, night shelters, B&Bs or with friends and relatives than in their own tenancy.

Unsatisfactory and dangerous accommodation situations

Rough sleeping is very common: over 60 per cent of respondents had resorted to sleeping rough, a higher proportion than had stayed in any other form of homeless accommodation situation. Rough sleeping appears to be particularly common in the early stages of homelessness: it was the most commonly cited situation in which women found themselves on becoming homeless for the first time, reflecting a lack of other options but also limited knowledge about the assistance available. This is a situation of great concern not least because rough sleeping is extremely dangerous for homeless women – many respondents had been physically attacked, verbally abused and sexually assaulted while sleeping rough.

Partly as a response to the dangers associated with sleeping rough, many women made concerted efforts to 'remain invisible', choosing places to sleep which were hidden from view or disguising their homeless status in some way. As a consequence many do not come to the attention of rough sleeper teams: over 60 per cent of women had slept rough but only 12 per cent had engaged with rough sleeper teams.

It is likely that, at any given time, there are many women staying in 'hidden', informal and marginalised homeless accommodation situations. The vast majority of the sample had been in 'hidden homeless' situations and it was more common for women to have been accommodated informally by friends than in hostels.

Frequent mobility is a key feature of women's homelessness careers but this is rarely a product of active choice. Rather it reflects the very temporary nature of many homelessness accommodation situations, the inability of friends and family members to accommodate guests for long, the scarcity of medium-term hostels, limited funding for B&B placements, and strict time-limits in some hostels and night shelters.

It is not only women staying with friends, with family and in squats who are living in hidden homeless situations. An alarming number of the women interviewed had engaged in unwanted sexual liaisons (paid and unpaid) in order to secure accommodation and in exchange for basic necessities such as food and clothing. Many of these women would not have been engaged in any form of sex work had they not been homeless.

Barriers to accessing services

Many respondents were failing to access the support and assistance they required to help them secure accommodation (temporary and permanent) and meet their other, often complex, needs. Nearly 10 per cent of respondents had not been in contact with any service since becoming homeless and over 23 per cent had not been in regular contact with any service. Particular problems were evident in the early stages of women's homeless careers: nearly 40 per cent did not seek assistance from an agency when they first became homeless and many relied instead upon informal advice from friends and family members.

The fragmentation of services emerged as a key barrier preventing respondents from receiving the assistance they required. Many respondents had a variety of complex needs, but the services available to them were often too disjointed and specialised to address their individual situations. Few services were capable of addressing the multiplicity of needs that some homeless women presented with, and the inter-relatedness of their problems got lost in the 'service journey' because they were not treated in a 'joined-up' way.

Women's failure to access support and assistance stems partly from their active exclusion from services (over 40 per cent of respondents had been excluded from a service). However, a lack of knowledge about available assistance also emerged as a key barrier to service engagement.

The bureaucratic and inflexible nature of some services, male-dominated environments and unwelcoming physical layouts were also deterring women from using services.

Women's homelessness careers often began before they reach adulthood. Over one in four respondents had first become homeless before the age of 16. Yet homelessness services and temporary accommodation are rarely available to these young women. Very vulnerable women – vulnerable by virtue of their age, and the traumatic childhoods many are escaping – are therefore most likely to stay in hidden homeless situations, to be disengaged from services and unable to access temporary accommodation.

Day-to-day life: needs and preferences

The ways in which services are delivered can be as important as what is on offer. Women were particularly likely to engage with services which were informal, which felt 'safe', which provided women-only spaces,

and which were staffed by 'caring' and 'non-judgemental' workers. Women were more likely to use, and be satisfied with, temporary accommodation provision if it resembled their notion of 'home'. Many wanted emotional support whether through formal counselling or just 'someone to talk to' which had not been available to them.

Day centres are an important resource, providing many daily necessities of life, although the extent to which women feel able to access this resource varies.

Public buildings and facilities play an important role in homeless women's daily lives. Day centres aside, public buildings and facilities (libraries, public toilets, public transport, galleries, bookshops) were the primary means through which respondents met their daily needs. These spaces and facilities provide opportunities for keeping warm, resting, sleeping, washing and eating.

Public spaces are also perceived as 'safe' places where homeless women can be anonymous and are not identifiable as homeless.

The ways in which women manage their homelessness demonstrate resourcefulness, competence, imagination and ingenuity. By adapting their behaviour in particular ways and being adept at identifying key gatekeepers to public spaces, these women were able to blend in with other users of services, and negotiate use of public spaces to fulfil needs arising from their homelessness. This type of 'surviving' also demands emotional and psychological devices to be able to cope with the experience of homelessness.

Future hopes and aspirations

Homeless women experience educational disadvantage and occupy marginalised positions in the labour market. Indeed respondents were more likely to earn their income from begging and the sex trade than from paid employment. Most, however, would like to pursue educational and employment related opportunities.

Respondents long-term aspirations focused mainly on family life, a home of their own, securing work and education courses. However, it was 'normality' which most desperately sought – sitting on the sofa in their own home watching television with a cup of tea; reading a bedtime story to their children; cooking a meal in their own kitchen; and taking their children to school on the way to work.

Recommendations

Our understanding of the experiences, situations and needs of homeless people is rarely based upon an appreciation of gender differentials, which can result in a failure to respond appropriately to the needs of homeless women – to develop policies and initiatives sensitive to homeless women's needs; to develop services which are accessible to homeless women; to deliver services in ways which match homeless women's needs and preferences; and to tackle the underlying issues and experiences which result in homelessness. Comparison between the findings of this research and those of a similar study conducted by Crisis in the late 1990's suggests that homeless women are still encountering many of the same difficulties as they were nearly a decade ago. There is still, then, much work to be done if homelessness amongst women is to be effectively tackled and prevented. A full list of recommendations is presented in the concluding chapter of this report. In summary, the following broad changes and developments have the potential to dramatically improve the situations and experiences of homeless women.

1. Improvements and changes to local authority homelessness assessments, decisions and practices. This includes ensuring that homeless women's wider situations such as their children, their mental and physical health needs, and their vulnerabilities arising from accumulated traumatic experiences, are adequately taken into account.

2. Recognising that gender does influence homeless women's situations, and addressing the ways in which services are not sensitised to the needs of

homeless women, and in some cases are not reaching them. Concerted efforts should be made to respond to and rectify gender-insensitive service provision, and to increase the availability of women-only services and provision.

3. Addressing current gaps in service provision in order to more effectively prevent and resolve homelessness amongst women. This includes improving awareness of services available to women when they first become homeless, and enable responses to the particular circumstances of certain groups of women, such as prison leavers and women under 16. Importantly, a more integrated approach to meeting women's needs is required, joining-up services which homeless women would benefit from – this should include sexual and domestic violence, substance misuse and mental health services.

4. Harnessing the important role that non-homelessness places and public facilities play in the daily lives of homeless women, including raising awareness of why homeless women use these spaces. Government funds should be directed to i) support public facilities and other non-homelessness agencies to develop homelessness-related initiatives, and ii) to enable homelessness agencies to deliver their services within 'non-homelessness' spaces and services.

5. Developing and expanding our 'thinking' about, and our approaches to, women's homelessness – about the situations in which they find themselves, their self-identity, the ways in which these issues impact on women's service use, and the ability of policy and practice to tackle homelessness amongst women. This involves recognising the invisibility of many women's homelessness, and that the difficulties they face through homelessness are inextricably linked to a range of other unmet needs, often as a result of traumatic experiences in their lives. There is an urgent need to start measuring and examining women's homelessness, to address the deficit in evidence and understanding.

1 Introduction

Much research about homelessness is not explicitly gendered, but is inadvertently dominated by the experiences and views of homeless men. A body of evidence has emerged on specific categories of homeless people, including rough sleepers, frequent movers, squatters, and older homeless people, but little is known about single homeless women. In an effort to address this lacuna of understanding, and in recognition that the experiences, circumstances and needs of homeless women may differ to those of homeless men, Crisis commissioned this research in autumn 2005. This report seeks to ensure, then, that the experiences of homeless *women*, as opposed to homeless *people*, are exposed and is informed by recognition of the distinct and unique position of women – in society and within the homeless population – and the influence of gender on experiences, circumstances and strategies to negotiate and manage these circumstances.

This is not the first time, however, that Crisis has sought to understand, highlight and evidence the situations and issues which homeless women face. In 1998 they commissioned research exploring the experiences of homeless women, culminating in the publication in 1999 of *'Out of Sight, Out of Mind'*. Comparing the findings from this study with those of the 1998 research reveals, alarmingly, that nearly a decade later little appears to have changed. A very high proportion of homeless women are still sleeping rough, placing themselves in danger of assault and sexual attack. They are heavily reliant on friends and family for temporary accommodation and are living in a range of hidden and marginalised housing situations. Women experiencing violence, sexual abuse and other traumatic events are still becoming homeless and failing to access appropriate accommodation – often because they are not deemed vulnerable enough by local authorities to qualify as priority need within the terms of the homelessness legislation. Many homeless women are still unaware of the assistance available to them and repeat homelessness remains common. The need for more women-only accommodation is still an issue which needs addressing, and homeless women are still not receiving the support and assistance they require.

But can we really expect the situation to have changed in just eight years? Perhaps not, but for the fact that much has changed in the homelessness policy and legislative environment during that time. There has been substantial Government investment in homelessness prevention and a stated commitment to tackling the underlying causes of homelessness with the publication of *More Than a Roof: A Report into Tackling Homelessness* in 2003 and, more recently, the Government's five year homelessness strategy *Sustainable Communities: Settled Homes; Changing Lives,* published in 2005. The Homelessness Act 2002 has come into force, extending the priority need categories to broaden the definition of 'vulnerability' and placing new obligations on local authorities to offer advice and assistance to homeless people. All local authorities are now obliged to carry out a review of homelessness in their area and produce a homelessness strategy. We have had the Rough Sleepers Initiative, the Bed and Breakfast Unit, and the Homelessness Directorate has been formed.

If homeless women are still encountering the same difficulties as they were in 1998 then the question arises of what these many and various initiatives, policies, investments and legislative changes have actually achieved for single homeless women.

1.1 The research approach

The research was conducted between January – July 2006 with data collection focused on two principle tasks: a questionnaire survey, and in-depth interviews with homeless women.

The survey of homeless women

A questionnaire survey collecting profile information and information about women's housing situations, their needs, and use of services was conducted with single homeless women in a range of services across England. The surveys were conducted using two principle methods: some were conduced face-to-face by members of the study team; and others were left in agencies or with service providers who encouraged their clients to self-complete the questionnaire. The latter technique enabled greater geographical reach of the survey and produced a higher response rate than would otherwise have been achievable.

In total, 144 women were surveyed[1]. Concerted efforts were made to ensure that minority ethnic women and women across all age groups were included in the sample. The tables below show that, of the women who specified their ethnicity, just over 30 per cent were from minority ethnic groups and that women of all ages were represented in the sample.

Table 1.1. Ethnicity of survey respondents

Ethnicity Origin	**No.**	**%**
White British	95	69.3
Total White British	**95**	**69.3**
Indian	5	3.6
Pakistani	5	3.6
Bangladeshi	3	2.2
British/Black Caribbean	7	5.1
British/Black African	2	1.5
Other British or Black	3	2.2
White Irish	4	2.9
Other White	4	2.9
White and Black Caribbean	2	1.5
White and Black African	1	0.7
White and Asian	1	0.7
Other Mixed Heritage	4	2.9
Roma/Gypsy	1	0.7
Total minority ethnic	**42**	**30.7**
Total	**137**	**100**

Note: two women 'preferred not to specify' their ethnicity and five did not complete this question

[1] The tables presented throughout the report are usually based on a response rate slightly lower than 144. Sometimes women refused or were reluctant to answer particular questions and some were left blank by women self-completing the survey. The response rate is always stated within or below each table.

Table 1.2. Age of survey respondents

	No	%
<21	38	28.1
21-30	43	31.9
31-40	26	19.3
41-50	18	13.3
50+	10	7.4
Total	**135**	**100**

Note: in nine cases women did not want to provide their date of birth and so their age was unknown

Respondents were surveyed in: London, Sheffield, Leeds, Exeter, High Wycombe, Canterbury, Southampton, Bradford, Liverpool, Bristol, Birmingham, Norwich, Portsmouth, Hull, Newbury. Wolverhampton, Leicester, Kings Lynn and Huddersfield. Just over one quarter (26 per cent) of surveys were conducted in London.

The women surveyed were living in a wide range of temporary accommodation situations from hostels (local authority provided and voluntary sector) to squats, refuges to bed and breakfast accommodation (B&Bs), with friends and family, and nearly 10 per cent were currently sleeping rough. More respondents were living in hostels than in any other homelessness situation. However, women were asked about all the accommodation situations they have been in whilst homeless so that information could be obtained on as wide a range of homelessness accommodation situations as possible.

In-depth interviews with homeless women

In addition to the survey, in-depth interviews were carried out with 44 single homeless women in London, Leeds, Norwich, and Sheffield, ranging in age from 16 to 59, and 30 per cent of whom were from minority ethnic groups[2]. Women were interviewed in day centres, soup kitchens, hostels, B&Bs, rehabilitation centres, health centres and on the streets. These interviews were detailed and exploratory, taking a 'biographical' approach and exploring issues such as women's homelessness experiences, their daily lives, their perceptions and views of services and their life experiences more generally.

1.2 Report structure

In Chapter 2 we provide a descriptive profile of the homeless women surveyed. In Chapters 3 and 4 the report explores women's housing situations and careers, discussing issues such as hidden homelessness and rough sleeping. Chapter 5, exploring the causes and consequences of homelessness, attempts to unpick some of the complexities inherent in determining the many influences on women's trajectories into homelessness, and the impact homelessness has on their lives, their health and their well-being. Chapter 6 explores daily life for homeless women and some of the strategies they employ to manage their homelessness and meet their needs. In Chapter 7, women's experiences of services are discussed paying attention to issues such as the barriers encountered accessing services and their service preferences. This chapter also look specifically at women's experiences of approaching local authorities as homeless.

[2] Some, but not all of these had also been surveyed. In total, approximately 160 single homeless women participated in the study via survey, interview, or both.

Much of the discussion throughout the report implicitly and explicitly highlights homeless women's vulnerabilities and needs. Chapter 8 summarises these and provides further detail, particularly about women's unmet needs, and recommendations are presented in Chapter 9.

While acknowledging that many of the issues discussed and conclusions drawn in this report may apply, to varying degrees, to homeless men, we refer throughout to homeless *women* (as opposed to homeless people more generally). This reflects that the study was focused exclusively on homeless women and in recognition of gendered, and hence specific, experiences of homelessness.

Where names are used in this report they have always been changed. The first time a woman is named this appears in inverted commas.

1.3 A note on homeless identities

Homeless women's identities – the way they see themselves in relation to their homelessness and the way others view them – emerged as a significant factor influencing many of the issues discussed in this report. It affects the services they do and do not engage with, the temporary accommodation they rely upon, and their satisfaction or otherwise with the housing and other services they use. It impacts on their sense of well-being and influences their homelessness experiences, their daily life and the strategies they employ to manage their homelessness situation. And although all the women participating in this study were homeless according to the definition imposed upon them, not all defined *themselves* as homeless, despite recognising that 'officially' this was their position. Given the importance of this issue and it's relation to many of the issues we are about to discuss, a few brief words about women's homeless identities are in order.

How respondents perceived themselves (their self image) and, more particularly, how they perceive themselves in relation to their homelessness had some bearing on how they 'managed' the situation in which they found themselves. Many women's self-image was poor, ground down by their past experiences and the perceived hopelessness of their homelessness plight leaving them, in the words of one woman, *"just another bum on a street corner".* Such negative self-images had practical consequences, with those with poor self-images less likely to turn to anyone for help. In contrast, those who made concerted efforts to disassociate themselves from their homelessness, or from the homeless 'stereotype', were more likely to have positive self-images and were more inclined to take care of their appearance by presenting themselves as clean and tidy, and therefore not visibly homeless. In turn, a wider range of non-homelessness services and spaces were accessible to them, for example restaurants, airports, shopping centres, libraries and bus stations.

How *others* perceived the women we interviewed had a direct bearing on how they saw themselves. For the most part respondents were of the opinion that other people regarded them as second class citizens by virtue of their homelessness. They felt they were regarded with disdain by the general public and service providers, views which were confirmed when others did not want to be near them or engage with them in any way. In the words of one woman, *"'it's like they don't want to talk to you, they'll answer you but you can tell they don't want to talk to you".* This could manifest in a discourse of self-reliance and a consequential lack of engagement with formal support mechanisms. Time and time again women recounting their experiences of homelessness would add as a refrain ' you have to look out for yourself' or 'no-one else can do it but you'. Others, having taken on board the perceptions of them as unworthy second class citizens, felt they did not deserve help, resulting in a disinclination to seek assistance of any kind.

In contrast, some women participating in this study did not perceive themselves as homeless at all. Whether women defined themselves as homeless could similarly affect the assistance they sought, their actions and the ways in which they negotiated everyday life. There were three ways in which respondents defined homelessness and, therefore, their own position in relation to homelessness.

Firstly, and at one end of the spectrum, were women for whom homelessness was synonymous with rooflessness (rough sleeping). So long as they had a roof of some description over their heads they did not consider they were homeless. In some instances this was a psychological strategy which helped women to 'feel better' about their situation, by employing a definition of homelessness which excluded them.

Secondly, were those who defined homelessness in terms of not having 'secure' accommodation. This comes closest to the most widely used and accepted definition of homelessness as occurring when a person does not have secure accommodation which they are entitled to occupy. However, some women took a broad view here. One woman, for example, explained that she considered herself to be homeless when she was living in a private rented flat because she could no longer afford the rent. This accommodation was not, therefore, secure. She explained that *'I would see myself as homeless even before I left my flat when I knew I wasn't working to pay enough rent. I was actually paying my rent on credit…'*

Thirdly, some defined homelessness in terms of not having a home. Women's meaning of home, or what they required for a place to feel like home varied: for some 'home' was a place where you felt safe; for others it was a place where you had privacy and your own amenities; for some it was a place where you could bring up children; for others it was a place which was *their own,* where they had independence and over which they had some control. Whatever women's views on what constituted a 'home', the extent to which they felt homeless and identified as homeless depended on the extent to which their current accommodation – whether temporary or permanent – 'felt like home'. Thus women could feel more homeless in settled accommodation which did not fulfil their criteria of a home than in temporary accommodation which did.

1.4 Definitions, terminology and glossary

Single homeless women: in this context the term 'single' refers to women without *dependent* children – i.e. without children under the age of 16 (or under 19 but still in full time education) who live with them. Women who have children under the age of 16 who do not live with them would, therefore, fall within the definition of 'single'. It does not refer to women's relationship status, unless explicitly stated, and so women in relationships (heterosexual and homosexual) were included in the sample.

Sleeping rough: refers to sleeping in any place which is not designed for that purpose, including cars, sheds and other 'covered' places as well as open air locations such as parks and shop doorways.

Homelessness: the broad statutory definition of homelessness has been employed whereby a person is homeless if they do not have accommodation that they have a right to occupy or which they can reasonably be expected to occupy.

'Secure' or 'settled' accommodation: while acknowledging that women may feel secure or settled in temporary accommodation these terms are used to describe non-homelessness accommodation situations such as social and private rented tenancies and owner occupation. The term 'permanent accommodation' is avoided in recognition that women in some sectors (for example private rented housing) are not provided with permanent tenancies, and that where women cannot afford the housing in which they are living, whatever the nature of the tenancy, this situation is unlikely to represent permanence.

Prostitute: a woman who engages in sexual activity with clients in exchange for money

Clipping: a practice whereby a woman presents herself as a prostitute and indicates to a client that she will engage in sexual activity in exchange for money but flees after the money has changed hands and before any sexual activity has taken place.

The sex trade/industry: incorporates prostitution *and* other forms of activity relating to prostitution such as 'clipping' and bringing in clients for prostitutes, all in exchange for money.

Unwanted sexual partnerships/liaisons, and sex work: *any* situation where a woman engages in sexual activity – whether as a one off occurrence or in an ongoing relationship, whether paid or unpaid – that she does not want. The term 'sexual liaisons' has been used more frequently, the word 'partnership' conveying an equal relationship that does not reflect the reality of these liaisons.

2 A Profile of Homeless Women

Very little is known about single homeless women – existing data do not tell us the size or profile characteristics of the female homeless population with any degree of confidence (if at all), and research about homeless women is patchy and relatively scarce[3]. Official statistics focus on measures of statutory homelessness and thereby fail to capture those households not meeting very specific criteria. In any case, to be counted in these statistics relies upon having approached a local authority as homeless, something which many homeless women apparently fail to do (see Chapter 7). Indeed Crisis estimates that there are as many as 400,000 hidden homeless people in Britain[4] – that is homeless people (men and women) who have not been provided with accommodation by their local authority, either because they have not applied as homeless or because they have applied and been judged to be 'not in priority' need.

Rough sleeper counts, meanwhile, as the other 'official' measure of (a particular form of) homelessness are very likely to under-count homeless women, who tend to sleep rough in places where they will not be seen (see Chapter 3). In any case the figures available do not disaggregate according to gender. Thus, the Department for Communities and Local Government (DCLG) estimate that in June 2006 there were 502 people sleeping rough in England on any single night, but do not distinguish between male and female rough sleepers. This is not uncommon and obtaining information about the size or characteristics of the single female homeless population is complicated by the fact that many data sources frequently fail to collect or disaggregate data in terms of gender or in terms of whether women have dependent children, and some only 'count' women in particular situations.

Thus, The Office of the Deputy Prime Minister (ODPM) figures (based on the P1E quarterly and annual returns) show that 16 per cent of all households accepted as homeless by local authorities in England in 2004/05[5] were female one person households. However, the total figure for homeless women without dependent children will be higher – some will be part of childless couples who feature only in an 'all other households' category. In addition, these figures only count those *accepted* as homeless by local authorities thereby excluding anyone who does not meet the criteria or who has not approached a local authority for assistance. Similarly, according to the 2001 Census of Population 35.2 per cent of residents of hostels for homeless people (including youth hostels) were female. Of these, just under half were non-White British: 15.3 per cent Other White, 10.2 per cent Black African and 4.9 per cent 'Other Ethnic Group'[6] and female homeless hostel residents had a considerably younger age profile than male residents. These data do, then, provide some insights. However, this only applies to women in hostels, and the Census of population is now somewhat out of date, not least because the Homelessness Act 2002 has come into force since.

Local studies and research potentially offer some indicative insights about the size and composition of the female homeless population. However, this evidence is patchy and often influenced by sampling frameworks which give priority to aspects of the sample other than gender. Indeed the dearth of data on homeless women partly stems from the fact that women typically make up only around 20 per cent of respondents to homelessness surveys and so, in

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3 But see Cramer, H. and Carter, M. (2002) *Homelessness: What's Gender Got To Do With It?*, Shelter, London: Crisis (1999) *Out of Sight, Out of Mind?,* Crisis, London: Cloke, P., Johnsen, S. and May, J (2004) Alternative Cartographies of Homelessness: Rendering Visible British Women's Experiences of 'Visible' Homelessness, *Gender, Place and Culture*

4 Crisis/NPI, 13th June 2006, http://www.crisis.org.uk/media/display.php?id=243

5 This was the most up-to-date data available which distinguished between male and female applicants at the time of writing.

6 Census of Population, 2001, Table M094 – Residents of Hostels For the Homeless by sex and ethnic group, Crown Copyright 2003

individual studies, the cohort of women is rarely large enough to make comment with confidence. As a consequence, the only reference to gender in many reports on homelessness is to state the number of male and female respondents – there is very little exploration of the differences between the situations and circumstances faced by homeless men and homeless women.

Although this study in no way matches the sample sizes of national datasets and surveys it is able to provide indicative information about the profile characteristics of homeless women. Given the dearth of available information on this subject, this represents a start at least in efforts to profile the female homeless population. This chapter, then, presents information on homeless women's family situations, their relationship status and sexuality, income and employment and education and training, based on a survey of 144 homeless women. This statistical and largely descriptive profile is supplemented in places with insights from in-depth interviews carried out with 44 women homeless women.

2.1 Personal characteristics and circumstances

This research focused specifically on the experiences and circumstances of *single* women (i.e. those without dependent children). Many of the services in which surveying was conducted were those providing temporary accommodation for single homeless people/women, and service providers that were assisting the research team were aware that single women were our target group. It was a surprise, therefore, to find that 30 per cent of these 'single' women did, in fact, have children under the age of 16. They did not have *dependent* children – in all cases respondents' children were being cared for by someone else – but they were not childless.

Furthermore, in two thirds of cases, respondents' children were only *temporarily* living elsewhere (in LA care, foster homes or with someone else) suggesting that many of these women hope to regain care of their children. Table 2.1 shows that in 50 per cent of cases, respondents' children were temporarily being looked after by 'someone else'. This was nearly always family members such as parents or grandparents, or the child's father and/or his family. It was more common for women's children to be living with a family member than to be in the care of the local authority.

Table 2.1 Whereabouts of children: respondents with children under 16

	No	%
Temporarily being looked after by someone else	20	50.0
Temporarily in LA care/foster home	7	17.5
Permanently living with someone else	7	17.5
Adopted (away)	3	7.5
Permanently in LA care	2	5.0
Other	1	2.5
Total	**40**	**100**

The experiences of in-depth interview respondents with children suggest that homelessness is a factor influencing women's residential separation from their children and that if and when respondents secure permanent accommodation they hope their children will live with them once again. In the meantime, however, respondents were being treated as 'single'. The assistance they were receiving to access temporary accommodation, the assistance they were receiving to secure settled accommodation, the services and advice offered to them, and the way in which they were assessed for housing by local authorities were based upon the premise that they were single women without dependent children.

The majority of women surveyed described their relationship status as 'single' while just under one quarter were currently in relationships (see table 2.2). Survey respondents were not asked for further information about their partners but the relationship circumstances of in-depth interview respondents suggest that most will be homeless themselves. Women were not, however, always living with their homeless partners, a reflection in part of the predominance of single sex hostel provision (for heterosexual women) and offers of temporary accommodation from friends extending only to one party or the other. It was rare for interview respondents to have housed partners and where this was the case the couple had usually been homeless together at some point, but the respondent's partner had accessed settled accommodation before they were able to.

Table 2.2 Relationship status

	No.	%
Single	96	69.6
Married/in relationship	33	23.9
Widowed	1	0.7
Other	8	5.8
Total	**138**	**100**

The gender of respondents' partners was not known, but information about women's sexuality suggests that not all these relationships were heterosexual (see table 2.3). A total of 9.1 per cent of respondents defined themselves as 'lesbian' or 'bisexual', a further 3.8 per cent were unsure about their sexuality or defined themselves as 'other' (including celibate) and 7.6 per cent did not want to state their sexuality. No accurate figures exist showing the number of non-heterosexual people in the UK for comparative purposes (the Census of population, for example, does not collect information about sexuality) but the Government estimates that between 5-7 per cent of population are lesbians, gay men or bisexual[7], a figure which Stonewall agrees is reasonably accurate[8]. There is some evidence that the proportion of gay, lesbian, bisexual and transgender people in the homeless population may be higher, particularly amongst young homeless people[9].

Table 2.3 Sexuality

	No.	%
Heterosexual	105	79.5
Bisexual	9	6.8
Lesbian	3	2.3
Other	3	2.3
Not sure	2	1.5
Prefer not to say	10	7.6
Total	**132**	**100**

The women surveyed had most commonly left their last settled home less than one year ago while over 10 per cent had left their last settled home over six years ago (see table 2.4). It should be remembered, however, that these figures are no indication of the average overall length of women's homelessness careers. Some of those who, when surveyed, had only been homeless for a few months may remain so for some time. In addition, many respondents had experienced several episodes of homelessness and their overall homelessness careers, therefore, were significantly longer, albeit punctuated by periods spent in settled accommodation.

7 www.statistics.gov.uk/about/consultations/downloads/2011Census_sexual_orientation_background.pdf

8 For an interesting discussion about sexuality and homelessness see Crisis (2005) *Sexuality and Homelessness*, Crisis, London

9 O'Conner, W. and Nolloy, D. (2003) *Hidden in Plain Sight: Homelessness Amongst Lesbian and Gay Youth,* National Centre for Social Research

Table 2.4 Length of time since leaving last settled home

	No.	%
<1 month	7	5.5
1 - 6 months	30	23.6
6 months - 1yr	28	22.0
1-2yrs	26	20.5
2-4yrs	17	13.4
4-6yrs	6	4.7
6-10yrs	7	5.5
10-15	4	3.1
>15yrs	2	1.6
Total	**127**	**100**

Survey respondents were asked for information relating to a range of needs and vulnerabilities (for example mental ill health, self harming, and drug and alcohol dependencies) and these are discussed in detail in Chapter 8. It is worth noting here, however, that over 11 per cent of women reported having a physical disability (see table 2.5).

Table 2.5 Women with physical disabilities

	No	%
Has a physical disability	15	11.2
Does not have a physical disability	119	88.8
Total	**134**	**100**

2.2 Income and employment

Tables 1.6 and 1.7 suggest that homeless women tend to occupy a much marginalised position in the labour market. Very few survey respondents, for example, were in paid employment and the vast majority were reliant on state benefits. In fact, the figures show that women were more likely to supplement (or earn) their income from begging and the sex trade than from paid employment.

Table 2.6 Employment status

	No.	%
Unemployed and available for work	59	46.8
Permanently sick or disabled	32	25.4
Full time student	5	4.0
On employment training or youth training scheme	4	3.2
Part time student	4	3.2
Employed part time	4	3.2
Voluntary work	3	2.4
Retired	1	0.8
Employed full time	0	0.0
Other	14	11.1
Total	**126**	**100**

Over 70 per cent of respondents were either unemployed or unable to work due to sickness or disability and none of those reporting an 'other' employment status were currently in work. Several, for example, were unable to work due to pregnancy, others reported being 'temporarily sick' and a couple made the point that they were actively seeking work (rather than merely being 'available' for work). In total, only four respondents were currently in paid employment and all of them were working part time.

These figures are not surprising and partly reflect the difficulties inherent in 'holding down', or successfully applying for, a job whilst homeless. Drawing on the experiences of in-depth interview respondents some of the very many barriers to working while homeless include:

- not having a fixed address to provide to potential employers
- not possessing appropriate clothing: women, on becoming homeless, usually have to leave most of their possessions behind
- difficulties remaining smart and presentable, particularly amongst those without ready access to washing and laundry facilities
- having to attend numerous appointments, and make phone calls, in an effort to resolve homelessness – activities which tend to take place during working hours.

Furthermore, several women in hostels stressed that the high cost of temporary accommodation can act as a disincentive. One explained that:

> *"while I'm there* [the temporary accommodation] *I can't look for paid work or anything cos the rent goes up to £90 a week if you start work, you know cos you get less housing benefit ... So basically unless I find a really good job I can't afford to work."*

Approximately one quarter of interview respondents had, at some point, been in paid employment[10] but mainly in low paid occupations such as waitressing and factory or shop work. Experience of working in (and therefore likelihood of securing) higher income jobs was rare and the extent to which respondents were able to improve their housing situations, or indeed pay for their current temporary accommodation through paid employment is, therefore, questionable.

Unsurprisingly given the low levels of economic activity reported, the majority of respondents were in receipt of State Benefits (88.2 per cent – see table 2.7), while very few earned an income from employment[11]. The 'other' sources of income referred to include a Council Tax rebate, Educational Maintenance Allowance and other training allowances, 'picking up coins from the street', and shoplifting.

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[10] 'Employment', as discussed in this section, does not include work in the sex industry.

[11] Table 1.6 shows that only four women are in paid employment, none of whom worked full time, and table 1.7 shows that seven women earn their income from paid employment, two from full time jobs. This discrepancy has arisen because not all of the 144 survey respondents answered every question. A couple of respondents who were working answered the question about income but not the question about employment status.

Table 2.7 Current source/s of income

	No	%
Benefits	120	88.2
Begging	10	7.4
The sex trade	8	5.9
Financial help from parents	7	5.1
Savings	5	3.7
Financial help from partner/ friends	5	3.7
Part time job	5	3.7
Full time job	2	1.5
Pension	3	2.2
Inheritance / trust fund	3	2.2
Other	10	7.4
n = 136		

It is likely that many of the sources of income mentioned in table 2.7 were providing temporary or emergency funds only, and did not represent sustained income. Little evidence emerged, for example, of women being supported on an ongoing basis by parents, partners or friends. Rather, small amounts of money were given or lent at critical times. Similarly, no interview respondent had sufficient savings to support them throughout a period of homelessness and so it is likely that the 'savings' referred to by survey respondents were small amounts of money which they drew on for a short while when they first become homeless to pay for basic necessities such as food. That over 30 per cent of survey respondents reported resorting to illegal activity in order to make ends meet confirms the precarious financial position in which homeless women can find themselves (see table 2.8). Drawing on discussion with in-depth interview respondents, examples of 'illegal activity' are likely to include shoplifting, prostitution, and fraud.

Table 2.8 Have you had to resort to illegal activity to make ends meet?

	No.	%
Yes	38	30.6
No	83	66.9
Prefer not to say	3	2.4
Total	**124**	**100**

It was of interest that some women who reported obtaining an income from the sex trade also reported *not* having resorted to illegal activity to make ends meet, suggesting that some did not consider prostitution and related activities in terms of the legality or illegality of this work. It is also worth noting that although less than six per cent of survey respondents reported that the sex industry provided a means of income, evidence from the in-depth interviews strongly suggests that this does not fully capture the prevalence of 'sex work' (in it's broadest sense) amongst the female homeless population. Certainly, this figure may be accurate in terms of the proportion of women who earn their *income* from sex work but many more may be engaging in various types of unwanted sexual liaisons in exchange for accommodation. This is discussed in more detail in Chapter 5.

2.3 Education and training

Over 63 per cent of survey respondents had some form of qualification[12]. A total of 44 per cent had GCSEs or O 'levels (the vast majority grades A-C) and 15 per cent had A 'Levels, while NVQ and City & Guilds qualifications were held by 9.5 per cent and 8.2 per cent of the sample respectively. Several respondents were very highly educated, with 4.1 per cent holding degrees and a further 6.9 per cent in possession of a postgraduate qualification. However, this leaves 36.5 per cent of respondents with no qualifications at all, nearly three times the national average of just 13 per cent[13]. In addition, it is clear from the high levels of worklessness and benefit dependency highlighted above that, for those with qualifications, their educational attainment is not translating into employment opportunities.

Table 2.9 Educational attainment

Qualification	**%**
No qualifications	**36.5**
GCSEs or O' levels Grade A-C	36.1
GCSEs or O' levels below Grade C	8.3
Total with GCSEs or O' levels	**44.4**
A' levels Grade A-C	9.6
A' Levels below Grade C	5.5
Total with A' levels	**15.1**
AS level	1.4
Degree	4.1
Postgraduate - Masters, Diploma or certificate	6.9
NVQ or SVQ - Level 1, 2 or 3	9.5
City & Guilds	8.2
GNVQ/ GSVQ	4.1
RSA	2.7
BTEC	5.6
HND/HNC	1.4
Junior Certificate	1.4
Teaching qualification below degree level	2.7
Nursing or other medical qualification below degree level	1.4
Other*	11.0
n = 74	

*Other qualifications included: First Aid, Young Life Savers, IPD Certificate, BHSI Instruction, English college level 3, Gym level 1, Cleaning Academy certificates, Medical Dr & Eng IETS 6, NNEB - RSA and NNEB.

On the basis of in-depth interview data we suggest that, in the main, survey respondents' qualifications will have been obtained before they became homeless. However, given the right support, some were able to continue with their education whilst homeless. Over one in four had attended college, but only those in more settled temporary accommodation (for example foyers and longer-term hostels) had been able to progress with their courses.

At the other end of the spectrum from those with higher level academic qualifications were those who had experienced educational disadvantage. Tables 1.10 – 1.12 below show that over 10 per cent of survey respondents reported poor literacy, 6 per cent had a learning disability, and a very high 29.1 per cent had disrupted schooling, having been excluded or suspended.

[12] This question was added to the questionnaire after some surveys had already been conducted, hence the low response rate of 74.

[13] DFES Labour Force Survey Autumn 2005

Table 2.10 Difficulties with reading and writing

	%
Have difficulties with reading and writing	10.4
Do not have difficulties with reading and writing	89.6
Total	**100.0**

n=134

Table 2.11 Women with learning disabilities

	%
Yes, has a learning disability	6.0
No, does not have a learning disability	94.0
Total	**100**

n=134

Table 2.12 Exclusions/suspensions from school

	%
Was excluded or suspended from school	29.1
Was not excluded or suspended from school	70.9
Total	**100**

n=134

Whether well educated, or with no qualifications, with previous work experience or never having worked, and despite (or perhaps because of) high levels of worklessness, benefit dependency and educational disadvantage there is strong evidence that homeless women do attempt to access educational, training and employment services, are keen to do so, and are interested in pursuing educational and training opportunities. Tables 1.13-1.15 show, for example that:

- virtually all respondents expressed a desire to participate in education or training activities (see table 2.13). Only eight per cent indicated that they were not interested in pursuing educational or employment training opportunities
- the majority of respondents had used libraries since becoming homeless. Evidence from in depth interviews suggests that although the attraction of libraries for some lies in the warmth and shelter provided by the building, many are also using them for learning and information purposes including internet access. The majority visit job centres, and employment agencies and colleges or universities also appear popular
- there is evidence that respondents want advice and assistance about education and employment but that these needs are going unmet. For example 22 per cent of respondents reported having wanted assistance to return to education but had not received that assistance (see table 2.15).

Table 2.13 Interest in employment, training or educational activities[14]

	%
Interested in both activities	58.3
Interested in educational activities only	15.3
interested in employment training only	18.1
not interested in either activity	8.3
Total	**100**
n= 72	

Table 2.14 Use of education and employment-related services since becoming homeless

	Used once /occasionally	Used regularly	Used for a while	Total used
Library	19.5	24.1	9.0	52.6
Employment agencies	17.2	13.5	6.0	36.7
Job Centre	18.0	38.3	8.3	64.6
College or University	15.8	16.5	9.8	42.1
n= 133				

Table 2.15 Unmet needs in relation to education and employment

Wanted help, but not received help with:	%
Returning to education	22.1
Seeking employment	16.4
Staying in education or training	13.9
n=122	

2.4 Chapter summary: key findings

- The majority of the women surveyed did not have a partner. It is likely that many of those who did report having a partner (nearly one quarter of respondents) were in relationships with other homeless people.
- A total of 11 per cent of respondents defined themselves as lesbian, bisexual, or 'other' sexuality (including celibate).
- Nearly one third of the 'single' homeless women surveyed (i.e. those without dependent children) were not childless. Many had children not living with them but who they hope to be reunited with once they secure settled accommodation. Yet they were being treated by services and by local authority housing departments as childless women, with no consideration or acknowledgment given to their potential 'family' status
- The survey suggests that homeless women experience educational disadvantage and occupy marginalised positions in the labour market. Levels of educational attainment and economic activity were low amongst respondents, many had experienced disrupted education and the majority were benefit dependent. Respondents were more likely to earn an income or supplement their benefits from begging and the sex trade than from paid employment. Most, however, were keen to pursue educational and training opportunities.

[14] This question was inserted into the survey questionnaire at a later date, hence the low response rate.

3 Housing Situations

This chapter provides detailed insight into the housing situations in which homeless women find themselves. It begins by showing the diverse range of temporary accommodation in which women live, and those which they most commonly rely upon. The prevalence of hidden homelessness is then discussed and the chapter concludes by challenging some common perceptions about rough sleeping.

3.1 Homelessness accommodation situations

Survey respondents were asked to indicate all the housing situations (secure and temporary) in which they had lived. Figure 3.1 presents the various *homelessness* situations[15] in which they had lived or stayed, providing an indication of the types of accommodation homeless women most commonly access or rely upon. The figure shows the following.

- Rough sleeping was extremely common. In fact, more respondents had slept rough (62.2 per cent) than had been in any other homelessness accommodation situation.

- Sleeping rough aside, most commonly respondents relied upon friends for temporary accommodation while homeless (51.1 per cent). Staying with friends was rarely a satisfactory temporary arrangement: respondents seldom had their own room or private space in which to sleep, some were required to leave the property during the day, and most felt extremely uncomfortable 'putting upon' their friends. Such arrangements can also place a strain on those households *providing* the temporary accommodation, an issue rarely acknowledged. If, as this study suggests, many homeless women are staying in the homes of friends then an informal homelessness service is being provided by people across the country, often without the space or financial means to do so, and with a potentially detrimental impact on their own family.

- Although many respondents had also relied upon family members, they were far less likely to have been temporarily accommodated by relatives than by friends. This may reflect apparently high incidences of family conflict. For example, over half of survey respondents reported having very little contact with their family, and nearly one third left their last settled home to escape violence from family members or because family relationships had broken down. Evidence from the in-depth interviews suggests that the limited contact which survey respondents had with their families frequently relates to violence and abuse they had experienced within the home. Consequently, many had no desire to remain in contact with particular family members.

- A relatively high proportion of respondents (21.3 per cent) had squatted as a response to their homelessness situation. This may have consequences for their engagement with services and capacity to escape homelessness: previous research by Crisis suggests that while people squat they tend to lose contact with many services and rarely move on from squatting to more secure accommodation[16].

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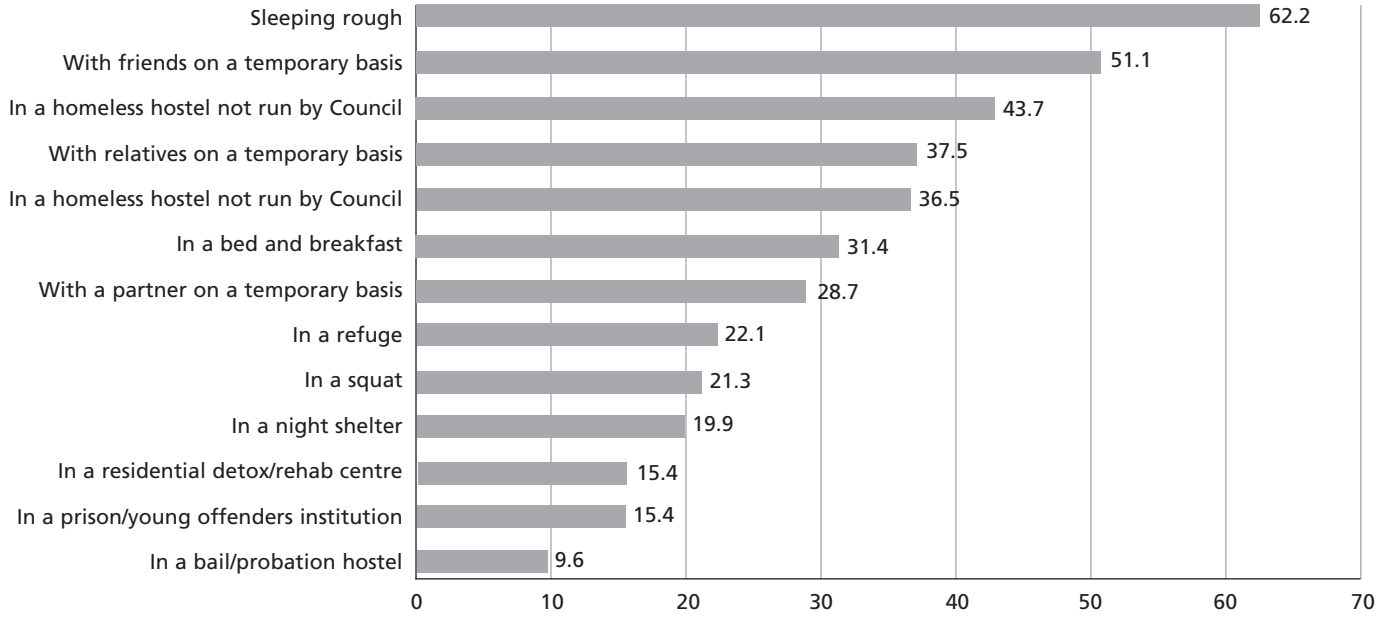
[15] Prisons and residential rehabilitation centres have been included as 'homelessness situations' for the purposes of this study because evidence from the survey and in-depth interviews suggests that respondents very rarely (if ever) had other settled accommodation while they were resident in these places.

[16] Crisis (2004) *Life at the Margins: The Experiences of Homeless People Living in Squats,* Crisis: London

Figure 3.1 The homelessness accommodation situations in which respondents have lived



Percentage of respondents (n = 137)

Exploring the survey data in more detail suggests that very vulnerable women are living in some of most difficult accommodation situations. Care leavers, women with mental ill health and women with dependencies, for example, were all significantly more likely to have slept rough, squatted, and stayed in emergency accommodation such as night shelters and B&Bs than women without these vulnerabilities. The figures which illustrate this point are as follows:

- 43.5 per cent of respondents reporting mental ill health had been accommodated in a bed and breakfast compared with 25.3 per cent of women without mental health issues, and nearly 30 per cent had stayed in a night shelter compared with just under 17 per cent of women without mental ill health.

- Women with mental ill health were also significantly more likely to have slept rough (76.1 per cent) than those without mental health issues (53.5 per cent).

- Care leavers were more than twice as likely to have squatted than women who had not been looked after by the local authority (42.3 per cent compared with 17.6 per cent) and to have been accommodated in a night shelter (40 per cent compared with 16.5 per cent of non care leavers).

- 80 per cent of women who had experienced alcohol dependency and nearly 90 per cent of women who had experienced drug dependency had slept rough compared with 54.6 per cent and 47.1 per cent respectively of women without these dependencies. Similarly 90 per cent of women who had been on probation had slept rough compared to 52.9 per cent of women who had not been on probation.

- Women who had experienced drug dependency were nearly four times more likely than women without experience of such dependency to have squatted (44.2 per cent compared with 11.8 per cent). They were also significantly more likely to have been accommodated in night shelters and B&Bs (38.1 per cent and 53.5 per cent compared with 12.8 per cent and 20.9 per cent of women who had not experienced drug dependency).

The extent to which issues such as dependency and mental ill health make women more vulnerable to staying in difficult and marginalised accommodation situations like rough sleeping or squatting, and the extent to which they *stem from* or are exacerbated by the experience of living in these situations is not clear from the survey data alone. In other words, cause and consequence are difficult to disentangle. Chapter 6 attempts to unpick this further.

Details of the *settled* housing in which respondents had lived were also obtained (see table 3.1). Comparing the figures in table 3.1 with those regarding women's experience of *homelessness accommodation* (figure 3.1 above) reveals, alarmingly, that experience of homelessness accommodation was more common than experience of independent settled housing. More respondents had stayed in hostels and B&Bs, slept rough, and stayed temporarily with friends or relatives than had lived in their own private rented tenancy, and more had experienced hostel accommodation, rough sleeping and temporary arrangements with friends and relatives than had lived in their own social housing tenancy.

It appears then, that life for many of these women has been characterised by homelessness to a far greater degree than it has by settled independent living. Indeed, of the 137 survey respondents providing details of their housing history only 68 reported *ever* having lived in one of the non-homelessness accommodation situations specified in the survey during their adult life. In total over half the homeless women surveyed had never experienced independent settled housing.

Table 3.1 The non-homelessness accommodation situations in which respondents have lived

Settled housing situation	**%**
private rented tenancy/house	33.1
council or HA tenancy	29.4
supported housing for people with mental ill health	9.6
own tenancy with floating support	6.7
Owner occupied	2.9
n= 137	

3.2 Hidden homelessness

Exploring the temporary housing situations in which respondents had lived in more detail suggests that 'hidden homelessness' is extremely common. For the purposes of this study hidden homelessness accommodation situations are defined as those which are provided informally, rather than by housing or service providers and where women are, therefore, effectively 'hidden'[17] – hidden from view, hidden from agencies providing accommodation to homeless people, and hidden from the statistics gathered by these providers about their service users. The survey provided information about the following hidden homelessness situations:

- staying temporarily with friends
- staying temporarily with relatives
- staying temporarily with a partner
- squatting

The vast majority (70 per cent) of survey respondents had found themselves in hidden homelessness situations at some point during an episode of homelessness. Indeed for 64.8 per cent of respondents at least one of the previous four places they had stayed had either been a hidden homelessness situation, or rough sleeping. And we have already seen above that (rough sleeping aside) more respondents had been accommodated informally by friends than had been in any other temporary housing situation.

[17] This is a slightly different definition to that employed by Crisis whose definition also includes people who meet the legal definition of homelessness but have not been provided with accommodation by the local authority.

These statistics do not reveal how many respondents are classed as hidden homeless at one particular point in time – they were asked whether they *had ever* lived in certain accommodation situations – but it does raise the probability that at any given time there are many homeless women staying in hidden, informal, and marginalised temporary accommodation. Once again, the evidence from this study suggests that a significant proportion of the female hidden homeless population are likely to be very vulnerable. Respondents reporting mental ill health, who had been in local authority care, who had experienced domestic violence and other forms of abuse and who had experienced drug or alcohol dependencies were more likely than respondents without these issues and experiences to have stayed in hidden homelessness accommodation situations.

In addition to the hidden homelessness situations identified in the survey, the in-depth interviews revealed a range of other hidden and marginalised situations in which homeless women live. In particular, staying with men with whom women have formed an unwanted sexual 'partnership', or liaison, features alarmingly frequently in the homelessness careers of the women interviewed (see Chapter 5 for further discussion on this issue).

It also became clear that the friends and partners with whom respondents stayed did not always have their own accommodation but were homeless themselves or not yet living independently. Several women reported being sneaked into the hostels where their friends or partners were staying, even if these places did not permit women, and one respondent explained that her partner would sneak her into the children's home where he lived. After a while these women were discovered by the staff but, interestingly, discovery resulted in beneficial outcomes for them. Staff put them in contact with outreach workers and assisted them with securing temporary accommodation of their own. Thus staff in services not specifically targeted at, or working with homeless women were nevertheless playing a pivotal role in assisting them.

We would also suggest that, where women are concerned, rough sleeping is a 'hidden homelessness ' situation. This is discussed in the next section where we point to a number of ways in which common perceptions of rough sleeping might be challenged by the results from this study.

3.3 Rough sleeping: challenging some common assumptions

Rough sleeping is commonly thought as the domain, primarily, of homeless men, and is perceived as the most visible form of homelessness. The survey data, combined with evidence from the in-depth interviews, challenges both these common perceptions.

Rough sleeping is generally thought to be more commonly experienced by homeless men. Fewer women appear in rough sleeper headcounts, fewer are literally visible to passers by, and it is thought that homeless women will somehow find temporary accommodation, keen to avoid the dangers associated with sleeping rough at all cost. Yet, as reported previously in this chapter, over 60 per cent of those surveyed had slept rough at some point during an episode of homelessness. The interview data lend further support to this with a similar proportion of respondents

Rough sleeping is common amongst homeless women: 62.2% of respondents had slept rough

having slept rough, some for relatively long periods of time and on more than one occasion[18]. Respondents had slept in a very wide range of places. These included:

Bus and train stations	Woods and parks
Garages	Car parks
Public toilets	24hr buses
Storage units	Offices and office corridors
Airports	Business parks
Stairwells	Bin bays
By heating vents outside restaurants	Hospitals
Shop doorways	Steps of public buildings

In addition to being associated primarily with homeless men, rough sleeping is also perceived as the most *visible* manifestation of homelessness. However, for many of the women interviewed, this perception is far removed from reality. In fact, very few interview respondents slept in places where they would be seen, or in places which were known (i.e. by services or the general public) to be frequented by rough sleepers, instead finding innovative ways to remain invisible. To some extent, then, common perceptions of rough sleeping, and the conceiving of this as 'the visible face of homelessness' may be based upon a (male) gendered understanding of the nature and experience of sleeping rough.

3.4 Chapter summary: key findings

- Rough sleeping is not primarily the domain of homeless men. In total, 62 per cent of survey respondents had slept rough, more than had been in any other homelessness accommodation situation.
- Many women stay in 'hidden' and marginalised accommodation. The vast majority of the sample had been in 'hidden homelessness ' situations and it was more common for women to have been accommodated by friends than in hostels.
- Many respondents had little experience of settled housing. Respondents were more likely to have lived in homelessness accommodation than in settled housing.
- Very vulnerable women were more likely to live in the most insecure and difficult situations. Care leavers, women with mental ill health and dependencies were all more likely to have slept rough, squatted, and stayed in emergency accommodation such as night shelters and B&Bs, than women without these vulnerabilities.
- Where women are concerned rough sleeping is not the 'visible face of homelessness'. In contrast, respondents tended to choose places to sleep where they would not be seen.

[18] This will not have been skewed by sampling methods. In fact, more women were surveyed and interviewed in temporary accommodation such as hostels than any other type of service (e.g. day centres, soup kitchens or through outreach workers).

4 Homelessness Careers and Housing Mobility

Having highlighted in the previous chapter the types of accommodation situations which women commonly rely upon when homeless, this chapter turns to homelessness careers. Frequent mobility – a common feature of women's homelessness careers – is explored before moving on to highlight the young age at which these careers often begin. Various features of, and influences on women's homelessness and housing careers are then explored, including the role of rough sleeping, the prevalence of repeat homelessness and the ties which bind women to particular geographical areas.

Respondents' pathways through different accommodation situations varied widely from individual to individual but some common themes emerged. These included:

- the prevalence of hidden homelessness situations (discussed in Chapter 3)
- homelessness careers characterised by very frequent mobility, but often within a limited geographical area
- rough sleeping as an 'early stage' homelessness accommodation situation
- the prevalence of repeat homelessness
- homelessness careers beginning before adulthood

We will now explore some of these issues in more detail.

4.1 Homelessness and frequent mobility

It was very rare for respondents to remain in any one accommodation situation for long. Some reported moving every couple of nights for sustained periods of time, particularly when they were relying on friends for temporary accommodation. Rough sleepers were also prone to frequent moves, rough sleeping often being interspersed with a night or two spent with a friend, in a night shelter or a B&B.

Respondents' housing histories suggest that a varied homelessness career is not associated solely with 'long-term' homelessness. Rather, a significant number of accommodation situations can by condensed into a short period of time early in a homelessness career. Some interview respondents in the early stages of homelessness, for example, had moved many times in the first month after becoming homeless, while women homeless for far longer had not always moved through significantly more situations. Early-stage homelessness accommodation situations were wide ranging, comprising rough sleeping, hostels, B&Bs, and staying with friends, partners or family temporarily, whereas women who had been homeless longer appeared to have a more limited range of options. In particular, there seemed less scope for them to stay with family, possibly because relationships had become strained during previous visits.

Of course homeless women rarely have any choice but to move from one temporary situation to another – situations which are, by definition, time-limited: friends and family request that their homeless guest leaves, only able or willing to accommodate them for short periods of time; night shelters and hostels can have specified time limits; women are evicted from squats; they are discharged from hospital and released from prison; women provided with temporary accommodation by a local authority while their homelessness application is being assessed have to leave if they are

not awarded priority need or are deemed intentionally homeless; and local authorities funding emergency places for respondents in B&Bs would reportedly only do so for a couple of nights.

However, sometimes women do choose to leave temporary accommodation in which they could remain. Respondents reported great unease about 'putting upon' their friends and relatives and were conscious that however willing friends or family members were to assist them, they often had neither the space nor the financial means to accommodate and provide facilities for an additional household member. Keen not to outstay their welcome, there were many instances where respondents left before they were asked to. A survey respondent made some additional comments along these lines, explaining that *'Friends say they don't mind you staying ... and you're very grateful but the point is <u>you</u> mind staying'.* Women did not want to inconvenience their friends and family or be a burden to them. Thus one woman, staying with her sisters and struggling with alcohol dependency, explained that *'I wasn't asked to leave but it was, erm, I thought it was better to leave because it was putting a strain on my sisters.'*

The woman quoted above went on to raise an additional problem associated with relying upon friends for accommodation, suggesting that staying with friends is incongruent with the dynamics of friendship – these relationships being premised upon equality. She said:

> *"it's stressful and upsetting* [staying with friends] *and not like being your normal self but if you say this you appear ungrateful. The balance of equality shifts and you can't be yourself."*

Some women responded to this by making efforts to rebalance relationships which had become 'unequal' by virtue of their reliance on a friend for accommodation. Working for friends free of charge, helping out in the house, and providing substantial childcare are just some examples of respondents' attempts to provide something of equal value to that which they were receiving.

Women also made strategic decisions to leave the homes of friends and family in order to protect this as an option for the future. They reasoned that by leaving before they had outstayed their welcome, or before relations became strained and the friendship soured, they were more likely to be welcome again in the future.

Other reasons provided by respondents for 'choosing' to move from one homelessness accommodation situation to another included:

- financial constraints, for example no longer being able to afford their hotel or bed and breakfast accommodation, or not being able to afford hostel accommodation while working and wanting to move before arrears accrued
- needing to move regularly so as to avoid being 'found' by violent ex-partners or other parties from whom women were fleeing
- to avoid the upset and upheaval of moving from a place in which women feel settled when the time limit on that accommodation is reached. Thus one woman explained that *'If they keep you there longer and you get settled and they then turn round to you and say you're leaving you've got upheaval.'*

Frequent moving is typically conceived as problematic and the number of moves some respondents had made during their homelessness careers certainly indicates very unsettled lives. Frequent moving is also indicative of problems accessing (and limited availability of) more sustained temporary accommodation such as hostels. Indeed, exploring the reasons why survey respondents left the last four places in which they had stayed suggests that few moves are made for positive reasons. Respondents had 'reached the time limit' of their temporary accommodation, funding had ceased to be available for them to remain there, they were asked to leave or were evicted, could no longer afford the accommodation or, on occasion, had been taken into custody or hospital.

However, it is important to remember that moving *can* represent a positive step into more appropriate temporary accommodation. One obvious example is where women move from sleeping rough into some form of temporary 'housed' provision but many other examples were also identified. For example, women moved from emergency accommodation such as night shelters and B&Bs into longer term hostels. They moved from informal accommodation with friends and family, or from other hidden homelessness situations such as squatting, into provision where staff were available to assist them. And women who, through desperation, had accepted places in hostels or shelters which were inappropriate for them, moved into more suitable hostels. On the last of these points, this included ex-drug users moving from hostels and shelters where drug using was prevalent (and therefore tempting) into drug-free environments, and women wary or fearful of sharing accommodation with men moving from mixed sex provision into women-only hostels.

4.2 Young 'runaways' or homeless women?

Homelessness is generally associated with adulthood. It is conceived as a situation in which adults find themselves, and as an experience of adulthood. 'Homeless children' are those whose parents are homeless – i.e. they are only homeless by virtue of their relationship with the homeless adults with whom they live. Children who leave the parental (or guardians') home, meanwhile, are not referred to as homeless, but as 'young runaways'. This is certainly an accurate description – homeless children are those who have run away from home – but the variable terminology applied to adults and children imposes a distinction which does not acknowledge homelessness experiences amongst those under the age of 16.

Yet, the housing and homelessness careers of the women interviewed for this study revealed that many first became homeless before the age of 16, and that their experiences and situations did not differ in any significant respect from homelessness experiences encountered later in life: they left home to escape unbearable situations, just like many adult homeless women do; they were asked to leave the parental home just like many respondents over the age of 16 were; and they stayed with friends and family members (usually older siblings) or slept rough just like many adult women do.

More than one in four interview respondents described times during their childhood when they were homeless. The situations whereby they experienced homelessness ranged from regularly running away from home (family home, children's home or foster care), sometimes for weeks on end, but subsequently returning, to permanently leaving home, often to escape abuse (sexual, physical and mental). Where respondents had not been suffering abuse in the home their relationship with their parents or guardians had usually been so conflictual that the respondent no longer felt able to live there. Alternatively, they were so neglected by drug or alcohol dependent parents that they could bear the situation no longer. In the words of two women:

> *"Well I prefer to be homeless than having so much hell with my dad and that, I was getting raped and that so I just moved straight out ..."*

> *"I don't think I have ever had a settled home you know, I don't think I've ever had one cos when I were at me mum's it weren't settled cos I were running away."*

More than 1 in 4 interview respondents had experienced homelessness before the age of 16

A crucial distinction between adults and children is that homeless women under the age of 16 have far fewer options, unable to access most homelessness services and temporary accommodation because they are not yet old enough. The most vulnerable young women – vulnerable by virtue of their age, and the traumatic childhoods they are escaping – are, therefore, also those most likely to be 'hidden homelessness', to be disengaged with homelessness services, and to fail to access safe temporary accommodation. As one woman who became homeless before the age of 16 so succinctly put it:

> *"the sad thing was that I often found myself in a much more dangerous situation for having fled the situation that I saw as dangerous".*

4.3 Rough sleeping: an 'early stage' homelessness accommodation situation

Episodes of rough sleeping fell at any and all points in respondents' homelessness careers. Indeed, periods of time spent in hostels, in interim temporary accommodation, or with friends were frequently interspersed with sleeping rough, often just for a night or two but sometimes for considerably longer. Some women were clearly entrenched in rough sleeping, their last accommodation a distant memory and little evidence that they were likely to seek a roof over their head in the future. For others, sleeping rough represented a very short-term situation of last resort.

However, it was notable that rough sleeping was the *most frequently* cited accommodation situation in which interview respondents stayed on first becoming homeless. Any notion that women have a series of other options which they move through and exhaust before resorting to rough sleeping, then, is not born out by this research. This is unlikely to reflect an active choice amongst homeless women to sleep rough over other options. Very occasionally temporary accommodation was deemed so unsuitable that respondents reported a preference for rough sleeping – for example if this involved staying with violent ex-partners, abusive relatives, or in mixed night shelters where women had previously been assaulted – but in the main it was a situation which respondents avoided at all costs. That respondents most commonly slept rough on becoming homeless is very likely, therefore, to reflect a complete lack of other options at this point in their homelessness careers. Why this should be the case is not entirely clear but two other findings to emerge from the research may cast some light.

Firstly, many interview respondents were completely unaware of the services available to assist homeless people when the first became homeless. For example:

> *"I didn't know there were agencies to help. I didn't think about it at all. I wasn't aware that anyone could help"*

> *"I didn't really know what the options were. I didn't know that you could go anywhere else"*

Secondly, exploring the ways in which interview respondents developed their knowledge and awareness of services suggests that other homeless people are frequently a source of information. Women in the early stages of homelessness are far less likely to have built friendships and acquaintances with other homeless people. In the absence of knowledge, and if friends are unable to accommodate temporarily, women in the early stages of homelessness may have no option but to sleep rough.

4.4 Repeat homelessness

All the women participating in this research were currently homeless. Tracing back their housing careers, however, did not concentrate solely on their housing histories since leaving their *last* settled accommodation but on all the situations they had moved through since leaving the 'parental' (or guardian's) home, or prior to this if women indicated they had experienced homelessness in childhood. This allowed incidences of repeat homelessness to be identified.

Table 4.1 Prevalence of repeat homelessness

Number of times homeless before this time	**%**
Once	5.6
Twice	14.3
Three times	4.8
Four times	3.2
Seven times	0.8
11 times	0.8
15 times	1.6
Many times	6.3
Several times	1.6
On and off	2.4
Been homeless before but number of times not specified	7.9
Total respondents who had been homeless before now	**49.2**
Never been homeless before	**50.8**
Total	**100**
n= 126	

This exercise revealed that episodes of homelessness were frequently interspersed with settled housing. Repeat homelessness was, therefore, extremely common. Indeed for some, settled accommodation was part of a long *homelessness career*, a key feature of which was unsustained tenancies[19]. In other words, settled accommodation can be an exception in a housing career otherwise characterised by homelessness, rather than vice versa.

The survey data suggest similarly that obtaining settled accommodation is no guarantee that a woman's homelessness career is at an end. Nearly half the women surveyed had experienced at least one previous episode of homelessness, some had been homeless on 15 prior occasions, and a few had been homeless so many times that they were unable to provide an accurate figure (see table 4.1). Looking just at the last four accommodation situations in which survey respondents had stayed, over one in ten had moved from homelessness to a non-homelessness situation but then back again to homelessness. It is also noteworthy that although settled accommodation featured in many respondents housing careers, very few secured non-homelessness accommodation within the first year of being homeless, perhaps reflecting the length of social housing waiting lists as well as limited knowledge during these early months of the services available to assist women in resolving their homelessness.

[19] All respondents were homeless so the non-homeless situations they had lived in had not, by definition, provided settled housing. Research with ex-homeless women may find that many follow a more straightforward career where homelessness is following by settled housing and no further episodes of homelessness. Nevertheless, the prevalence of repeat homelessness amongst women participating in this study was striking.

4.5 Geographical ties

Many women had ties to particular locations and their accommodation options and housing mobility were, therefore, geographically bounded. The majority had not moved far from their last settled home and were keen to remain in their current area of residence. The exceptions were those fleeing domestic violence or other forms of abuse, for whom distance between themselves and their abuser was a priority. There was also some evidence of women who became homeless in rural areas travelling to larger towns and cities in order to access the homelessness provision available there.

Like any women, respondents reported attachment to the places where they grew up or had lived in for many years. The familiarity of the surroundings, knowing the local area and remaining close to friends and family were all important influences on women's decisions, and desire, to remain 'close to home'. Thus, although frequent mobility was a common feature of respondents' homelessness careers they rarely moved far.

Conflictual relationships between respondents and their families (particularly parents and step-parents) were commonplace. Many respondents had suffered abuse and neglect at the hands of family members and had severed ties with them. Others had a long history of conflict with parents or guardians, sometimes arising from their own behaviour (for example drug or alcohol abuse or offending) and sometimes from the behaviour of their parents. These relationships and conflicts were complex and multi-faceted but, whatever their nature, had resulted in limited contact between respondents and particular family members. Nevertheless, familial ties of some kind were extremely important to many of the women interviewed – ties which bound them to particular geographical locations. This included:

- women who had severed links with particular family members (for example parents who abused them) but remained close to other family members such as a grandparent or sibling. These relationships were of immense importance to women whose family experiences were otherwise wholly negative or traumatic, particularly as these relationships now represented their only familial ties.
- women whose relationship with a parent had broken down while they were living at home but who were keen to rebuild and sustain that relationship.
- women keen to remain in close geographical proximity to their children. Some respondents had children who were temporarily being cared for by the local authority, by foster parents, or by other members of the family. Seeing their children and retaining contact with them relied upon living near by. Thus one woman, whose son was being cared for by her mother, talked about the decision she made to accept one offer of temporary accommodation over another explaining that the *'... Foyer's closest to me mum's.'* Similarly, when asked about her preferences for settled accommodation she said that '*it would need to be near my mum's.'* Some of these women hoped to regain custody of their children once they had secure accommodation and so sought to stay in the area where their children were currently living. Indeed, children invariably played a significant role in the accommodation decisions taken by many of the women we spoke to.

4.6 Chapter summary: key findings

- Frequent mobility is a key feature of women's homelessness careers. Even respondents in the early stages of homelessness had often moved many times and through a range of accommodation situations. Rarely was this a product of active choice. Rather it reflected the very temporary nature of many homelessness accommodation situations, the inability of friends and family members to accommodate guests for long, the scarcity of medium-term hostels, limited funding for B&B placements, and strict time-limits of some hostels and night shelters. Moving can, however, represent a positive step particularly when women move from rough sleeping, from emergency provision or from inappropriate accommodation into more settled and appropriate accommodation.

- Women's homelessness careers often began before they reached adulthood. Over one quarter of respondents had first become homeless before the age of 16. Yet homelessness services and temporary accommodation are rarely available to these young women. Very vulnerable women – vulnerable by virtue of their age, and the traumatic childhoods many are escaping – are therefore most likely to stay in hidden homelessness situations, to be disengaged from services and unable to access temporary accommodation.

- Rough sleeping was the most commonly cited situation in which women found themselves on becoming homeless for the first time. This is very unlikely to represent a preference for rough sleeping over other options and more likely to reflect a complete lack of other options combined with limited awareness of homelessness services amongst those experiencing their first episode of homelessness.

- Repeat homelessness was very common. Nearly half of the women surveyed had been homeless on at least one previous occasion and many had experienced homelessness several times.

- Like anyone else, homeless women have ties to particular locations. They are attached to the area they grew up in and are familiar with neighbourhoods they have lived in for many years. They have familial networks in particular neighbourhoods and some have children who they wish to remain close to. These are important influences of women's housing choices and their patterns of mobility.

Self service

5 The Causes and Consequences of Homelessness

Any attempt to clearly identify and establish the particular (or primary) 'causes' of homelessness is, inevitably, doomed to fail. Homelessness is rarely the consequence of a single event, action or issue but is the culmination of a complex range of experiences and events which together bring women to the point of losing their accommodation. Individuals' own actions and vulnerabilities, factors external to them, their capacity to cope with presenting problems, the presence or absence of support networks, and the resources women have (or do not have) to draw upon all influence their housing trajectories. Moreover, having lost their accommodation, a further set of factors hinder women's capacity to *avoid* a homelessness outcome by securing alternative housing. After all, ultimately, homelessness is 'caused' by an inability to secure housing following the loss of one's current accommodation.

That many of the issues and vulnerabilities which homeless women face can both *contribute to*, and *stem from* homelessness further muddies the waters. The extent to which a woman's drug using, for example, results in her becoming homeless and the extent to which it is a means of coping with the experience of homelessness is not always clear. And whether the apparent prevalence of mental ill health amongst homeless women indicates an increased vulnerability to homelessness amongst those with mental health issues, or an increased likelihood of developing mental health problems amongst those who are homeless is, similarly, far from clear cut.

This chapter attempts to unpick some of these complexities and build a picture of the multi-faceted, and often inter-related, circumstances and experiences which culminate in women becoming homeless. It begins by outlining, in a relatively descriptive fashion, the reasons respondents provided for leaving their last settled home (i.e. becoming homeless). In doing so it highlights some common 'triggers' of homelessness before moving on to explore those issues underpinning the more immediate events which tend to precede an episode of homelessness. Finally, we point to some of the adverse consequences and impacts which homelessness has on many women.

5.1 The causes of homelessness: 'triggers' and trauma

5.1.1 Homelessness triggers: the immediate 'causes' of homelessness

Table 5.1 shows that a breakdown in women's relationships with their family emerged as the most common 'cause' of homelessness amongst survey respondents, with more than one quarter having left their last settled home for this reason. This figure rises very sharply to 56.8 per cent of women under the age of 21, unsurprising given the likelihood that for many women of this age their last settled home will have been the parental home.

Table 5.1 Reasons for leaving last settled home

	%
Relationship breakdown - family	26.1
Fleeing violence/abuse - partner	14.2
Evicted (no reason provided)	7.5
Fleeing violence/abuse - family member	6.0
Evicted/repossessed - arrears	6.0
Relationship breakdown (no abuse) - partner	6.7
To move into another situation	3.7
To enter an institution	3.0
Abandonment	3.0
Released/discharged (from an institution)	2.2
Harassment	2.2
Relationship breakdown-friend	2.2
Employment related	1.5
Reached time limit	1.5
Other	14.2
Total	**100**
n=134	

Domestic violence was the second most commonly cited cause of homelessness with over 14 per cent of respondents having left their last settled home to escape violence from a partner. The overall proportion of women who had become homeless as a result of violence was far higher, however, with over 20 per cent having left their last settled home because they were experiencing violence from someone they knew – whether a partner, a family member, or, in a couple of cases, local people such as drug dealers from whom women were fleeing. For women aged 41-50, domestic violence was the most common trigger of homelessness with 40 per cent of women in this age group reporting that they had left their last settled home to escape violence from a partner[20]. Homelessness following eviction/repossession for rent or mortgage arrears, meanwhile, was most common amongst women over the age of 30.

The relatively high proportion of women who pointed to 'other' reasons for leaving their last settled home reflects a tendency amongst respondents to answer this question in terms of the *underlying* factors contributing to their homelessness – an issue to which we will return shortly. For example, women cited 'other' reasons such as *'because of drugs', 'alcohol abuse'*, because of *'my mental health issues'* and one attributed her homelessness to the death of her partner.

5.1.2. The underlying causes of homelessness: traumatic life experiences

The circumstances under which interview respondents had become homeless chimed with those reported by survey respondents. Violence from partners, abuse from parents, separation, family conflict, and eviction for rent arrears were all commonly cited reasons why women had left, or lost, their last settled home, and very few women serving custodial sentences had managed to retain their settled accommodation whilst in prison.

[20] Some respondents had been homeless for many years and so may have fallen within a different age group at the point they lost their last settled home.

However, interview respondents were able to explain in more detail the precise events leading to their homelessness, revealing that the immediate 'triggers' of homelessness mask a host of underlying issues, experiences and processes, all of which influence the likelihood of a homelessness outcome. Women become homeless because they are evicted from their property due to rent arrears, for example, but the circumstances leading to the accrual of rent arrears are many and varied. Women become homeless because their relationship with their parents has irretrievably broken down, but family conflicts are multi-faceted, complex, and have long histories. One woman's description of her trajectory into homelessness demonstrates clearly how the 'trigger' (in this case eviction for nuisance behaviour) was in fact underpinned by a train of events, and a multitude of issues and difficulties, which began with the death of her child:

"I had my own flat…which I got from the council…what happened was I got really like depression, coz my baby died and I got depressed, so I went onto drugs and stuff, and then obviously I couldn't handle being in the flat because there were different people coming in every day and all kinds of stuff, and then I got evicted for being a nuisance"

Identifying those events which trigger an episode of homelessness is certainly important – these are critical times when intervention could prevent a homelessness outcome – but efforts to address and prevent homelessness more generally require a far more detailed and nuanced understanding of the underlying issues, needs, vulnerabilities and processes which culminate in a homelessness experience.

Examination of respondents' trajectories into homelessness made clear the links between their life experiences and their subsequent homelessness. Indeed women's homelessness could often be traced back to very particular, and traumatic, experiences, events, or periods of time. Typically these were:

- sexual abuse
- neglect, abandonment and other family problems
- reproductive health issues and the loss of children
- experiences of violence
- bereavement

It is important to stress that clear links could be established between these various life experiences and women's homelessness. Indeed it was often articulated in these terms by respondents themselves. In other words, these were not mere coincidences, with causal relationships imposed upon them. These traumatic experiences did lead, sometimes via a long chain of events, to women becoming homeless.

Drug or alcohol dependency also emerged as a significant contributory factor in women's homelessness but, again, dependencies tended to result from the kinds of traumatic experiences listed above. Very few respondents 'just got into it'. Rather, many started using drugs or drinking excessively at a particular point in their lives when the anaesthetic these substances provided offered welcome relief from emotional and psychological distress. And again, respondents did articulate their drug and alcohol use in these terms. 'Helen', whose three children had all died at birth, described the circumstances leading to her dependency on crack cocaine:

"Every time it had got to the same point and then my waters would break, I'd give birth and the child'd be dead and I just couldn't handle it any more…..I didn't even know what crack was like or anything but I knew people that did it so I just went out of my way to find people that did it and…just started taking it. Cos I just couldn't handle the pain any more"

And 'Juliet' explicitly linked the onset of alcoholism with abandonment by her mother:

"From the age of 14, I had my first addiction which was alcohol…My mum went on holiday and said she was going away for six weeks and six weeks later sent us a telegram saying she wasn't coming back. We was all on our own, me and my two brothers. I was 14, my brother was 13 and my younger one was 10. So I was taking care of my brothers….we all flipped, we all went mad…looking at it now. I went off started drinking, my middle brother killed someone and then my younger brother…ended up having a big fight, lost his contract and set fire to his school… I was just acting out, big time, and I had a lot of hate for her".

Once dependent on drugs or alcohol, sustaining a tenancy becomes very difficult. Young women still living at home are thrown out by parents at the end of their tether, financial priorities lie with obtaining drugs and alcohol rather than paying the rent or mortgage, and nuisance behaviour resulting in eviction can follow. Indeed both Juliet and Helen became homeless shortly after the period of time they described in the quotes above.

As this discussion about the relationship between traumatic life events, drug and alcohol abuse, and homelessness (often in that order) indicates, it is very difficult to disentangle the various problems, experiences and issues which homeless women face. Put simply, they are so inter-related it is virtually impossible to discuss (or indeed tackle) any particular issue in isolation. Indeed respondents themselves, when asked for their views on the cause of their homelessness found it very difficult to isolate one particular factor. Thus, in the first quote below we find bereavement, sexual abuse, alcoholism, conflict with and rejection by a parent. In the second we find alcohol abuse, sexual abuse and a suicide attempt:

"It's difficult to pinpoint…Heavy drinking was one contributing factor….Yeah, I find with the drinking, and, er, my father died, and just a whole load of different other factors……cos I was being abused, and I was getting drunk all the time, and I'd 'ad a fucked up life. My dad just died, my mum's just kicked me out. This woman and this man were doin' stuff [to me] *as well"*

"Me getting drunk all the time. Cos, erm, things were goin' on, like my granddad was sexually abusing' me and she [mother] *didn't know it. That's why I got kicked out. Cos I just tried to kill myself"*

The kinds of traumatic situations listed at the start of this section were often (but by no means exclusively) experienced in childhood. Indeed it was striking that the vast majority of the women interviewed who provided information about their childhood described some kinds of troubled, traumatic, or difficult early years. This was often at an extreme end of the spectrum – persistent sexual abuse by family members, abandonment by parents, and horrific levels of violence. One woman described being taken into the care of the local authority at the age of eight because of abuse at home only to find herself subject to further abuse in the children's home:

"They put me in…children's homes with loads of boys an' all, and I got sexually assaulted a few times in children's homes by some of the boys…they were like 13, 14, 15 year old lads and they, once they locked me in there they all had a go at me."

Unsurprisingly, she regularly ran away from the children's home, sleeping rough at the age of nine and finally leaving altogether at the age of 14. With the exception of a short period of settled accommodation in late adolescence she has been homeless ever since. She has a heroin dependency, sleeps rough for weeks on end and works as a prostitute. She is now 27 years old. Many others had also been victims of sexual abuse – abuse from parents, other family members and friends of the family – while other women reported physical and emotional neglect by their parents, and others described the violence they had encountered in childhood:

"I was abused, not by my mum, well I was physically abused by my mum, but I was also sexually abused by a family member and a friend of hers when I was young."

"I think really it was just about being very fearful about what was going to happen next and violence, fear of violence, yeah because that's when I used to do most of my running away…it was a very dangerous world that I wanted to escape."

These early experiences were related to women's subsequent homelessness in various ways: some ran away from, or left home to escape these situations, becoming homeless at that point; others turned to drugs or alcohol and subsequently lost their tenancies due to arrears or anti-social behaviour: others developed depression and other mental health difficulties which made it difficult for them to sustain tenancies; and others were so emotionally scarred by their experiences that they, quite simply, could not cope with running a home. Many were labelled as 'having gone off the rails' or 'wild' because of increasing anti-social behaviour (often involving drugs or alcohol) when in fact this behaviour was a response to traumatic experiences. Having been labelled as troublesome or anti-social, however, help (from family and friends as well as service providers) was less forthcoming and opportunities to resolve their homelessness limited further still.

Of course women experience trauma in adulthood also. Respondent's talked in particular about the domestic violence they had experienced, often over many years and from a series of partners, describing *'beatings'* and threats to their life as well as mental abuse. There was no question for any of these women of persuading their partners to leave and few had the financial resources to rent or buy alternative accommodation. The choice they faced was between homelessness and violence. Eventually they chose homelessness. Thus one woman commented that *'I'd rather live on the streets than ever live with him again.'*

It became apparent from respondents' life histories that women who experience domestic violence remain at risk of homelessness long after they have left their partners. Some had escaped violent relationships and (usually after a period of homelessness) moved into settled accommodation. Yet they continued to be at risk of homelessness and indeed experienced subsequent episodes of homelessness as a direct result of these relationships. One woman, for example, had left her violent partner, embarked on a new relationship, and the two of them had taken a tenancy together. However, her ex-partner discovered their whereabouts, was violent towards them, threatened to kill her new partner and his family and eventually they had to abandon their new home, making themselves homeless in the process.

It will already have been noticeable from some of the examples provided above that reproductive health (miscarriages, still births and so on) can impact severely on women's lives. The way in which these distressing events ultimately result in homelessness can be far more subtle than the links between, for example, drug dependency and homelessness or domestic violence and homelessness. In the case of drug users their route into homelessness can be quite clear – they fail to pay their rent because they are funding a drug habit and are evicted for arrears, or their property is 'taken over' by associates and the woman is evicted. Women experiencing domestic violence, meanwhile, leave their property in order to escape the situation and become homeless in the process. The experiences of women whose homelessness could be traced back to reproductive health issues (including difficulties conceiving), in contrast, demonstrate that relationships between women's traumatic life experiences and subsequent homelessness is at times far more subtle. Traumatic experiences can prompt depression and affect women's ability to cope – with their home and with their life. The two women quoted below simply abandoned their homes. In both cases the root cause was reproductive health issues:

"I had a flat when I was about 19…and I were pregnant wi' twins and I ended up losing them [miscarried] *and I got really depressed and that, and I just put the key through the door and walked off…I didn't get the help I needed."*

"started to get control of my life, worked, went to college… Then I got engaged to this guy, we started setting up home together but then I was trying for another baby and…kept losing babies. [It affected me] *big time, cos I was desperate to have a baby…..I made myself homeless because the place,….I was really depressed, really really depressed and started using and, erm, I couldn't live in that home, couldn't live there….left everything in the house."*

5.2 The impact and consequences of homelessness

Notwithstanding the complex interrelatedness of distressing experiences, homelessness, drug and alcohol abuse, traumatic childhoods, and the difficulties disentangling cause from effect where these issues are concerned, there were many ways in which homelessness could be seen clearly to impact on respondents' daily lives and on their physical and emotional health and well-being.

The women interviewed pointed to many *general* ways in which their homelessness impacted on their lives, particularly when contrasted with living in settled housing. They talked about homelessness bringing with it a loss of privacy, for example in their living conditions, about the lack of choice and control they had – over where they lived, who they lived with, when they ate, whether they had friends to stay with them and so on. They talked about the loneliness they felt on a daily basis, and of the difficulties retaining their pre-homelessness social ties and friendships. However, women also pointed to specific practical impacts of not having a permanent address and of being constantly on the move. And finally very damaging consequences of women's homelessness situations could clearly be discerned, consequences severely detrimental to their health and well-being.

5.2.1 The consequences of frequent moving

Constantly being on the move – from one place to another, one type of accommodation to another, and one temporary situation to another – was extremely disrupting and women commented on the strain they felt as a result. Having to leave places they had become familiar with, having to get used to new places, new surroundings, new rules (for example in hostels) and new co-residents all took their toll. As several explained:

"That's the worst part. There's like movin' and movin' and movin' and 'avin' to leave that place, you've got attached to that place and you've got to bloody move again and you might not like this place..."

"I'm hoping my situation is temporary and I know I'm lucky to have friends helping plus savings etc. BUT the sheer strain of moving from friend to friends, always in their space." (additional written comments provided by a survey respondent)

The woman quoted directly above went on to highlight the more pragmatic difficulties associated with frequent mobility explaining that '*trying to keep track of post etc makes it really hard to stay on top of everyday life'.* Interview respondents expanded on this and it became clear that something as simple as not having a long-term address could have far reaching consequences. Although claiming benefits, for example, is not dependent upon having a permanent address (it is possible to sign on as 'no fixed abode' and collect giros in person from the benefit office), in practice this is apparently preventing some women from receiving the benefits to which they are entitled. Thus one woman explained that having become homeless she ceased to claim benefits because she *'ad no, like, address for my Giro to come to or anything.'*

It is also likely that women are missing out on potential housing opportunities for similar reasons. Women who are homeless make applications for housing. They apply as homeless to the local authority, they put themselves on the waiting lists of housing association and supported housing projects, they contact hostels and other temporary accommodation providers with their details and circumstances should spaces become available. And to each of these they provide their current temporary address (if they have one). However, the time it takes for these applications to be processed and assessed, for decisions to be made, for places to become available can be considerably longer than the short amount of time homeless women are able to remain at one address. We will see in Chapter 7, for example, that many respondents who had applied to the local authority as homeless had no idea of the outcome of their application. We do not know for certain what happened to these women's applications but it is certainly probable that decision letters were sent to addresses which had quickly become out of date.

The effort and time required to obtain accommodation (whether the next temporary stopping place or permanent housing), combined with the uncertainty of their situation, posed too large a barrier for many respondents to sorting out other aspects of their lives. Indeed the perception of the homeless population being time-rich does not chime with the responses of many of the women interviewed for this study:

> *"I haven't had that chance to be in a place where I can just forget about the housing problem and get on with a proper life."*

> *"See how much money I could be earning and I'm not able to do it because I've constantly got housing problems."*

Women were very keen to embark on education or training courses, to secure employment and to concentrate on what the woman above described as 'proper life' – on their relationships, leisure activities, careers, hobbies, friendships and so on. But the 'full time job' of resolving their housing difficulties – of arranging the next move, of seeking out housing opportunities, of attending appointments with housing providers, of filling in applications, and of compiling the information and documentation required by housing providers – simply prevented many from doing so.

5.2.2 Health and well-being: the physical and psychological impacts of homelessness

Women reported a wide range of physical health problems, sometimes resulting in hospitalisation, including septicaemia, cysts and blood infections, malnourishment, exhaustion, anaemia, swollen and blistered feet amongst many others. All these were reported by respondents to be a direct result of their homelessness. Often without enough money for food, living in stressful conditions, spending much of their time in the cold and with disrupted sleep patterns, poor health is almost an inevitable consequence. Indeed it was of interest that a very high proportion of the women surveyed reported use of Accident and Emergency departments since becoming homeless (42 per cent).

Physical health problems can be associated with particular accommodation situations. Not surprisingly, rough sleeping correlated closely with poor physical health. Exploring the correlations between one woman's housing situations and her health, for example, revealed that each period of rough sleeping was accompanied by a noticeable deterioration in her health. Even when she was living in a squat, having a roof over her head and an address from which to register with a GP produced health improvements.

It was the impacts of homelessness on respondents' *mental* health and well-being, however, which appeared to concern them most, with suicide attempts and suicidal thoughts relatively common. We mention elsewhere in this report a woman who researched ways of committing suicide because she deemed this a preferable option to rough sleeping (see section 6.2) and several others talked about the desperation they felt whilst homeless in suicidal terms.

For example:

"I was suicidal. I felt my choices were to die or put up with it. I didn't really feel that I had any power or any rights."

"I feel like dying..[but] *I just can't seem to kill myself...I used to always hope that something'd happen to me and then...even now, no matter how much drugs I take nowt happens. And I used to take loads of overdoses…buy paracetamol, or there's always someone that's got tablets."*

The first quote above illustrates that suicidal thoughts or tendencies do not stem merely from difficulties coping with the *situation* of homelessness but also from the psychological sense of powerlessness that it brings.

Thus homelessness can result in a deterioration of mental health - the onset or intensifying of depression, suicide attempts and other mental health issues were common. However, homelessness can also impact more subtly on women's mental health – affecting the way they perceive themselves, their sense of self-worth (or lack of), and their self-identity. Much of respondents' lives whilst homeless revolved around attempts to retain their 'pre-homeless' identity - to retain their pride and sense of self worth. When faced with particular situations women would try and 'act' in the way they would if they weren't homeless and the small choices they made in their daily lives reflected a need to do this. Thus, women reported going hungry rather than eating food from dustbins because the psychological effect of doing so would be too much to bear. One women explained that no matter how desperate she was for a smoke she would never pick up cigarette ends from the floor. Another refused to accept money from strangers and only did so once, at Christmas-time when she felt she could *'justify it….because it was Christmas eve if was like a present, you know?"* And women's expressed need to bathe everyday and keep clean and presentable was closely associated with this. However, despite these efforts, many respondents talked about themselves in derogatory terms, pointing to the ways in which homelessness had impacted on their psychological well-being.

"I lost my soul. I didn't have any personality, I was just another bum on a street corner asking for some change. And that's how I felt in myself."

"I didn't really care what anyone thought of me because all I saw myself was such a piece of shit that you couldn't possibly think better of me."

5.2.3. Drug and alcohol use as a coping strategy

Many of the women interviewed started taking drugs or drinking as a means of coping with the experience of homelessness, or their drug use and alcohol consumption escalated. Several women explained that the only way of coping with the kinds of temporary accommodation they had to live in, with sleeping on the streets, and with the cold, was never to be sober. For example:

"the only reason you do use drugs coz you go in these places, like this place that, you know, when you're living in shitty 'ostels and you've had a fucked up life and there's not the support out there…I couldn't live without drugs, not while I was livin' in places like that [B&Bs] *with those people around me."*

"….not being on drugs it's a lot harder [being on the streets]*…. I was literally losing it, I'd just had enough, I was getting drunk every night just to stay warm, and I don't drink you know. And buying brandies and stuff and I didn't want to get into that habit."*

5.2.4 Sex work and other unwanted sexual liaisons

This study identified many examples of women engaging in unwanted sexual activity as a means of accommodating themselves. Exploring the various ways in which respondents engaged in sex work revealed this to be a complex issue, incorporating many different types of unwanted sexual liaisons (from ongoing relationships to temporary financial 'transactions') engaged in for a wide variety of purposes, often, but not always, directly associated with obtaining accommodation.

A number of interview respondents were either currently working, or had previously worked as prostitutes and in related sex industry activities such as 'clipping'[21] or 'bringing in' clients for other prostitutes, and did so in order to secure an *income*, rather than to secure *accommodation*. Some of these were drug users requiring funds not available through other means to finance their dependency and tended to engage in sex work during housed, as well as homelessness episodes in their lives. In these cases, sex work was certainly related to women's homelessness – they found it more difficult to address drug dependencies while homeless so needed to continue with sex work, some had become entrenched in a lifestyle intrinsically linked with their homelessness, some found it so difficult to claim benefits while homeless that sex work was their only way of obtaining money, and so on – but the *primary* purpose was to obtain funds, rather than accommodation. However, this was by no means always the case and there was clear evidence that many women were engaging in some form of unwanted sexual activity primarily or solely in order to accommodate themselves. In the words of one respondent, sex effectively becomes 'currency'. Five different forms of unwanted sexual liaisons were identified, each quite distinct but all involving an 'exchange' of sex for accommodation, sometimes mediated by money but usually not.

1 *'Picking up' men and spending the night with them.* This was perhaps the most common way in which women engaged in unwanted sexual activity in order to access accommodation and respondents were quite clear that this was their only motivation for doing so. In the main, the men were strangers but occasionally they were already known to respondents:

> *"A guy walked past who I know…who I know has a bedsit, so I sort of jumped on him and I was sort of 'J…, alright mate' and so I went back to his place with him and got into bed with him just so I could have a bed unfortunately."*

2 *Developing an ongoing sexual relationship with a man* as a means of accessing accommodation for a sustained period of time, usually to *avoid* homelessness, rather than to *escape* homelessness. Thus women who had just become homeless or knew this was imminent would develop a relationship with a man in order to move in with him. Some of these relationships lasted several years but respondents were very clear that their primary motivation for becoming involved with the man in question was to secure somewhere to live. If women are actively developing new relationships with men in an attempt to avoid or escape homelessness, it is very likely that there are many more who continue *existing* sexual relationships they no longer wish to remain in because to end the relationship would result in homelessness. These women rarely, of course, come to the attention of researchers and homelessness services.

3 *Temporarily reuniting with ex-partners* in order to secure accommodation for a few nights when all other options have been exhausted. We are not referring here to women whose ex-partners accommodate them for a while under no illusion about the possibility of reconciliation, or about women in on-off relationships who return to ex-partners for reasons unconnected to their housing situation. Rather, respondents reported pretending to reconcile

[21] This is an activity whereby women present themselves to potential clients as prostitutes, request money upfront and then run away.

with ex-partners until they could find alternative temporary accommodation. One, for example regularly returned to her ex-partner. She would leave him and stay with friends for a while, sometimes even *'sleeping with some bloke so I could be away'* but would then return because *'I had nothing else to do…it was the only sort of stable home I had'.* In some cases the ex–partners with whom respondents were reuniting were violent.

4 *Engaging in prostitution or clipping in order to earn enough money to pay for a hotel or bed and breakfast* when women could not access hostel places or other temporary accommodation. This was not particularly common and was only reported by respondents in London – a coincidence perhaps, but possibly reflecting the particularly acute pressures on hostel accommodation in the capital. The few respondents who had engaged in paid sex work specifically in order to fund accommodation (rather than a drug dependency) rarely did so for sustained periods of time, not least because of the high cost of hotel and B&B accommodation in the capital.

5 *Engaging in prostitution in the hope that clients will provide a bed for the night*. Women relying on clients to provide accommodation were usually working as prostitutes to obtain an income but would actively seek out clients likely to let them stay the night. One (a rough sleeper) explained that a couple of 'regulars' employed her services in their own homes and would sometimes allow her to stay there. She made concerted efforts to contact these regulars when she was desperate for a bed for the night.

> *"like maybe twice a week and like a punter might put me up or summat…. Depends if they turn up or not, or if I see 'em. There's only one or two that will put me up for the night but it's if I see 'em.."*

Typically, respondents entered into unwanted sexual liaisons to avoid sleeping rough. Thus one explained that *'I would do pretty much anything to not be outside – get into bed with blokes, things like that'.* This is not, however, to say that unwanted sexual liaisons were deemed preferable to rough sleeping. Many women engaged in some form of sex work also slept rough frequently, using sexual liaisons as a means of securing a bed for a night or two when rough sleeping becomes unbearable. In other words, both rough sleeping and sexual liaisons were 'last resort' accommodation situations with respondents moving between the two, trying to bear rough sleeping for as long as they could and only finding a man to accommodate them when this proves too much, but usually only for short periods of time before this too became unbearable. One woman provided a disturbing but frank account of the desperation which frequently drives her to 'go home' with strange men, and the way this feels. In so doing, she expressed the sentiments of many of the women we interviewed:

> *"It isn't nice being freezing to death, and that cold your bones are aching, and you're shivering that much, it's horrible. And you're that desperate that you go back with someone…, big, fat, greasy, smelly, dirty man bouncin' on top o' you, just for you to have a roof over your head. That's horrible."*

In addition, there was evidence of homeless women engaging in unwanted sex with men, not for accommodation but in exchange for essential items such as clothes and food. One woman, for example, explained that she frequently hitchhiked, getting lifts with lorry drivers who would allow her to sleep in their cabs but who would also provide her '*with food, and they might buy me a bit of clothing or just look after me for a week.'* These were not unconditional gestures of goodwill. Rather, from the age of 14, this woman had been expected to engage in sexual activity in return. She talked about the dangers inherent in this activity – she was regularly assaulted – and how she feels she is *'tempting my luck now',* implying that her life, literally, is at risk. Similarly 'Helen' reported going home with men in order to make use of their washing facilities, to eat and get warm. She would indicate a willingness to have sex with them, stay as long as she could before this was expected, and then leave. In her words:

Helen*: "I'd take any number of any guy who'd chat me up, who I'd never normally talk to, because I'd be, like, 'maybe you've got a bathroom, maybe you've got an iron, maybe you've got food".*
Interviewer: *"Would you sleep with them?"*
Helen: *"No I mean obviously you've always got a small amount of time that you can take before someone wants to sleep with you….to promise that they're going to get it* [sex] *is enough to keep them salivating"*

Helen too was well aware of the potential danger she was placing herself in by promising something she did not then deliver, and by being inside a strange man's home when that became apparent.

This discussion highlights some of the difficult choices that many homeless women make on a daily basis – the choice between exchanging sex for food or going hungry, the choice between going home with a stranger or sleeping on the streets. And there were many other examples of women making similarly impossible decisions. There was the woman, for example who reported active attempts to get into prison (with success). She was very firmly of the view that she was not alone in this endeavour and that many other homeless women were similarly 'choosing' custody as a means of meeting their needs:

"... there is so many women in prison at the moment who've got nowhere to live and their only way of having somewhere to live or to eat or to sleep is to get nicked and go back to prison, and a lot of women do it."

This particular respondent explained that for her, prison was not merely a means of accessing daily necessities but served as respite from her more general experiences of homelessness that she endured:

"Oh it was 'orrible [prison]*. But I enjoyed it because I weren't 'aving to 'ave sex and that, I really enjoyed that I weren't lettin' people abuse me, you know it were so nice."*

It is worth noting that the research team did not actively target women working in the sex industry. We were keen to include sex workers in the sample and planned to use particular techniques for gaining access to women in the sex industry. However, we found that many women we interviewed in generic services were reporting experiences of the paid and unpaid sexual liaisons described above. This is, in itself, an important finding, suggesting that sex work (or the forming of unwanted sexual partnerships) is relatively common amongst the general female homeless population.

5.3 Chapter summary: key findings

- Homelessness is rarely the consequence of a single event, action or issue but is the culmination of a complex range of experiences and events which together bring women to the point of losing their accommodation. The immediate 'triggers' of homelessness mask a host of underlying issues, experiences and processes, all of which influence the likelihood of a homelessness outcome.

- The most common 'trigger' of homelessness amongst respondents was a breakdown in their relationship with their family, followed by domestic violence. Over 20 per cent of women had left their last settled home because of violence from someone they knew – whether a partner, family member or associate.

- There are clear links between women's traumatic life experiences – for example sexual abuse, neglect and abandonment, reproductive health issues and experiences of violence – and their subsequent homelessness. Many respondents trajectories into homelessness could be traced to particular events or experiences.

- The situation and experience of homelessness can have severe consequences for women's physical and mental health and well-being. Physical health problems, the onset of mental ill health, suicide attempts, drug and alcohol abuse, and coping difficulties were commonly reported by respondents and attributed to their homelessness.

- An alarming number of the women interviewed had engaged in unwanted sexual liaisons (paid and unpaid) in order to secure accommodation and in exchange for basic necessities such as food and clothing.

6 Daily Life and Survival Strategies

Many of the issues discussed in this chapter have particular relevance to women sleeping rough who do not always have ready access to food, washing facilities, shelter and such like. However, it is important to recognise that women temporarily accommodated face many of the same challenges. All homeless women have to deal with the daily challenges of being homeless – of remaining safe, meeting their basic needs, securing accommodation – and develop a range of strategies for managing their daily lives.

6.1 Meeting basic needs, accessing everyday necessities

Food, water, clothing, shelter, warmth, washing and laundry facilities are all everyday necessities taken for granted by the non-homeless population. For homeless women, however, accessing these basic essentials of life can prove challenging. The challenge of keeping clean and well fed, finding places to launder clothes and keep warm and dry are, perhaps, associated primarily with rough sleepers but this is by no means exclusively the case. Women living in hostels, B&Bs and night shelters do not always have access to cooking facilities or places to wash and dry their clothes, and some require residents to vacate the premises during the day. Women staying with friends or family members are not always able (or allowed) to make use of the facilities there or remain in the accommodation during the day. Women squatting do not always have water and electricity supplies connected. And women staying in other marginalised housing situations, such as with other homeless people in their accommodation or with men they have spent the night with for shelter, rarely have access to the amenities available there. In addition, limited financial means – compounded by the expenses incurred in homelessness such as buying pre-prepared food and the cost of travel to attend appointments – as well as difficulties retaining possessions (clothes, irons) on becoming homeless makes it hard to remain smart and presentable whether rough sleeping or not.

Day centres play a crucial role here. Whatever respondents' views of the various centres they had used – and some were deeply critical of aspects of day centre provision – the services on offer and the facilities available were described as a 'godsend' and a 'revelation'. Day centres provide most daily necessities – shelter, warmth, comfortable seating, a place to while away some time, hot drinks – and some provide food parcels, cooked meals, blankets, clothing, laundry facilities and showers. Importantly, women need not have a specific purpose for being there (i.e. attendance is not dependent upon participating in a session, or having an appointment) and restrictions are rarely placed on the length of time service users can stay in the building during opening hours. In addition to providing women with opportunities to wash and dry their clothes, take showers, and eat, several rough sleepers reported 'napping' in day centres. Although most do not provide sleeping facilities, respondents were able to doze for an hour in a chair, undisturbed, and in a safe environment. For rough sleepers in particular, some of whom reported altering their sleeping patterns to avoid the dangers of sleeping out at night (see section 6.4 below), finding safe places to nap during the day was essential.

However, not all women have access to day centres, some are unaware of them or of the services they provide, and others are reluctant to use them. Respondents in small towns and rural areas and women staying or sleeping rough outside town and city centres, for example, frequently found that such services were non-existent. Women often

accrued knowledge about day centres through other homeless people and so those experiencing their first episode of homelessness, or in the early stages of homelessness were generally unaware that such facilities are available. And day centres can represent hostile, challenging environments which women wish to avoid. Respondents who did not identify as homeless, for example, and respondents who had no prior experience of homelessness found the prospect of using services so obviously for homeless people, often frequented by people with chaotic lifestyles, very difficult indeed. The male dominated environment of some day centres also acted as a deterrent, particularly amongst women who had experienced sexual abuse or violence from men and who consequently found mixed service provision frightening and threatening.

Women who do not access day centres for these various reasons – and evidence from this study suggests there are many such women – have to find alternative means of meeting their everyday needs. In any case, day centres tend to be closed during the evenings, early mornings, weekends and public holidays. This leaves even those women fully cognisant of day centre provision, happy and willing to use it, and living in areas where such services are plentiful, with times when the daily necessities of life are not available through formal provision.

The women interviewed for this study talked at length about their daily lives and routines – how they managed to keep clean, keep occupied during long days, how they managed to eat when they had no money to buy food, stayed warm and sheltered from cold weather, and about the (non-homelessness) places and facilities they used in their efforts to do so. These discussions revealed that women were making rational and considered decisions and choices, and displayed intelligence and ingenuity in the ways in which they met their everyday needs. Respondents would weigh up the benefits and disbenefits of different places in terms of the opportunities they provided and would actively seek out places fulfilling certain criteria. In addition, women were careful to behave in ways which protected and secured continued use of various places and facilities. Indeed, many of the ways in which respondents negotiated the everyday requirements of daily life demonstrates resourcefulness, high levels of competence and capability, imagination and ingenuity. This is implicit in much of the discussion which follows.

Unsurprisingly, public spaces, buildings and facilities featured heavily in respondents' daily lives and access to these places (day centres aside) was the primary means through which they met their daily needs. In fact respondents appeared to rely more heavily on public buildings and facilities than they did on the informal assistance of friends and family members[22]. Very few, for example, reported bathing, eating, or washing clothes at the houses of friends or family members, nor using other people's houses to rest for a while during the day or take shelter in cold weather. In the remainder of this section we examine some of the ways in which public buildings and services are much used resources in homeless women's daily efforts to meet their needs.

6.1.1. Shelter, warmth and daytime 'napping'

Public buildings provide much needed shelter, warmth, and resting places. Many homeless women (including those in temporary accommodation), have nowhere to go during the day. With very limited financial means they find themselves with no choice but to spend much of their time outside, often in harsh weather, just walking around. Finding warm, comfortable places to shelter and rest, therefore, is essential. Cafés and shops can provide some respite but use of these places is inevitably time-limited: women can only remain there for as long as their food or drink lasts or as long as they can pass themselves off as a browsing shopper before raising suspicion. The best public places, then, are those which allowed respondents to get some rest (including a nap) without 'being on view', being harassed, or moved on, and where it is acceptable to remain for long periods of time. Libraries, museums, and galleries were popular public spaces not least because they were perceived as safe environments where it is commonplace for people to linger. One rough sleeper stressed the importance of these kind of places:

[22] With the exception of the 'daily need' for accommodation which was very commonly provided by friends and family members.

"I joined the [X] *library and it's one of those places, I wouldn't have survived so long if I hadn't…"*

The use of listening booths provided in bigger libraries and art centres meant women could avoid being on public view for long periods of time. The following comment outlines the importance of 'non-homelessness' public services in the lives of homeless women:

'there's free internet in the morning, there's listening booths for music, it's part of centre where you can listen to the concerts, you can sit in one of the foyers in the evening, it's always warm, very important [laughs] *and just listen to the concerts in the evening and it's open till about, well officially 9 till 11 but often earlier, 8 o'clock till midnight"*

The increasing tendency for some larger bookshops to stay open late and actively encourage shoppers to linger was an opportunity grasped by respondents. Now that the 'culture' of bookshop browsing is one where customers are encouraged to take their time, sit on comfortable sofas with a cup of coffee, and read the books on sale, a homeless woman spending several hours in a bookshop keeping warm, resting somewhere comfortable, and passing the time by reading a book no longer looks out of place. Rather, her actions are indistinguishable from the 'legitimate' customers and her alternative purpose for being there is not revealed. One respondent, a rough sleeper without access to electrical power points, explained an additional advantage of bookshops:

"I used their power points to charge my phone. I didn't have any credit but it was important that my phone was charged because I'd given the number to hostels and places and they might have phoned. They have leather sofas and things as well so I'd position myself near a power point and sneak my phone in. I read a couple of books during that time."

Public transport was another facility used by many respondents for purposes other than those intended. Several prioritised the purchase of a bus pass each week so they would always have access to warmth, shelter, something to do, and somewhere to nap if needed. Indeed women reported hours spent 'riding the buses'. Bus passes are not cheap and this purchase represented a significant proportion of respondents' weekly income. However, they explained that compared with the cost of accommodation, of leisure facilities which provide temporary shelter (such as cinemas) or of paying for food and drink in cafes, it was a price well worth paying. Where bus services operated 24 hours, or covered long distances, the purchase of a pass was considered all the more worthwhile.

6.1.2 Personal hygiene

Personal hygiene and cleanliness were of utmost importance to many of the women interviewed. This was a matter of pride, and partly derived from their need to preserve as much of their non-homeless self and personal standards as possible. If women had bathed every day before they were homeless, if they had brushed their teeth twice a day, if they had always looked presentable, so it was of paramount importance that this routine continued. To do otherwise threatened respondents' sense of well-being and perceptions of self and was, psychologically, to be avoided at all costs. But being clean and presentable also carries pragmatic benefits: respondents would have been denied access to many of the public spaces providing warmth and shelter had they been 'visibly' homeless. And for the small number of respondents who continued working or studying whilst homeless, being presentable represented a way of continuing with these activities.

Toilets in public places or buildings – fast food outlets, hospitals, art centres, and public conveniences – were very commonly used by respondents for washing themselves and 'tidying up' their appearance. They did, however, point to a range of considerations when selecting venues to use for this purpose. Cleanliness of the public facility was

important, as was easy access at any time of the day or night and toilets in local hospitals were particularly popular for these reasons. Free access was also important and respondents were able to reel off a list of public conveniences they could use at no charge.

The best public conveniences were those where the sink was located inside the cubicle because, as one respondent pointed out, *'even in a women's toilet, if the sink's outside it would be very difficult* [to wash your body].' Most women got by with body washes using sinks in public toilets. Showers and baths, meanwhile, were somewhat harder to come by and considered luxuries. Some airports were reported to provide free showers (and towels for a small fee) and a pound or so would get you a shower in a service station. In a rather exceptional example, 'Jane', who was working for a company which provided showers for their clients explained that there was *'Molton Brown stuff and everything in the shower, so I used to shower there every morning and at weekends I used to go in there and wash and hang my stuff by my desk to dry.'*

6.1.3 Food

Obtaining food can prove somewhat more challenging than finding places to wash and rest – food is very rarely available at no charge in the way that toilet facilities can be – and women reported regular and long periods of hunger. Soup runs and similar facilities were well used by respondents, some knowing the precise times and locations of all the various soup runs operating in the area and organising their routines accordingly so as to make maximum use of them. Several women were aware of churches and houses occupied by particular religious groups which did not formally provide 'soup kitchens' but where the residents would sometimes give women food if asked. Information about these places was often passed through a network of homeless people in a particular area.

Other respondents, unaware of soup runs and similar services, or in locations where they were not available, reported seeking out and identifying particular outlets where unused or out of date food was routinely discarded. They knew the time of day when this occurred and where in the vicinity of the shop the unwanted food was left for rubbish collectors. Drawing again on Jane's story provides an interesting (if again exceptional) illustration of how women 'keep themselves going'. She explained how she managed during the first month of working in her temporary job, before she had received her first pay check:

> *"All month I didn't have any money…I was literally living on minestrone soups from the machine at work and coffee, and they gave biscuits out at meetings. I walked four and a half miles because I was walking there* [to work] *and back."*

6.2 Sleeping rough: 'invisibility' as a safety strategy

The very real dangers associated with rough sleeping, and the vulnerability and fear homeless women feel at the prospect of sleeping rough cannot be overstated. As one explained:

> *"I just thought I wouldn't be able to cope with living on the streets because I just felt I wouldn't be safe and there's no way that I'd put myself at threat from men or anything like that so I'd rather not live than be with that sort of threat."*

Such was this woman's fear at the prospect of sleeping rough that she researched ways to commit suicide, considering this option preferable to living on the streets. Unfortunately, respondents' fears were not unfounded, with many reporting incidents of violence and assault committed against them. Daily life for many of the female rough sleepers interviewed was characterised by violence and attempts to avoid danger and assault. The experiences of the two women quoted below are illustrative of those reported by many:

"I got attacked, not beaten, but I got sexually attacked a few nights ago."

"passers by, people I know, other girls, everyone. I've had money took off me, I've had my handbag off me, coat took off me, shoes took off me, I've 'ad all sorts. My mobile took off me, my diary took off me, know what I mean?"

Despite these very real dangers, and despite the reluctance amongst homeless women to sleep rough, evidence from this research suggests that the majority of homeless women have no option but to do so at some point. As we saw in Chapter 3, over 60 per cent of the survey sample had slept rough. Evidence from the in-depth interviews suggests that rough sleeping is not a one-off occurrence or something which women endure just for a night or two in between other temporary accommodation arrangements. Many of the women interviewed had slept rough many times and for weeks, months and occasionally years on end. The challenge facing women rough sleepers, then, is how to minimise the risks and dangers associated with 'sleeping out'. Primarily this appears to be achieved through efforts to be 'invisible' and there were two particular ways in which respondents sought to achieve this.

Firstly, respondents carefully selected the locations in which they slept and it was notable that most were places where they literally would not be seen. In other words women were choosing to sleep in places where they could physically hide. Respondents rarely reported sleeping in locations where they would be visible (such as shop doorways), or in places known to be popular congregation or 'bedding down' places amongst homeless people. It was clear that this represented a conscious safety strategy. As one women commented

"…the men tended to be in the shop fronts which I would never contemplate doing… for me it was a safety thing."

Instead, respondents chose places and locations hidden from view. Thus, public toilets[23], fenced bin bays, storage units, garages, office buildings, walled car parks, and stairwells – all locations in which respondents had slept rough – represented places where they were unlikely to be seen and in which they were afforded a degree of safety and security:

"Flats…have these little sort of huts where they put the bins in and so you get behind the bins and you're hidden, you know they can't see you."

"There's places where we used to go, car parks where, you know, they were closed in and that, and nobody would see you there. So I wouldn't feel as unsafe there."

The daily realities of sleeping rough

"you didn't know when you were gonna get your last bit of hot food, it was horrible, you couldn't sleep because you didn't know if somebody was going to attack you. It's horrible out there on the streets…getting offered money for sex"

"Just miss sittin' in a comfortable chair watchin' telly….just walking around knowing everybody's goin' 'ome. And it's freezin', and 'aving nowhere to go, it's horrible"

Accessing such locations can require a degree of ingenuity. One woman, for example, explained that on-street public toilets can provide shelter, security and privacy but for the fact that they are programmed to open automatically after a period of time. She had, however, found a way of circumventing this mechanism so the toilet stayed locked from the inside until she was ready to leave. This provided her with a space in which to sleep which no-one else could enter – a rare luxury indeed for a rough sleeper.

[23] On-street public toilets which are individual and enclosed.

When women did sleep rough in more 'open' public places, or in spaces more usually associated with rough sleeping (for example car parks, parks and similar open spaces) they tended to select locations away from known rough sleeper sites, often outside town or city centre locations where no other homeless people were sleeping. Alternatively (or additionally), they would identify places which, although public, provided a higher degree of security than usually associated with such spaces. 'Sarah', for example was sleeping rough, very visibly, in shop doorways but always chose places which were within view of the city centre CCTV cameras. By doing so she felt she was reducing the risk of being attacked. Similarly, Jane slept on a bench in a financial services district, an area closely monitored by CCTV and patrolled by security guards. And when we interviewed 'Alexis' she had just spent the past nine months sleeping rough in a park located some way from the city centre. At the age of 46 this was her first experience of homelessness and she had moved directly from settled accommodation to sleeping rough. She spent this nine month period terrified for her safety and in a state of trauma and anxiety. The park she chose to sleep in was surrounded by railings and could only be entered via a gate which was locked at night by a park attendant. As long as Alexis was inside the gates at closing time, she was not visible to others during the night.

A *second* way in which women attempted to make themselves 'invisible' was by disguising their homelessness status in public places, making concerted efforts to 'blend in' with the surroundings and with other people using those surroundings, covering up any aspect of their appearance and actions which may reveal them to be homeless. By 'looking like everyone else' and appearing to use a public place as it was intended (rather than for sleeping), they ceased to be noticeable and were less likely to be harassed or moved on. Airports, business parks, and 24 hour transport are examples of places where respondents managed to sleep rough – very publicly, and often surrounded by many other people – without drawing attention to themselves.

Sleeping rough in public places: Marjorie's 'strategy of invisibility'

Marjorie is 41 years old and, after a year or so of sofa surfing, found herself with no alternative but to sleep rough. She found her way to a local airport where, over the following six months, she spent many days and nights. She witnessed other homeless people (men) attempt to use the airport as a place to keep warm, rest and sleep but they were always removed by airport officials. Marjorie, on the other hand was never asked to leave. She attributes this to being indistinguishable from the many holidaymakers waiting for their flights. She explained that she did not appear homeless, was '*fairly clean and tidy*', carried a bag which might signify that she was going on holiday, and so did not stand out in the holidaymaker crowd. In contrast, she described the homeless men in the airport as *'more obviously homeless.'* In addition, to ensure continued access to the airport she only used it periodically, knowing that if she remained there for too long it would become apparent that she was homeless, and that once removed she would not be able to return again. She explained that *'I wasn't there full time but I'd……keep going back. Sometimes I'd be there two or three nights and then they would start to recognise me and I'd go back on the street and maybe ten days would pass.'*

Of course, not all women employ this strategy of invisibility and some were found to sleep in the central and visible locations and places more often associated with rough sleeping. For some respondents, being close to homelessness services more readily available in city centres, living within a community of rough sleepers which provided friendship, resources to draw upon, and (for some) a sense of belonging, being easily located by outreach workers, in busier places which provided greater opportunities for earning an income through begging or sex work, and deriving safety from numbers rather than invisibility, outweighed the benefits associated with remaining hidden. However, there was some evidence to suggest that harassment, attacks, sexual attacks and robbery were more commonplace amongst (although by no means exclusive to) women sleeping out in these more visible places. As one women reported:

"You didn't want to go to sleep, you might wake up on fire[24]…countless times I got robbed….I've been really badly beaten up quite a few times."

"I mean you're vulnerable but you just have to stick it out…one time I was sleeping on a park bench and a few guys….. just managed just about [to fight them off] *but it can get pretty serious."*

6.2.1 The unintended consequences of 'invisibility strategies'

These strategies of invisibility can have unintended but problematic consequences for homeless women. *Firstly,* it renders them more isolated – often sleeping alone, in places not associated with rough sleeping and away from central locations where the presence of rough sleepers is a more usual feature of the landscape and, perhaps, more 'acceptable' to the public. Although this isolation is a strategy women employ to *preserve* their safety, it also potentially places them at greater risk: women alone are more vulnerable than women in a group, they are geographically isolated from a 'community' of rough sleepers able to provide protection to one another, and women often sleep in places where their presence may be less tolerated if they are discovered.

Secondly, in attempting to hide from people who may *harm* them, women also inadvertently hide from services able to *help* them. Respondents in 'hidden rough sleeping' situations had rarely engaged with, or been approached by rough sleeper services such as outreach workers. During the nine months that Alexis, introduced above, slept rough she had no contact with rough sleeper services. It being her first experience of homelessness, she had no knowledge of the services available to rough sleepers (for example day centres), and no awareness of when and where soup vans and similar provision was located. Sleeping in a location not used by other homeless people she could not benefit from the service knowledge of others in similar situations. Alexis, and others like her, would have benefited enormously from contact with an outreach worker, if only to inform her of the day centres, soup runs and direct access hostels in the area. Instead, they are reliant upon the services they know about and actively approach. In Alexis' case this was the local authority housing department and it was nine months before they were able to arrange an appointment for her at a local women's hostel.

The survey findings confirm women's limited engagement with rough sleeper outreach workers, with only 12 per cent reporting use of such a service. This certainly does not reflect low levels of rough sleeping amongst our sample and there was no evidence that respondents were reluctant to engage with rough sleeper services. We suggest, then, that the hidden nature of rough sleeping amongst homeless women, combined with an associated lack of awareness of certain services amongst some, provides a compelling explanation for low levels of engagement with these kinds of services.

6.3 Negotiating access to public spaces

Many of the issues discussed in this chapter – the ways in which homeless women obtain everyday necessities, find shelter and places to sleep, and manage their daily lives – rely upon access to public spaces and buildings. Yet homeless people are rarely welcome or tolerated in these environments, particularly if they are there to carry out daily functions (sleeping, washing, resting), rather than to use the space for the purpose it is intended. Homeless women therefore have to devise ways of accessing and using public buildings.

Respondents negotiated access to, and secured continued use of public spaces and buildings in a variety of ways. Use of public spaces is dependent upon the people who monitor and staff these area – the shop workers, bus drivers, security guards, toilet attendants, police, cleaners, and front-line staff – 'allowing' them to be there. These staff

[24] She is referring here to an incident when a member of the public set fire to 19 homeless people's sleeping bags while they slept and which occurred during one period when she was sleeping rough.

effectively act as gatekeepers, monitoring the public's use of such places and removing people behaving in ways deemed inappropriate to the context. There was clear evidence that respondents were acutely aware of this dynamic, adapted their behaviour accordingly, and were adept at identifying the key gatekeeper to a particular public place and the ways in which they could satisfy their informal rules to secure permission to use that space. There was evidence of (sometimes tacit) agreements developing between respondents and gatekeepers, whereby women would abide by a set of behavioural rules and in return they would gain access to the building or place in question. In effect, these agreements allowed *both parties* to hide the fact that a homeless woman was in that space.

Blending in with other users of public spaces by making sure they were clean and presentable and did not 'look homeless', was key. Respondents hoped that through these efforts they would not come to the attention of staff at all but in time, gatekeepers usually realised that a homeless woman was present. The priority of people with responsibility for staffing and monitoring public spaces is ensuring that 'legitimate' users of the space feel comfortable there. Thus, staff would usually tolerate respondents' presence on the condition that they were not identifiable as homeless by *others*. Other 'behavioural' rules were also evident in the (spoken and unspoken) agreements between homeless women and gatekeepers to public spaces, including times of day they needed to absent themselves from the space, when they could and could not make use of the facilities there, and how continuous their presence was. Many examples of this were identified, covering a wide range of places. These included:

- A security guard who 'turned a blind eye' to a rough sleeper providing she kept the steps of the building she was sleeping on free of litter and left early in the morning. He was reported to see some benefit in this woman's presence because it deterred other more troublesome persons such as graffiti artists from approaching the building.

- One young woman used some city centre public toilets to wash each day, and gradually developed an agreement with the toilet attendant – agreement which carried certain conditions. She explained: *'I'd deal with the woman down there, after I got to know 'er…as long as I was there by seven in the morning before she left her shift – she had a night shift – …she'd give me a cubicle and she'd give me a bowl of hot water…she kept my toothbrush and everything in there.'*

- Alexis, whose experiences of sleeping rough in a park have been outlined above, was known by the park attendant to be sleeping there. He was responsible for making sure the park was empty in the evening before locking the gates for the night. However, Alexis explained that *'he knew I was in there, he used to lock me in on the night time. He used to say 'be careful' and when he used to come round in the morning he used to wake me up.'*

- Similarly, Marjorie – whose experiences of sleeping in an airport are also detailed above – did eventually come to the attention of the security guards, some of whom realised she was sleeping rough there. However, as long as she 'looked' like a holiday maker and was not obvious to other members of the public, and as long as she spent some nights elsewhere, they were happy for her to stay.

- A number of women reported being allowed to sleep in various public spaces (a business park, libraries, buses) so long as they remained in the sitting position. Laying down was not acceptable to the staff responsible for those spaces but they were prepared to turn a blind eye if their napping was not noticeable to others.

6.4 Staying safe

We have already discussed safety issues in relation to women sleeping rough. However, safety is not just a key concern for rough sleepers. Women staying in a range of temporary situations reported dangers associated with being homeless, not least those present within their accommodation (from other residents, for example), risks associated

with begging (such as abuse from passers by), and dangers associated with unwanted sexual liaisons, both paid and unpaid. Thus, one women described how she was verbally abused and *'punched in the face'* by a passer-by when she was begging, and most women who worked in the sex industry or engaged in sexual liaisons in order to accommodate themselves had suffered serious violent and sexual abuse. Of particular concern were the several respondents who reported having been sexually assaulted by other (male) residents while staying in night shelters.

A number of wide ranging strategies were employed by respondents (those roofless and temporarily accommodated) in an effort to remain safe. These included:

Rejecting mixed sex accommodation provision. For many respondents, mixed sex accommodation was perceived as unsafe and women considered very carefully whether to accept emergency provision such as a night shelters or B&Bs, carrying out a quick mental safety appraisal before making a decision. Despite being in desperate need of accommodation and having few (or no) alternatives, this prompted some women to refuse accommodation offered to them. Such were some women's fear of mixed accommodation, sleeping rough (in less visible locations) was sometimes deemed a safer option.

Altering sleep patterns. We have already mentioned women's use of public places to 'nap' during the day. We have reported that day centres can provide safe spaces for women to sleep for an hour or so and public transport also serves this purpose. Women reported sitting on benches in parks, shopping and business centres in order to doze, and libraries provided similar opportunities, as the woman quoted below explains:

> *"In the library I used to get a CD, to put the CDs on in a booth. I mean they are open sided but you can still, I put my head down. I used to get two or three hours sleep."*

It is important to stress, however, that the need to sleep during the day does not arise merely from limited sleep opportunities during the night, or from disrupted nights due to cold, discomfort or being moved on. Rather, respondents actively avoided sleeping at night, this being deemed too dangerous. Women would, therefore, do anything they could to remain awake through the night, often walking for hours on end or making use of the few places which are open such as all night cafes and some bus and train stations.

Adopting personas which 'disguise' vulnerability. Respondents were acutely aware that they were vulnerable – as homeless people, and as women – and adopted a range of strategies for disguising aspects of their personas that may place them at greater risk. Any display of vulnerability (appearing fearful, looking 'feminine', being small or of slight build) was felt to increase the likelihood of being a target for abuse – from robbery, to verbal abuse, to sexual attack. Respondents thus made efforts to avoid wearing feminine clothes and to dress in a more masculine way, they would avoid displaying fear, and would adopt a more aggressive persona. One respondent summed this up:

> *"I just used to walk around glaring at people, sort of trying to look dangerous, trying to keep people away from me, which is actually a lie because I was a very fragile person, very scared…..*[it's] *important that you look like they don't need to rescue you and try to look as boyish as possible…so wear a baseball cap and hood."*

6.5 Personal, emotional and psychological 'coping' strategies

The ability to manage homelessness relies not just upon dealing with the practicalities of daily life such as finding somewhere to stay, obtaining an income, accessing food and places to wash. It relies also upon psychological and emotional coping strategies. The potential to 'fall apart' emotionally and psychologically is very real for homeless women, and the impact on their mental health and well-being can be severe.

Many of the women interviewed had already experienced a range of difficult, personally challenging, and traumatic situations prior to becoming homeless. Respondents had had to cope with sexual abuse, violence from partners and family members, unwanted abortions and miscarriages, fostering and adoption of their children, the death of loved ones, abandonment by parents, and many other traumatic life experiences and events. Some respondents were from chaotic families themselves, had been brought up by parents who were dependent on drugs or alcohol and had to assume the caring role within the family, or been forced to fend for themselves from a young age. These experiences and challenges can result in an accumulation of personal resources – in the form of coping strategies, psychological devices to manage difficult situations, and a capability to negotiate one's way through the challenges of being homeless.

Thus, respondents talked about having *'inner resources'* which kept them going, about having strong, 'independent mentalities' making them capable of fending for themselves. Others talked about being able to 'put things to the back of their mind' and how they *'just get on with it, you can't let it get to you. You can't, it's life'.* And while these latter sentiments were certainly less positive, they nevertheless represented effective psychological devices for coping with extremely adverse situations. Some women explained that a lifetime of dependency – on partners, on other people, and on substances – had given them a determination to manage, cope and take responsibility for their own lives. Conversely, others pointed to the very independent lives they had led and the way in which this had prepared them to some extent for the challenges of homelessness.

6.6 Chapter summary: key findings

- The ways in which women manage their homelessness demonstrate resourcefulness, competence, imagination and ingenuity. 'Surviving' also demands emotional and psychological devices to cope with the experience of homelessness.

- Day centres are an important resource, providing many daily necessities of life. But not all women have access to day centres, some are unaware of them or of the services they provide, and others are reluctant to use them. In the absence of such provision women have to find alternative ways of meeting their everyday needs.

- Day centres aside, public buildings and facilities (libraries, public toilets, public transport, galleries, bookshops) were the primary means through which respondents met their daily needs. Indeed they relied more heavily on public buildings and services than on friends and family members. These spaces and facilities provide opportunities for keeping warm, resting, sleeping, washing and eating. But access to public places is dependent upon women understanding and responding to the 'rules' of the gatekeepers who manage these places.

- When respondents slept rough they made efforts to remain invisible, choosing places to sleep which were hidden from view, or disguised their homelessness status. Consequently, few were engaging with rough sleeper teams and similar services which might have helped them secure accommodation. Only 12 per cent of survey respondents had been in contact with a rough sleepers team yet over 60 per cent had slept rough.

- 'Invisibility' is just one of a range of strategies women employ to stay safe. Some also avoid mixed accommodation, avoid sleeping at night, instead finding places to nap during the day, and adopt persona designed to disguise their vulnerability.

7 Homeless Women and Services: Preferences, Engagement and Barriers to Access

The women interviewed for this study had engaged with a range of services, from local authority housing departments, to libraries, to day centres and the NHS. Their use of services (both 'homelessness' and 'non-homelessness' services) varied widely, influenced by their individual circumstances, as well as by more systemic factors. In some cases respondents' engagement was 'voluntary' and in others women were at the receiving end of services they had little choice but to engage with (for example social services for contact with their children, or drug rehabilitation programmes where linked to a license). However, women were also exercising choice, albeit within constrained circumstances, about the kinds of help and advice they availed of and from whom.

This chapter examines the kinds of services women use (and do not use) and explores some of those factors influencing their patterns of service engagement. It details their experiences of using a variety of accommodation and other services, offering insights into women's preferences and requirements. The kinds of informal help women rely upon is also touched upon and some of the barriers to accessing services are highlighted. Finally, the chapter explores women's experiences of approaching local authority housing departments for assistance and the barriers and constraints they encounter in the process.

7.1 Patterns of service use

The survey presented respondents with a long list of services and asked whether, and how frequently they had used each of them since becoming homeless. As table 7.1. shows, the most commonly used services were the Job Centre, the Benefits Agency, GP/health centres, day centres, and libraries, followed by Citizens Advice Bureaux, accident and emergency departments and local authority housing departments.

It is perhaps no surprise that homeless women are frequent users of statutory services such as Job Centres, the Benefits Agency and local authority housing departments – something of a necessity for women predominantly reliant on benefits and with nowhere to live. Frequent use of a service does not, however, always equate with high levels of satisfaction with that service. Survey respondents, for example, were asked to specify any services which they had found particularly unhelpful and local authority housing departments featured heavily in respondents' lists, while the Benefits Agency was also mentioned. And we will see later in this chapter that women's experiences of approaching local authorities were far from positive.

Table 7.1 Proportion of women using different services since becoming homeless

Service/ Service Type	%
Job Centre	56.4
Benefits Agency	54.9
GP/health centres (not for homeless people)	47.4
Drop-in/day centres for homeless people	43.8
Library	43.6
Citizens Advice Bureau or similar	43.2
Accident and Emergency Dept.	42.1
LA housing department/advice centres	40.6
College or university	32.3
Employment agencies	30.8
Counselling service	30.8
Other drop-in/day centres	27.8
Women only services (of any kind)	27.8
Family Planning Clinic	27.1
Connexions	23.5
Services offering help to younger people	18.8
In-patient or out-patient psychiatric services	17.3
Health centres for homeless people	16.5
Night shelters	15.8
Detox or rehab service	15.2
Services for women experiencing violence	14.3
Other outreach teams	14.3
Rough sleeper outreach teams	12.0
The Big Issue	10.5
Floating support services/worker	10.5
Mobile Sexual Health Van	9.0
Other	8.3
Your local MPs surgery	7.5
Rent Deposit scheme	7.5
YWCA	6.8
Rape Crisis	6.8
Youth Offending Team	5.3
n=13	

The apparent frequency with which respondents used 'non-homelessness' services such as libraries and art centres will be of interest to a range of public service providers. In relation to libraries, for example, aside from the obvious practical service provided (books, information, access to the internet), women reported feeling comfortable in 'safe'

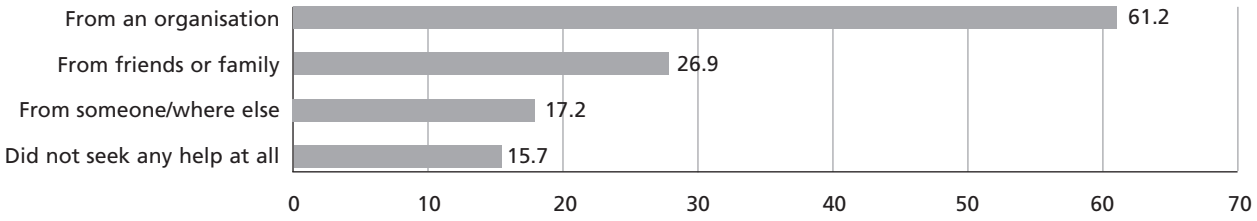
Many homeless women are failing to access formal assistance: nearly 10% of respondents had not been in contact with any service and over 23% had not been in regular contact with any agency

public spaces where attention is not drawn to their homeless status, and where they can maintain a certain amount of invisibility.

Exploring women's use of services in more detail suggests that many are failing to access the assistance they require – whether with meeting their daily needs, with addressing health, mental health, drug and alcohol or other issues, or with resolving and escaping homelessness. A relatively small, but significant proportion of women (13.2 per cent) reported using eight or more services *regularly*. However, 9.5 per cent indicated that they had not used *any* of the services listed since becoming homeless, and nearly one quarter (23.6 per cent) had not used any service regularly. Although respondents' patterns of service use varied widely there was some evidence that women at certain stages in their homelessness careers were less likely to be in contact with services. For example, those (usually older) women in the much later stages of homelessness were less engaged with services, a fact primarily attributable to negative experiences of services they had used previously which had, in turn, deterred them from engaging with any agency subsequently.

However, the starkest evidence emerged of limited service use in the very early stages of homelessness. It is of some concern that nearly 40 per cent of the survey sample did not seek formal (i.e. from an agency) help or assistance when they first became homeless or realised they were at risk of homelessness (see figure 7.2). And where respondents did seek help from agencies this is no guarantee that they *received* it – a number of examples are detailed later in this chapter of women approaching services and receiving no useful advice or assistance whatsoever. It is likely, therefore, that significantly less than 60 per cent of respondents actually received any formal assistance when they first became homeless. Over one quarter sought help from *informal* sources such as friends and family members and 17 per cent approached 'someone else' (for example teachers) but just over 15 per cent sought no assistance at all from formal or informal sources.

Figure 7.2 Help sought on becoming homeless



Percentage of respondents (n = 134)

Homeless women's housing situations also emerged as an influential factor on their use of services. Women (rough sleepers and in other hidden homelessness situations) in contact with no agencies for some time, for example, on accessing a night shelter or hostel would then be linked into a wide range of other services capable of meeting their various needs. In these cases, the process of moving from an informal situation into accommodation provided by an agency effectively opened up opportunities for engagement with other services. And, unsurprisingly, women sleeping rough were more likely than women in temporary accommodation to use services such as day centres, these providing the daily practical necessities which rough sleepers require. Women in more settled temporary accommodation such as longer-term hostels, meanwhile, found that, with their daily practical needs met, they were more able to concentrate on other aspects of their lives. Thus, some women in hostels had started engaging with agencies providing training, employment, and education opportunities and had begun to address some of their more complex needs via services assisting them with regaining contact with their children, addressing dependencies and accessing counselling services to deal with various traumatic events in their lives. Others explained, simply, that at certain times they were too entrenched in homelessness or drug dependency to think about seeking help. Thus one explained that *"When I was on the streets I didn't look for help"*.

Similarly, institutions such as prisons and hospitals (general and psychiatric) as well as other residential settings such as rehabilitation centres were sometimes places where women engaged with support services for the first time. The contacts gained in these places, especially drug workers (in hospital and rehabilitation centres), were then a valuable resource drawn upon later in the woman's homelessness career. However, support services in prisons were notably lacking in giving help or assistance about *housing*. Both in prison and following release from prison, many women reported not receiving the help they required in securing suitable accommodation. Indeed women very rarely moved from prison into settled accommodation, or even suitable temporary accommodation and amongst those who had been in settled accommodation prior to their prison sentence very few retained this housing for their release.

7.2 Accessing services: barriers and constraints

Interview respondents articulated the many barriers and constraints they encountered in accessing and engaging with agencies. In some cases women would actively attempt to engage with a service but would find barriers to doing so. In others, they effectively excluded themselves, finding that particular services were not meeting their needs or were delivered in a way which they found difficult or unhelpful. Invariably this led respondents to cease all contact with the service in question. Many of the constraints on women's engagement with services became apparent through discussion about those services which they had negative experiences of engaging with. These discussions revealed that respondents' most negative experiences were of services with the following characteristics:

- bureaucratic
- inflexible and difficult to access
- fragmented
- male dominated
- not delivered in a way which women find welcoming

In addition, limited awareness of services emerged as a key reason why women were not accessing the assistance they required, the consequence of which was a reliance on informal support to meet their needs. These various issues are discussed below.

Although there was little evidence of a general reluctance amongst respondents to engage with services *per se*, there is evidence that homeless women are reluctant to use some *specific* services or types of services. Table 7.3 shows the proportion of women who stated that they would not consider using each of the listed services under any circumstances.

Low levels of reluctance to use certain services are to be expected, reflecting basic necessities of life. Engaging with the Benefits Agency for example is essential for women who are unemployed and have no other income and women living in hostels will have been required to make a claim for benefits as a passport to obtaining housing benefit to cover their housing costs. Conversely, relatively high levels of apparent reluctance to use services linked to very *specific* circumstances or experiences (e.g. drug rehab, Rape Crisis, Youth Offending Teams, psychiatric services) may indicate an expectation amongst respondents that they would never be in need of such a service[25]. These particular issues aside, the survey data were not capable of explaining why women appeared reluctant to engage with particular services but the in-depth interviews offered some insights and explanations. In particular, any negative experiences women encountered would often deter them from approaching a similar service in the future. The remainder of this section draws on the in-depth interviews to provide some insights into the various ways in which women are deterred (or prevented) from accessing services.

[25] The question did ask whether there were any services respondents would not consider using *under any circumstances* to avoid this but it is possible some may have answered in the affirmative if they believed they were highly unlikely to ever require a particular service.

Table 7.3 Services women would not consider using

Service	%
The Big Issue	28.6
Night shelters	27.8
Youth Offending Team	27.8
Rough sleeper outreach teams	24.1
Detox or rehab service	24.1
Rape Crisis	24.1
YWCA	23.5
In-patient or out-patient psychiatric services	21.8
Rent Deposit scheme	20.3
Your local MPs surgery	19.5
Services for women experiencing violence	18.8
Health centres for homeless people	18.0
Services offering help to younger people	18.0
Mobile sexual health van	17.3
Other drop-in/day centres	16.5
Other outreach teams	15.9
Drop-in/day centres for homeless people	15.0
Connexions	15.0
Family planning clinic	14.3
Floating support services/worker	13.6
Women only services (of any kind)	11.3
Employment agencies	10.5
Counselling service	10.5
GP/health centres (not for homeless people)	9.0
College or university	9.0
Library	9.0
Council's Housing Advice Centre	8.3
A & E	6.8
Job Centre	6.8
CAB or similar	6.0
Benefits Agency	3.8
Other	3.8
n = 133	

The male dominated environment of day centres acted as a deterrent for many, a sentiment expressed by one woman in the following words:

"…a bit intimidating and I felt very much so. I was very quiet in myself, and I still am and….it's not necessarily in the men I've met – I've found them very polite and helpful and so forth….I just think it's the overwhelming numbers….quite easily I'm the only woman, or maybe one or two or three out of, say, maybe 80."

This applied even more so to accommodation provision. The mixed environment of some accommodation provision (such as night shelters) was seen to be threatening and unsafe by some. This was particularly evident amongst women who had experienced sexual abuse (whether in childhood or adulthood). Several respondents found their worse fears confirmed when they were the subject of sexual abuse and harassment from other residents in their accommodation. One woman shared her frightening experience of a night shelter in these words:

"I woke up to find £3 gone and this guy with his hand stuffed in my bra, d'you know what I mean?"

And another talked about her experiences in mixed residential rehabilitation centre:

"With my issues around men it wasn't working, and I didn't know how, boundaries, I wasn't able to say no to anybody and I had the biggest bastards in the place in my bed every night and I didn't know how to tell them 'no'. I was just terrified…I was very abused and I didn't know how to tell the staff what was going on."

More generally, women were thought to have needs that were not met in mixed hostels. Many were of the opinion that men and women had different expectations of a home environment and that this was a good reason for having segregated accommodation. The fact that homeless men significantly outnumbered homeless women meant that mixed service provision, despite formally serving both sexes, in effect catered primarily for men. The dearth of women-only services was therefore even more significant and problematic:

"Oh there's loads of things that you can't get help with because everything's for men really. Hardly anything for women."

The apparent reluctance of survey respondents to use some 'homelessness specific' services such as the Big Issue was of interest. Few interview respondents talked explicitly about the Big Issue but discussions about the extent to which they identified as homeless, and a clear narrative whereby some women sought to disassociate themselves with their homelessness status and with other homeless people (often as a psychological device to help them cope with their situation), would suggest that reluctance to sell the Big Issue rises partly from a reluctance to 'look' homeless (and therefore 'feel' homeless) – something intrinsic to Big Issue selling. Women talked about various ways in which they avoided 'looking homeless', for example not wanting *'to carry a sleeping bag around with me because I didn't want a sign on me saying 'I'm homeless'….. I know it sounds silly but people know you're homeless then.'* The few respondents who did talk about their reluctance to sell the Big Issue articulated similar sentiments. They said they would not sell the Big Issue under any circumstances because this would identify them as homeless, it would place them within a social circle of homeless people and *'because people'd see you on the street who you know….*[it's] *embarrassing'.*

When women did identify services they wished to use they often encountered barriers which deterred them from engaging with that particular agency. The level of bureaucracy involved in registering for a service was a common reason why women self-excluded. The need to fill out forms of any sort was off-putting for several respondents which meant they did not access much needed services. The fact that several of the women had poor literacy may account for some of the reluctance to engage with services that required paperwork (10 per cent of survey respondents reported difficulties with reading and writing). Administrative requirements to provide proof of identification and medical history also acted as a deterrent. For example, this was the primary reason why one respondent ceased using an HIV support group:

"I think this place is better [a drop-in centre] *because after some days at the HIV drop-in place they ask us, 'we want proof that you are HIV positive'. I don't know what they were trying to say, so we were a bit disappointed anyway. People are no longer going there as much as they used to."*

Administrative processes and requirements – in particular long waiting lists – were also problematic and respondents eventually 'gave up'. This was an issue when trying to access health services for example. One woman, trying to access a place on a detox programme found it impossible to remain on a waiting list in the one place for long enough, hence ruling herself out of ever accessing that particular service. She expresses her frustration in the following words:

> *"Like detox and that, months and months of waiting if you're lucky. And I'm patient, but not that patient. I've been asking for it for years and years….I thought I might try a new city and it might be quicker and better…I just end up in the same situation…and 'cos I've up and left, they've thought….they wipe my name off."*

Some frontline services were experienced as *physically* inaccessible by several women which in turn made them unwelcoming and deterred women from using them further. This was especially true where there was a physical barrier such as a queue or an entrance lobby to overcome before gaining entry into a building. Several mentioned having to talk to reception staff through 'glass barriers' and clearly found this unwelcoming and off-putting, as the following two women articulated:

> *"So I get in there* [the housing office] *and you get the, you know, the stony faced bloody looks from these people behind glass windows in council offices."*

> *"You go in there* [the day centre] *right, even the window alone, it's just literally a passage, like a… 10 foot passage yeah and they're* [service-users] *all crammed in....Once you get to the window you've got this feisty…guy, he's like 'yah, what do you want'"*

A further reason apparently preventing women accessing assistance related to the inflexibility of services, which at times appeared to be arranged to suit the preferences of service providers rather than meeting the needs of homeless women. There was a particular problem regarding unsuitable opening times of day centres, especially those which served food and drinks. For those sleeping rough (especially true in winter time) a hot drink first thing in the morning was crucial. However, many day centres did not open until 9am or 12 noon, leaving women with hours to while away before getting that vital first drink. Furthermore, gaps and overlaps in the provision of services were highlighted. For example, while there seemed to be plenty of places to go for a hot meal and drinks Monday to Friday, there was a noticeable absence of such services at weekends and bank holidays. This mismatch of woman's needs to the services and facilities provided was also evident in hostels. In several hostels kitchen facilities and opening times were limited to periods of the day and evening when staff were available, which left women unable to cook late in the evening, or for long periods at the weekends. Similarly, one woman talking about her attempts to obtain healthcare from a health centre for homeless people explained that:

> *"It is not ideal because you have to be here at nine to get an appointment and sometimes if you get here at ten past nine you have to wait for another day."*

The fragmentation of services also emerged as a key barrier preventing respondents from receiving the assistance they required. Although respondents had a variety of complex needs the services available to them were often too disjointed and specialised to address their individual situations. Although many were targeted at specific groups (for example those with drug problems or mental health problems), few were capable of addressing the *multiplicity* of needs that homeless women presented with. The inter-relatedness of their problems got lost in the 'service journey' because they were not treated in a 'joined-up' way. As a result, women tended to be categorised in terms of their most visible problems, commonly drug or alcohol abuse, while the underlying causes of these addictions remain untreated. As one commented:

"The psychiatric [hospital]*, right, they was always putting my problems down to drugs and alcohol, yeah. My psychiatric problems, my problems started before the drugs and alcohol, know what I mean?"*

Women were therefore left to negotiate their way through a range of services, all tasked with addressing different aspects of their needs. This was particularly bewildering for a couple of the younger women participating in the study. One of these young women spoke of how she had been trying for years to access help to tackle the sexual abuse she was experiencing at home and had been ignored. However, when she became pregnant at 14 she suddenly became the focus of intervention from a plethora of different agencies. She found this confusing and ironic given her long struggle to access the support that *she* felt she needed:

"But because I were, because like most people who were involved were because I were pregnant, but I couldn't remember what 'alf of them were doin'"

Women's age also acted as a barrier to service use, some services excluded women under a certain age (sometimes 21 or 25), leading several respondents to lie about their age in order to access the assistance they required (including day centres). In contrast, other services were felt to be inappropriate because they were not age-specific or segregated. This was reported in relation to accommodation provision such as hostels and night shelters in particular. A couple of the older women, for example, reported that younger residents kept unsociable hours which made it difficult for them because *'Young lads up all night, they were noisy, they don't go to bed',* while others pointed to the lack of age-sensitive support. This was a particular problem for one young woman who was looking for a support group for women who had given their children up for adoption but found that she was a lot younger than most of the other women. She explained that she had *'….found support groups before and I were just too young.'*

7.2.1 Limited knowledge and awareness as a barrier to service access

Although women accessed information about available services from a wide range of sources, formal and informal - from newspapers, leaflets and the radio to friends, other homeless people and other services such as day centres - limited knowledge of homelessness services emerged as a key barrier to service engagement.

Day centres, particularly those that ran women's groups, were important sources of information. The way in which day centre staff helped women navigate their way through the maze of homelessness agencies was particularly valued. Other women had been assisted by college teachers and a small minority by their local MPs. Many, however, simply had no knowledge about the services available, and only accrued this knowledge through being homeless and meeting other people who directed them to relevant services, having 'muddled through' for a while staying with friends or family members or sleeping rough. Younger people in particular appeared relatively unaware of services.

Table 7.4 provides figures about the proportion of survey respondents reporting 'no awareness' of the various services listed. It is notable that many of those featured at the top of this list are services for homeless people.

Table 7.4 Awareness of different services

Service	% not aware of the service
YWCA	23.3
Your local MPs surgery	24.1
Health centres for homeless people	21.8
Mobile Sexual Health Van	21.8
Other outreach teams	19.5
drop-in/day centres for homeless people	18.8
Rent Deposit Scheme	19.5
Other drop-in/day centres	19.5
Floating support services/worker	18.0
Women only services (of any kind)	17.3
Rough sleeper outreach teams	15.8
Rape Crisis	13.5
Night shelters	12.8
Youth Offending Team	12.0
In-patient or out-patient psychiatric services	11.3
Detox or rehab service	10.6
Services offering help to younger people	9.8
Connexions	9.0
Services for women experiencing violence	9.0
The Big Issue	9.8
Counselling service	9.4
Family Planning Clinic	8.3
Citizens Advice Bureau or similar	8.3
GP/health centres (not for homeless people)	7.5
Accident and emergency department	7.5
Local authority's Housing Advice Centre	7.5
Employment agencies	6.0
College or university	6.0
Benefits Agency	5.3
Library	5.3
Job Centre	2.3
n=133	

A significant number of women, then, appear to be disadvantaged by their limited knowledge or awareness of the services available to them. Many of these relied on informal support of family and friends and gradually accrued knowledge through increasing contact with other homeless people. For example, one woman who became homeless fleeing sexual abuse from her father did not approach any services but *'knew quite a few people who were homeless and that so I started hanging around with them.'*

The social network of homeless people can provide a constant (if not always accurate) source of advice whereby homeless people alert others to where they can get much needed practical help – for example which day centres serve the best food, where the free public toilets are and so on. Other homeless people were also sources of informal accommodation information, for example suitable places to sleep rough, knowledge which was very difficult to gain

from outside the homelessness 'community'. For example, one respondent was told by another homeless person where she could get shelter in a garage because it was a place he was no longer using himself. Conversely, one woman explained that because she was a little older when she became homeless and hence did not know anyone in that 'circle' she encountered difficulties accessing information:

> *"Yeah because up to being 26, 27, I'd like had all my five children, I wasn't on drugs or anything when I 'ad me kids, so I didn't know anything about anything like that….No, I never got in that kind of circle* [of homeless people] *'til I was like 27"*

Another woman explained that the help she got *'was just through friends. I didn't know there were agencies to help. I didn't think about it at all. I wasn't aware that anyone could help.'* Despite their urgent need to secure accommodation or access other services, then, many women were left with only their own resources to rely upon and no knowledge about where to turn for help:

> *"I wouldn't even know* [where the drop-in centre was]*….you've got to rely on looking through phone books and seeing what there is, or asking you know….I wouldn't even know where there was a drop-in centre."*

In the absence of services assisting homeless women – or without the knowledge of where to go for help – there is evidence that women are finding ways of obtaining information for themselves. The internet, in particular, appears to be a growing source of information for homeless women. One respondent was an enthusiastic user of the internet and used it as a means to make connections with other homeless people, as well as a way of finding out what support was available from various agencies:

> *"Every day if I can get down….go on the Internet, look for support agencies and going to see people in my situation….and 'ow other people coped when they were homeless."*

The internet also appears to be empowering homeless women who, through the easy access to information it provides, are making efforts to find out about their rights and entitlements prior to approaching (particularly statutory) services such as local authorities and the Benefits Agency.

7.3 Service experiences and preferences

The homeless women participating in this study were asked to reflect on the service/s (including temporary housing provision) they had positive experiences of using. Many of their comments mirrored those made about the services women viewed negatively. Thus, where the mixed accommodation provision was deterring some women from using these services, so they expressed a preference for single-sex provision. Where respondents criticised the over bureaucratic nature of some services, so they reported positive engagement with services operating more informally.

It was of interest, however, that when discussing service preferences respondents rarely talked in terms of particular *types* of provision, but in terms of the *ways* in which particular services were delivered. Several key characteristics featured in their views of what constituted a good service – regardless of what that service offered and what type of provision it was. These were services which were:

- informal and accessible
- safe
- women-only or offering women-only spaces/sessions
- offering a range of services in one place
- run by understanding staff
- like a 'home'.

It was important for the women interviewed that the services they frequented were informal and, hence, easy to access. This perhaps goes some way towards explaining the popularity and high usage of day centres, where formalities and bureaucracy were generally kept to a minimum. One respondent had the following to say about a well frequented day centre:

> *"When I looked up their* [web]*site you could just drop-in, just come and have a drink and it didn't seem to be a whole load of bureaucracy and paperwork and so forth, which I thought would have been necessary…and a system you had to go into."*

Many respondents came from family backgrounds where a history of domestic violence, physical and/or sexual abuse was not uncommon. Hence, environments where they felt safe and secure were of paramount importance. Places that offered emotional (someone to talk to) and practical support (advice and hot food and drinks for example), where it was possible to rest, undisturbed by other people, was the ideal environment.

The need for a safe environment also manifested itself in a desire for women-only spaces and services. One woman who had experienced difficult relationships with men particularly appreciated the segregated nature of her accommodation:

> *"The reason why it seemed like a good idea was it was an all-women rehab….The women had a separate landing that you could only get into with an automatic swipe….you had to get through several doors so it was really secure."*

Another described just how important the availability of a women's group at the local day centre was to her:

> *"Having that women's group there… I wouldn't be coming here if there hadn't been this group - without any doubt, having that space, sometimes just to get over the overwhelming impact of men."*

Services which offered a 'one stop shop' approach were particularly valued. Respondents tired of constantly being passed from pillar to post in order to access the various services they required, or of having to travel around from one service to another (and inevitably providing the same information about themselves over and again). Hence, agencies which attempted to cater for the varied needs of each individual in one place were much appreciated. One woman expressed her views as follows:

> *"People got different needs. This place* [drop-in centre] *does it because they do clothes, like they do laundry, they do, like, you can have showers here, they do breakfast…..they've got a drug service….just deal with any kind of problem."*

Exploring respondent views and experiences of *accommodation* provision in particular revealed an interesting underpinning to their preferences. Respondents very rarely talked in terms of a preference for one accommodation type over another (for example hostels rather than night shelters, or local authority temporary accommodation rather than voluntary sector hostels). Rather, the extent to which each particular accommodation service met a woman's needs, and the extent to which she was satisfied with it seemed to correlate closely with the extent to which it corresponded to her concept of what constituted 'a home'. Women's meanings of 'home' varied but the closer their accommodation came to their perception of 'home' the more likely they were to feel relatively content there. Thus, accommodation which provided privacy, where women had their own facilities, where the room was 'nice' and 'clean', where they could cook when they pleased and, importantly, which afforded them independence and their own 'space' was important because it made these places 'more like home'. One respondent was staying in a bed and breakfast but would instead spend time staying with her partner informally in his hostel room. She explained why:

"[in the B&B] *I felt so isolated, I couldn't cook obviously…and I'd go back and stay at the* [partner's hostel] *which was more like home cos it was a nice room, little kitchen and it's own little shower room."*

Another talked about 'treasuring' her room for the independent space it afforded her:

"My room at the hostel was immaculate. I used to keep it absolutely spotless because I really treasured it because it was my refuge and my place that I could run to and lock the door. So I had my own space."

One (pregnant) woman living in temporary accommodation provided by the local authority explained that she did not even consider herself as homeless because the temporary accommodation she had been provided with fulfilled a key criteria of home for her – that of being located in a nice area where she would be able to bring up children. She explained that, despite being well aware that she was *officially* homeless, she did not feel so *'because I had somewhere to live and somewhere to bring a kid up…it's like everything that you could expect from home – nice living room, nice bedroom, somewhere you know you are safe and can call your own.'*

Relatively high usage of non-homelessness services was of interest. We have discussed in Chapter 7 that public services and buildings[26] provide important facilities where homeless women can meet their daily need for shelter, warmth, sleeping and washing. However, another very important benefit to public services was also apparent, namely that they were *not* homelessness services. Respondents appeared to feel particularly comfortable using public, or non-homelessness, services, which were perceived as non-threatening, safe, and where women, psychologically, could feel like 'everyone else'. Thus one woman explained that *'Sort of libraries and* [similar] *places, you know. I felt comfortable there'* and many commented that they spent hours in the library reading books and newspapers:

"I am quite happy in myself to go to the library and sit there and read all day, it becomes a sort of habit almost."

Many women (but by no means all) struggled, emotionally and psychologically, with their homeless status. In public places and services such as libraries they felt safe because they were able to blend into the background, did not stand out amongst other service users and hence were unlikely to attract an adverse reaction by virtue of their homelessness status. Public services, in effect, provide resources without having recourse to homelessness services. Some respondents actively sought out these non-homelessness spaces for two main reasons: in some cases they did not want to be identified as homeless and using public services allowed them to avoid using homelessness services. Others felt the need to avoid other homeless people for a variety of reasons such as wanting to distance themselves from drug users when they were trying to stay off drugs themselves.

7.3.1 The importance of front-line staff

Although respondents had varying experiences of services they were unanimous in stressing the importance of getting the right support from the *staff* within these organisations. In many instances they rated the *way* services were provided, in particular the *quality of care* provided by staff, as being just as important, or indeed more important, than *what* was on offer within the service. Time and again women commented that the staff in these agencies and their attitudes towards homeless people had a significant influence on whether they used a particular service or not. One woman spoke about the friendliness of the staff at one particular hostel, and how she felt 'cared for' by their obvious concern for her well-being, without this being intrusive:

[26] The term 'public' service is used to denote services open to the public such as libraries, galleries and public transport. It is not used to refer to statutory services such as local authority housing departments and the NHS.

"It was run in a really nice way, it wasn't like someone was checking up on you, it was like oh I'll chat with S… and they'll be really friendly and they'd sort of clock whether you were coming in and out but they wouldn't keep notes but they were aware if they hadn't seen you for days, they'd sort of say 'where've you been, what've you been up to' it was nice because I felt cared for but not observed."

The personal qualities of staff, such as 'being friendly', 'really helpful' and 'understanding' were crucial to respondents, many of whom had been very poorly treated by frontline staff in the past. It was important that staff were non-judgemental, treating them as individuals with feelings, rather than as 'just homeless people'. The kind of accepting attitudes that were valued by homeless women is articulately expressed as follows:

"Yeah, it's the staff. A happy smile and a gentle chat and people don't look down on you for what you do. They know you're out there and they know exactly how you make your money, they know some of us are prostitutes, some of us are clippers, some of us are muggers, they know all of that but they still look at you, it's wiped clean, they don't see you for your problems here, they see you for the person you've got inside."

Many women were simply looking for 'someone to talk to' and a general level of care and support that appeared to be missing from the long list of agencies they encountered in their day-to-day lives. Respondents were especially appreciative when staff took the time to listen to them and understand their needs and circumstances. This enabled staff to signpost women to appropriate services, hence bringing practical as well as emotional benefits. One young woman explained the lengths that one social worker had gone to help her get into rehab because he was aware of her background and circumstances:

"I went to a rehab after that cos in the end… they knew I was doin' it but they didn't want to kick me out on the street, they wanted to get me 'elp. Cos the manager of that place, 'er 'usband's my social worker so tried 'is 'ardest and 'ardest to get me into rehab. Cos 'e knew I'd 'ad it rough and that and been on drugs since… for a long time."

The staff most valued by women were those who also performed an advocacy role, acting as a link between respondents and the other agencies they used. This, in turn, had a positive influence on women's experiences of these services. The service providers which appeared to best perform this role were day centre workers, out-reach workers and dedicated community-based drugs workers, who provided intensive one-to-one support to these women. Hence, they were able to build a positive relationship with their homeless clients, sometimes over many weeks and months, and were able to offer them a more appropriate service than they may have otherwise received.

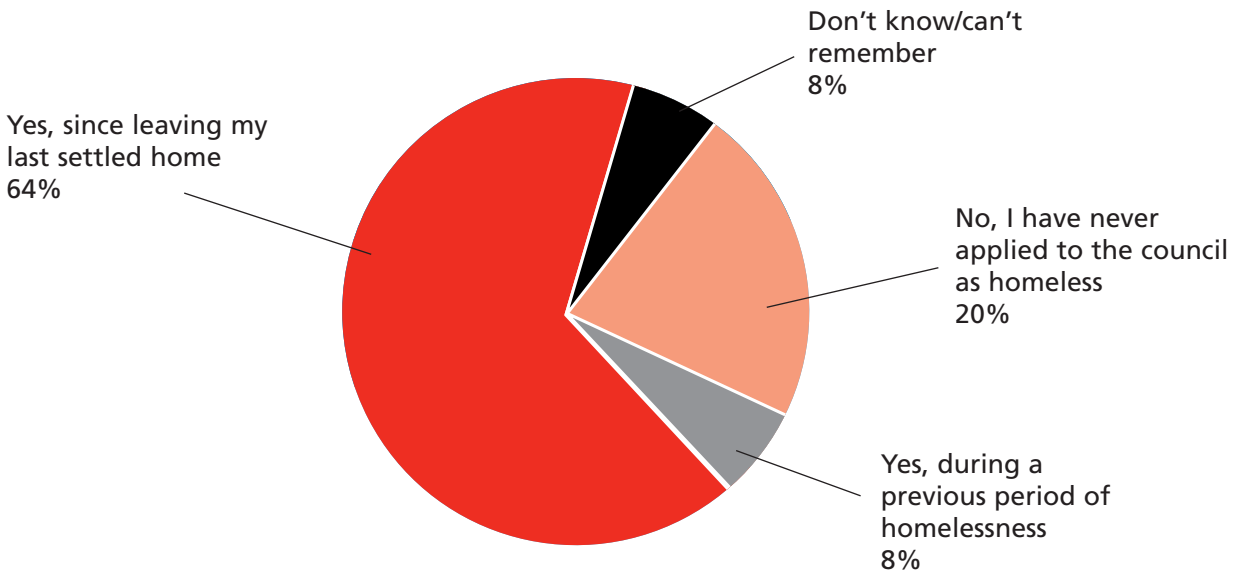
The breadth and depth of knowledge that staff possessed was also crucial in providing an appropriate service. While staff in hostels and other interim accommodation were well-versed in information about homelessness there were fewer that could support women with their wider problems. This point is well expressed by the following respondent:

"Without [X hostel] *I don't know where I'd be, this place is brilliant. I just wish sometimes that they did have enough knowledge about drug addiction. They've got so much knowledge on homelessness, so much, you don't have to tell 'em about it because they know, but with drugs and alcohol they haven't got that much experience and it would be a godsend if they had someone on a 24-hour basis who had experience or knowledge of drug addicts."*

7.4 Approaching the Local Authority as homeless

The majority of survey respondents had approached the local authority in an effort to resolve their current housing crisis (see figure 7.5). Talking to interview respondents further about this issue, however, suggests that many do not approach the local authority as soon as they become homeless, unaware that local authorities may have a duty to accommodate them, or may be able to assist them. Indeed some only approach local authorities for assistance once they have come into contact with staff in other services (day centres, night shelters, voluntary sector hostels) who advise them to make an application. In addition, although most respondents had approached a local authority as homeless since leaving their last settled home, over 35 per cent had *not* done so or could not remember doing so.

Figure 7.5 Proportion of respondents who have approached a Local Authority as homeless (n=128)



In terms of specific outcomes of homelessness applications, of those respondents who had approached a local authority as homeless, 61.3 per cent reported being recognised as homeless and 33.8 per cent as being in priority need[27]. However, a very high proportion (28.1 per cent – nearly the same proportion as were awarded priority need status) were found to be intentionally homeless (see table 7.6). As 'intentionality' should only be assessed once priority need is established it is likely that many of those deemed intentionally homeless were also those who had been awarded priority need status. In other words, many of the women who were apparently owed a statutory housing duty by virtue of being homeless and in priority need, would then have been excluded due to 'intentional homelessness'. This is particularly interesting if we think back to the reasons respondents left their last settled home (see Chapter 5), the vast majority of which quite clearly would not constitute intentional homelessness. Indeed, of those who had been found intentionally homeless nearly one third had left their last settled home because of a breakdown in their relationship with family or friends. Amongst the interview sample we came across no woman who had left the parental home for anything other than very good cause.

It was surprising that in London the proportion of women who reported being awarded priority need status was higher than outside London. In areas of high demand where there is an acute shortage of housing, eligibility for social housing is often interpreted more rigidly, as this provides a means of 'rationing' a very scarce resource. Why women in London were *more* likely to be awarded priority need status was puzzling. However, examining in-depth interview

[27] Local authorities have a duty to accommodate those who are found to be homeless and in priority need, providing they are not deemed to have made themselves 'intentionally homeless' and do have a 'local connection' to the area.

respondents' experiences of approaching local authorities (detailed further below), a potential explanation emerges. Many women approaching local authorities in London reported being deterred, *at the point of access*, from making homelessness applications, being told on arrival that they were not vulnerable enough to qualify, or that they could not be seen until they provided documentation, or simply being told there was nothing the local authority could do for them. These women, then, did not even reach the point of making an application, raising the possibility that only those who are most likely to be owed a statutory duty are 'allowed' to apply as homeless, in turn raising the probability of a successful outcome of application. Further research would be required, however, to ascertain the validity of this explanation.

Table 7.6 Outcome of most recent application to the Local Authority as homeless

	Yes (%)	No (%)	Don't know (%)	Total (%)
Recognised as homeless	61.3	16.3	22.5	100
Recognised as being in priority need	33.8	32.4	32.4	100
Intentionally homeless	28.1	35.9	35.9	100
n=80				

It is worth noting the very high proportion of respondents who were unsure as to the outcome of their recent application to the local authority. Of those who had approached a local authority as homeless 22.5 per cent said they did not know if they were accepted as homeless, 32.4 per cent did not know if they had been awarded priority need, and 35.9 per cent did not know if they had been found intentionally homeless (see table 7.6). In some cases women will have been informed about the outcome of their application but will not have remembered or understood this. However, the experiences of in-depth interview respondents strongly suggests that information regarding the outcome of their application fails to reach them. This is not to suggest that local authorities fail to carry out assessments once an application is made, or that they fail to inform women of the outcome – after all, homeless women are often mobile and a current address specified on an application form may not be valid for long. But one way or another, it appears that many homeless women do not receive information about the outcome of their applications. Respondents were often uninformed about the length of time they were expected to wait, and uninformed about action they should take if they failed to hear within a specified period of time (such as contacting the relevant housing office). One woman explained that she does not yet know whether her homelessness application has been successful and that she is still waiting to hear. Further discussion revealed that she had been waiting (and continues to wait) a very long time indeed. She explained:

> *"I haven't heard about it* [my application] *since….they said I had to wait for some time...I told them about being homeless and everything. But I put that down when I was about 22 and I'm 35 now."*

Respondents were asked to specify (from set categories) the nature of any assistance received from local authorities. Rather worryingly, nearly one third reported receiving 'no assistance' (see figure 7.7), raising questions about the extent to which local authorities are fulfilling their statutory obligations to provide advice and assistance to homeless people. Indeed we will see below, where we outline some particular examples of women's experiences of approaching local authorities, that all too frequently women appear to be turned away 'at the door' without so much as securing an appointment with an advisor.

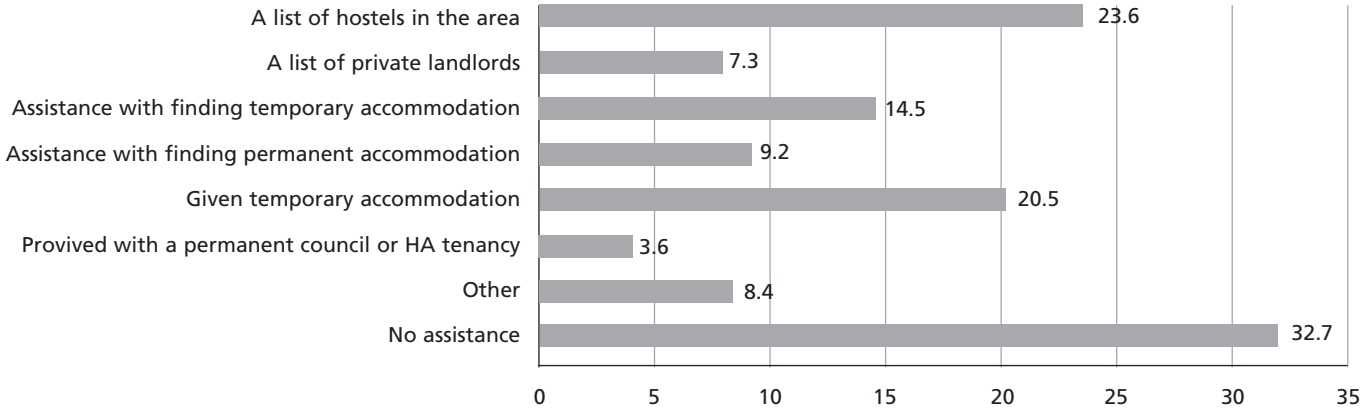
Figure 7.7 shows that a list of hostels in the area was the most common form of 'advice or assistance' provided to respondents, and that 'advice' appears to be more common than 'assistance'. For example only 14.5 per cent reported that they had received *assistance* finding temporary accommodation and less than seven per cent had received assistance finding a permanent home. Less than a quarter had been provided with (usually temporary)

accommodation[28]. Over 23 per cent, meanwhile, were provided with a list of hostels in the area, 7.3 per cent with a list of private landlords and 20 per cent with 'advice' about finding a home. Lists of accommodation providers, whether hostels or private landlords, were generally not deemed to constitute assistance by respondents because this rarely helped them secure accommodation. Indeed several commented that 'advice' about housing provision was virtually useless – lists were out of date, hostels were full, and women did not have the funds to access private rented housing:

> *"They give me a piece of paper with hostels and the numbers to ring…they said, "you can ring them and try them" but I didn't get no 'elp from them, they was either full up or something"*

These experiences prompted many survey respondents to cite local authority housing departments in their list of services which they had found particularly unhelpful. No respondent cited local authority housing departments in their lists of the most useful or helpful service they had encountered.

Figure 7.7 Help received from the Local Authority



Percentage of respondents (n = 110)

The experiences of in-depth interview respondents chimed with those of the women surveyed, with many expressing the view that local authority housing and homelessness departments are more interested in finding ways to discourage or reject applicants, than they are in assisting homeless people. Indeed the majority of women were dissatisfied with the service they received from the local authority – in terms of ease of access, the decision made regarding their homelessness status, and the treatment they received both before and after that decision was made.

It was common for women to have been discouraged (or prevented) in some way from accessing the local authority housing department and making an application, particularly in areas of high housing demand such as London. One, for example, (in London) reported that a local authority refused to interview her until she could produce her birth certificate or passport. It was particularly common for respondents to be discouraged from filling in a homelessness application on the basis that they *wouldn't* be assessed as priority need if they applied and hence 'would be wasting their time' doing so. Thus one woman was faced with a brief tick box questionnaire corresponding to the priority need categories (Do you have children? Are you aged 16-18?). When she responded negatively to these questions she was told she would be ineligible for assistance without being allowed to make a formal application and with no proper homelessness investigation undertaken. Others described similarly:

[28] Respondents were able to tick more than one option so there is some overlap between women reporting *assistance* finding accommodation, and those who were *provided* with accommodation, one leading to the other. Similarly there is overlap between 'advice about finding a home' and more specific forms of advice such as lists of hostels in the area.

"The only help I tried to get was for housing with the council and that was just a… waste of time. I went to X council and they said I didn't tick the boxes, I wasn't erm… They said I wasn't vulnerable enough."

"I was told by three different councils that I was….they couldn't help me basically cos I wasn't vulnerable enough."

Although clearly vulnerable many women did not fulfil the criteria set out in the homelessness legislation (and encoded in local authorities' policies and procedures) and this prevented them accessing emergency or temporary accommodation. In one such instance a local authority officer suggested a way to 'play the system'. This 'helpful' assistance however, involved advising a vulnerable young homeless woman to sleep rough:

"The woman at the housing office said ' look, if you can go back out on the street and sleep there and let them see you. As a woman, right now you're eligible, you're already allowed to contact about ten hostels in London, but if you get a CAT [Community Action Team] *number then you can contact every single hostel in London that's got a place.."*

The same woman was advised to apply for incapacity benefit – as a means of 'proving' that she had health problems – to give her more points and hence push her up the housing list. She rejected this suggestion because:

"I want to sort my life out. You know, 'well if you change to Incapacity [benefit] *then maybe we can help you' cos they're trying to say on paper you've got to look like this soulful, little, weepy person and because I seem like quite a strong person, even though I've been through a load of crap, I'm not going to let that put me down."*

In some instances a lack of a local connection was used by the local authority as a reason not to process a homelessness application, leaving some women with no choice but to return to where they had come from, often with negative consequences:

"When I was in Southampton, they just turned around and said 'oh you don't belong down here, you belong in Leeds…and they shoved me back to Leeds where there's lots of bad memories for me….Council say that a lot to me. When I have gone in places trying to find somewhere, even if it's just overnight or whatever they 'ave turned round and said 'oh are you from round here? Have you got family or friends? Do you know anybody round here?' and I say 'No', 'Well sorry, you're not priority', cos I'm not from that area, they've always turned me away."

Leaving aside the issue of whether women should be 'sent back' to locations they have very good reasons for leaving, the homelessness legislation and guidance dictates that 'local connection' should not be assessed until homelessness and priority need has been established and it has been determined that the applicant is not intentionally homeless. Only then can applicants be assessed against the 'local connection' criteria. If it is deemed that they do not have a local connection to the area their application should be passed to the local authority where this is the case. Their statutory right to accommodation has already been established, however, and the other local authority must fulfil this obligation. This is clearly not how the system is consistently being applied. The woman quoted above was simply told to go back to Leeds and apply there without any assessment of her homelessness or her needs taking place.

Many homeless women, then, appear to be at the receiving end of a housing service which is at times impenetrable, overly bureaucratic and difficult to understand and where the homelessness legislation is variably applied (or perhaps not adhered to at all). However, a minority of women challenged the decision made about their homeless status which

they perceived was made on the basis of incomplete information, or incorrect interpretation of the facts. One woman made a point of obtaining information about her rights before she approached the local authority, enabling her to insist on receiving her entitlement.

> *"It's like they* [the local authority] *want to put the blocks up all the time. Eventually the* [the housing officer] *turns up and he says ' I haven't got anywhere', and I says 'well you'd better go and find somewhere because you are legally bound….I says ' to find me accommodation because I….' I mean, I even,…G .checked with me at the CAB, I was the five points of vulnerability that entitled me to accommodation."*

These decisions notwithstanding, respondents were equally unhappy with the way their homelessness application was dealt with by local authority staff. Some of those who did proceed with an application were not impressed with the level of professionalism demonstrated by local authority staff. A common complaint was that women were made to feel uncomfortable by 'rude' and 'unhelpful' staff, in housing offices that did not afford them privacy and, hence, confidentiality and anonymity when making their housing applications. One woman described the *'stony faced looks'* from staff and went on to explain what happened when she had seen a housing officer about her situation:

> *"She was more than unpleasant, she was nasty. She grabbed hold of my stuff and she says 'just get out, get out' and I couldn't believe it. I says 'look, just leave my stuff alone, I'll carry it myself'. So I got shoved out in the rain. And I was just sitting in a bloody chair in the bar using the phone that she'd allowed me to use, and she's coming back with this nasty bloody attitude."*

Some women felt they were viewed in a negative way by the local authority staff because of their homelessness status and related health issues. In the words of one young woman:

> *"They ask questions like 'have you ever took something* [drugs]*? or 'have you got any mental health problems?' or 'have you got any physical problems?' and you tell them that and they look at you like you're dirty."*

A significant number of women who had unsuccessfully attempted to make a homelessness application in the early stages of their homelessness careers did not repeat the experience again because, in the words of one woman, *'If somebody in authority tells you 'we can't do anything', I just accepted it'.*

Similarly, the woman quoted above who was consistently told she had no local connection to the areas where she applied as homeless reported eventually 'giving up' on the local authority as a means of securing (temporary or permanent) accommodation. Yet this was a women who was clearly very vulnerable. She had a disrupted childhood, had been in local authority care from a young age, had been homeless intermittently since the age of eight, had a long history of suicide attempts and had been involved in various types of sex work since early adolescence.

So concerning were some respondents' stories of their experiences of approaching local authorities for assistance that we have presented these in full (below).

Experiences of approaching the local authority as homeless – Marcia's story

'Marcia', a woman with a long history of mental health issues, was asked to leave the house of a friend ('Diane') with whom she had been 'informally' lodging. After staying for a couple of months with another friend who was unable to accommodate her any longer, Marcia contacted the local authority's emergency out of hours team and they arranged bed and breakfast accommodation for her. They were clear that there was a three night time limit on this and advised that when Marcia left the B&B she should go to the housing office, which she duly did. She continues her story:

"They told me I had to produce my passport before they'd see me, so they wouldn't even see me… All my papers were at [Diane's] *house and she was refusing to let me have my stuff back so they wouldn't see me. They sent me away but I didn't have anywhere to go so I was really upset and was sat in the offices crying. The manager came out but just said the same thing about needing my passport. He also said he'd call security if I didn't stop crying. Eventually he told me that if I phoned the out-of-hours team after six o'clock they'd put me in a B&B and I said 'are you absolutely sure about that?' and he said 'yes'. But when I phoned the out-of-hours team they said that wasn't true and they couldn't help me."*

Marcia did eventually persuade the out-of-hours team to place her in a B&B for the night. She also contacted the police to help her retrieve her belongings from Diane's house and although she could not find her passport she found her birth certificate and returned to the housing office the following day. She explained what happened next:

"They started questioning why hadn't I gone until December when I'd been homeless since October? The thing is, at that time my priority was my mental health and it wasn't until December that I could start sorting out my housing. Then they said I wasn't homeless because I had a friend to stay with. Then they said I needed an eviction letter from [Diane]*. But it wasn't like that with* [Diane] *– I wasn't really supposed to be there in the first place for a start, but it just wasn't the kind of situation where I'd get an eviction letter. I told them to contact the police who helped me get my stuff back because they'd be able to confirm it but they just said they couldn't help me without a letter."*

Marcia provided lots of documentation about her situation so the local authority could make their assessment. She *'gave them all these documents and the telephone numbers for my herbalist, and doctors, and the police and for social services and occupational health. The housing officer went to see the manager and came back and said 'you're not priority'. But they hadn't checked any of the information – they said they could tell just on face value, by looking at me. They said if I had to sleep rough I wouldn't fair any worse than anyone else so I wasn't vulnerable enough. By then I was so emotionally drained but I held in how I was feeling because before when I'd cried they'd called security. But I did ask for a decision letter because I knew I was entitled to that and I've still got it. I'd told them I've suffered from depression for 30 years and the letter said 'everyone gets depressed'.*

Marcia had made a point of obtaining information about her rights and *'I knew by law they had to give me advice but I had to ask to see a housing advisor, they didn't offer that.'* When she did see an advisor *'they just asked for all the same documents as they had before, like an eviction letter and said I couldn't go on the private scheme until I had one'.* In the end the only assistance Marcia received was the telephone number of Crisis Open Christmas. It was late on the final night of this service so she had missed much of the advice on offer there but was given a booklet with information about hostels. She phoned round and within a week had secured a place at a women's hostel.

Experiences of approaching the local authority as homeless – Juliet's story

After a very troubled childhood involving sudden abandonment by her mother at a young age and sexual abuse from other family members 'Juliet' developed a drug dependency. Despite this, she managed to care for her young son, ensuring that he did not witness her drug use and was affected as little as possible by her lifestyle. Having accrued rent arrears in her private tenancy she was evicted and approached the local authority for assistance. She described what happened next:

"They weren't willing to help me. They said 'we'll put your son into care' basically…their words, 'we'll put your son into accommodation but we can't help you'…Coz I was a junky so they didn't want to help me…but if you're a professional and you're doing a job you mustn't judge a person. Whatever they are, you're meant to help them."

Fearful of her son being taken into care she asked her son's father if he would look after him for a while until she could sort out suitable accommodation. This was several years ago and Juliet has not lived with her son since.

7.5 Chapter summary: key findings

- Nearly 10 per cent of respondents were failing to access services – they had not been in contact with any service since becoming homeless. Over 23 per cent had not been in regular contact with any service
- Nearly 40 per cent of respondents did not seek assistance from an agency when they first became homeless. Many relied instead upon informal advice from friends and family members.
- A lack of knowledge about available assistance, particularly in the early stages of homelessness, emerged as a key barrier to service engagement. The bureaucratic and inflexible nature of some services, male dominated environments and unwelcoming physical layouts were also deterring women from using services.
- Some women are reluctant to use services which, by virtue of their association with that service, will identify them as homeless.
- The ways in which services are delivered can be as important as what is on offer. Women were particularly likely to engage with services which were informal, which felt 'safe', which provided women-only spaces, and which were staffed by 'caring' and 'non-judgemental' workers. Women were more likely to use, and be satisfied with, temporary accommodation provision if it resembled their notion of 'home'.
- The majority of respondents reported very negative experiences of approaching local authorities as homeless, with some being 'turned away at the door' or deterred from making an application by front-line staff. Of those who did succeed in making an application less than one third were awarded priority need status and 28 per cent were found to be intentionally homeless. Of those found to be intentionally homeless over 30 per cent had left their last settled home because of a relationship breakdown with friends or family. The 'advice and assistance' provided by local authority housing departments was often deemed to be 'useless'.

8 Unmet Needs, Requirements, and Aspirations

Much of the discussion in this report has implicitly and explicitly highlighted homeless women's vulnerabilities, the difficulties they face, and the needs they have. To summarise:

- The exploration of women's trajectories into homelessness and the relationship between early life experiences and traumas has revealed a host of needs around abuse, violence, reproductive health, and other trauma – needs which can intensify once women become homeless (Chapter 5).

- We have seen that the experience of homelessness can result in the development or intensifying of particular issues and needs, and that poor physical health, mental ill health, suicidal tendencies, drug and alcohol abuse, and sexual exploitation – all issues which women require assistance to address – are common consequences of homelessness (Chapter 5).

- Discussion about women's experiences of engaging with services and the barriers encountered in doing so has demonstrated that women seek services which are delivered in a welcoming informal way, that having 'someone to talk to' is of paramount importance and that many women require women-only emergency accommodation provision and women-only 'spaces' in other services (Chapter 7).

- Exploration of the barriers women encounter trying to resolve their housing problems – seen in particular through their experiences of approaching local authorities for assistance – have pointed to a range of ways in which women's housing needs are not being addressed (Chapter 7).

- We have seen that homeless women appear to be significantly disadvantaged in the labour force, have low levels of educational attainment and many seek assistance with these issues (Chapter 2).

Rather than repeating information about homeless women's needs and vulnerabilities covered elsewhere in the report, this chapter focuses on providing some quantitative information regarding women's needs and vulnerabilities, on those issues which respondents explicitly state that they require assistance with, and concentrates in particular on where women's needs are apparently unmet.

8.1 Unmet needs: failure to access assistance

Survey respondents were asked to specify those issues which they had not received any assistance with despite wanting such help or support. The results reveal a reservoir of unmet need. Table 8.1. shows that women are failing to access help regarding domestic violence, mental health and drug use as well as financial issues, claiming benefits, harassment, and many other issues. Chiming with the expressed requirements of interview respondents, a need for more emotional forms of support such as counselling and someone to talk to are apparent in addition to practical forms of assistance such as finding a home and accessing education.

Indeed a number of interview respondents reported times (whilst homeless and prior to becoming homeless) when they had desperately wanted help but none had been available or forthcoming. In Chapter 5 we mentioned a young woman who became severely depressed after a miscarriage and abandoned her tenancy, simply 'putting the key through the door' one day and walking away. She went on to explain that "*I didn't get the help I needed… I 'aven't 'ad counselling for it or anything but I need help".* And women with a wide range of personal, social and health related needs were not only failing to access the assistance they required to meet and address these needs, but were receiving the *wrong* help. For example, one women whose children had been adopted approached her doctor requesting counselling for this issue. She explained what happened:

"I'd like to speak to a counsellor…..I've tried to get in through doctors but the doctor said 'we'll put you on, try you on medication first and see how that goes."

Table 8.1 Unmet needs

Wanted help, but not received help with:	**%**
Finding a home	39.3
Domestic violence	24.6
Returning to education	22.1
Someone to talk to	21.3
Mental health issues	21.3
Claiming benefits	20.5
Financial Issues	19.7
Drug use	18.0
Counselling	18.0
Budgeting	18.0
Relationship difficulties	17.2
Seeking employment	16.4
Settling in to a new home	16.4
Anger management	15.6
Staying in education or training	13.9
Independent living skills	13.1
Contacting your parents/ family	12.3
Harassment	10.7
Making friends	9.8
Health issues	9.8
Alcohol use	9.0
Pregnancy	9.0
Contacting your children	8.3
Accessing leisure facilities	7.4
Sexual health	4.9
Contraception	4.1
Immigration issues	3.3
Abortion	2.5
Parenting	2.5
Gambling	1.6
Racial harassment	0.8
n=122	

The proportion of survey respondents who have wanted assistance but not received that help is particularly concerning if we consider how many also reported traumatic life experiences and vulnerabilities, in turn likely to have resulted in high levels of need. This has been discussed at some length in Chapter 5 but table 8.2 quantifies some of these needs and vulnerabilities. It shows that 60 per cent of survey respondents had experienced domestic violence and 49 per cent other forms of abuse; 31 per cent self harm; 36 per cent reported mental ill health; 34 per cent have experienced drug dependency; 29 per cent had a disrupted education: and 54 per cent had an unsettled childhood. That over half of all respondents have little contact with their family and less than 20 per cent have supportive families would indicate an absence of the kinds of support networks which can make all the difference to any person with complex needs and experiencing these kinds of problems in their life. Given the many and varied issues and problems apparently facing homeless women it is perhaps no surprise that nearly half reported difficulties coping.

Table 8.2 Homeless women's life experiences and vulnerabilities

Experience		**%**
has experienced domestic violence	81	60.4
has not much contact with their family	73	54.5
had an unsettled life while growing up	73	54.5
has experienced abuse (other than domestic violence)	66	49.3
Sometimes finds it difficult to cope	65	48.9
has used drugs to blot out their problems	50	37.3
has mental health problems	48	35.8
has experienced drug dependency	45	33.6
Sometimes self-harms	41	30.6
was suspended or excluded at school	39	29.1
has experienced alcohol dependency	36	26.9
has been on probation	30	22.4
has been in LA care	28	20.9
has had a pregnancy terminated	27	20.1
has a supportive family	26	19.4
has been in prison or a YOI	21	15.7
has a physical disability	15	11.2
n=134		

Of course, in some cases respondents had no requirement for assistance with certain issues so we would expect the figures in table 8.1 to be relatively low. Women who have never experienced domestic violence, for example, are unlikely to have wanted support or assistance with this issue but failed to access that assistance. However, if we look just at those women who report specific needs and vulnerabilities, the figures relating to those who have not received required help rise sharply:

- over 40 per cent of women who *have* experienced domestic violence also reported having wanted assistance with this issue but had not having received any.
- 55 per cent of women who reported *having* mental ill health reported not having received help or support with this despite wanting assistance.
- 39 per cent of those who *have* used drugs reported wanting assistance with drug related issues but not having received it.

Certain groups appear to have greater unmet needs than others. Comparing respondents who had and had not slept rough, for example, suggests that rough sleepers have greater difficulty accessing the help and support they require. In particular, women who had slept rough were far more likely to report not receiving the assistance they required with:

- domestic violence (30 per cent of women who have slept rough compared with 18 per cent of non-rough sleepers)
- someone to talk to (27 per cent compared with 11 per cent)
- drug use (27 per cent compared with 2 per)
- contacting parents (18 per cent compared with 5 per cent)
- alcohol use (14 per cent compared with 2 per cent)
- making friends (14 per cent compared with 2 per cent)
- contacting their children (11 per cent compared with 5 per cent)

It is likely that, in some cases, women's inability to access the assistance they require stemmed from their active *exclusion* from services. Overall, 40 per cent of respondents reported having been excluded from services. The most common reasons for exclusion were respondents' behaviour, their age, and their drug or alcohol use, and 11 per cent had also been excluded from services simply because they were homeless. There were strong correlations between exclusion from services and negative life experiences or personal problems. The implications of this in terms of provision of support are rather serious and suggest the most vulnerable women are also those whose needs are most likely to remain unmet. For example, compared with 40 per cent of the overall sample, higher percentages of particular groups of women had been excluded from a service, including:

- 60 per cent of women with mental ill health
- 72 per cent of women care leavers
- 54 per cent of women who sometimes self-harm
- 53 per cent of women with coping difficulties
- 50 per cent per cent women who had experiences drug dependency

And even where women had not been actively excluded from a service, there is evidence that insensitive and inappropriate service delivery may *effectively* exclude certain groups of women. The barriers respondents encountered accessing services and some of their more negative experiences of attempts to do so have been discussed in Chapter 8. It is worth noting here however that women with particular needs and requirements appear to be deterred from using services and the results presented in table 8.3 indicate that some services are not being delivered in a way which ensures equality of access to all.

Table 8.3 Proportion of respondents reluctant to use services because of the following:

	%
Their drug or alcohol problems	13.6
Their mental health	12.7
Their physical health	11.1
Their homelessness	11.1
Their age	10.3
Their gender	10.2
Their appearance	9.3
Their offending history	9.3
Their ethnic origin	8.5
Their religion	7.9
Being in a couple	7.6
Their behaviour	6.8
Their physical disabilities	6.8
Their sexuality	5.1
Their pets	5.1
Other	4.2

n = 118, except for religion (which was added at a later date) where n = 101

8.2 Daily requirements

Discussions about the needs of homeless women tend to focus on issues such as dependencies, mental health, physical health problems and such like as well as longer-term requirements likely to assist women to escape homelessness and maintain a more settled life, such as employment and training needs. And it is, of course, essential that these needs are acknowledged, understood and addressed, not least because efforts to resolve and prevent homelessness would be futile otherwise.

It is also important, however, to recognise the everyday and somewhat mundane needs and requirements of homeless women for it is these which often dominate their daily lives. Food, water, clean clothing, and warm footwear are all essential requirements for homeless women that are not always readily accessible. And, like the non-homeless population, new requirements are emerging. For example a number of respondents pointed to the importance of having, and being able to charge, their mobile phones. One woman working as a prostitute explained that a mobile phone allowed her to wait in the safety of her temporary accommodation for clients to phone her rather than walking the streets looking for trade. Another pointed to the fact that possession of a mobile phone allows hostel providers to contact her and emphasised how important it was, therefore, that her phone was always fully charged and able to receive calls. These issues have been discussed at some length in Chapter 6 where we pointed to the range of ways in which women negotiate access to everyday necessities such as food and washing facilities, but it is important to emphasis here that everyday requirements do represent key needs amongst homeless women. For while other issues, needs and aspirations – for example finding employment, addressing alcohol and drug dependencies, being reunited with children – were of the utmost importance to many women interviewed, it was these rather more mundane needs which dominated their daily lives:

"The insoles of my boots went so my feet were all sweaty and blistered and I could hardly walk on them so just to be able to come in and wash and get some socks, that's more important than anything else to be honest."

"just hurdles like, you know, being warm, a hot drink, something to wear, your feet not hurting, water to drink, which is hard to believe but I thought 'I haven't got the cash to get water."

It was noticeable, then, that respondents often talked about their needs and desires in terms of basic necessities, necessities which the non-homeless population take for granted but which represent luxuries to many homeless people. This is illustrated well by the experiences of Jane (introduced in Chapter 6) who had been sleeping rough for six months. During the interview she pointed to several occasions when she was delighted to have obtained certain basic items. These included:

- enough cash to buy a hot drink in a café
- some new socks and tights
- a plastic bottle that she could fill with water from a public water fountain.

These items can represent far more than merely drinks and new clothes to homeless women. In a context where many have nowhere to sleep, where their health is affected by the cold, where their feet are often sore and blistered from walking around and where they fear for their safety (particularly at night), money to buy a hot drink in an all night café provides far more than just that hot drink. It also provides safety, shelter, somewhere to go at night, warmth, somewhere to rest, and a way of preventing illness. Jane explained that:

"Just having cash…..to be able to go in there [the all night café] *is more important than anything. To have that safety, security during the night, or relief from the cold."*

Similarly, she described how delighted she was at being given some new socks and tights by staff in a day centre:

"To get these socks and tights, I just went completely mental. It's absolutely wonderful, I couldn't have had anything better."

Describing money for a cup of coffee as 'more important than anything', and the acquisition of tights as 'wonderful' and the best thing that could have happened may appear odd, particularly when this respondent had nowhere to live, nowhere to sleep, and barely enough money for food. But this simply highlights how important these items can be for women who are perpetually cold and struggling to access everyday essentials.

For Jane, obtaining new tights also opened up important opportunities – opportunities which may ultimately enable her to escape homelessness: Jane is a professional woman who has worked for much of her life. For a time she did manage to work temporarily while she was sleeping rough and is hoping to secure employment again in order to 'get off the streets' within a few months. However, the professional environment in which she works requires smart clothes. She explained that her clothes were still relatively smart when she had secured her temporary job but as her clothing had deteriorated this was deterring her from applying for jobs. Acquiring new tights (and finding a day centre where she could iron her clothes) made this possible once again.

"If I could get some casual work then that would be OK but I have to say that up until the last couple of weeks that wasn't a possibility……. It sounds silly but I didn't have enough socks or tights."

8.3 Long-Term Needs and Aspirations

In addition to the women's every day requirements, and their rather more complex needs, meeting the needs of homeless women also requires an understanding of their longer-term goals and aspirations. Amongst those women interviewed in-depth these tended to focus on:

- family life
- having a 'place of their own'
- being in employment
- attending college or university.

Amongst women with children, the hope of regaining care of their children often underpinned their desire for a secure and stable home life and was a key motivating factor in their lives. By obtaining a secure place of their own, preferably a house suitable for a family in a decent location, and by finding employment they felt they would be able to reunite with, and bring up their children in a stable environment. One woman articulated her need for settled accommodation in these terms:

> *"But as soon as I got my own place, I mean, I will get her back, I need my own place."*

Respondents did talk about very specific hopes and goals: one had written a short story while in prison which had been published and was very keen to pursue her writing talents and develop this as a career; another was due to embark on a training programme which incorporated voluntary work and saw this as a potential route to a more settled life: others wanted to find employment, often in specific industries: and others wanted more than anything to have a child.

Sadly, having identified their aspirations and the future steps they hoped to take in their lives, most respondents faced barriers in pursuing, never mind reaching these goals. For example, many expressed the view that having settled accommodation was a prerequisite for sustaining paid employment and so could not pursue this goal until their housing problems had been resolved.

> *"If I get a house now it would be great. I'd get a job and everything, try and get a decent job."*

Likewise, some of those expressing a desire to return to education faced similar challenges, pointing to the difficulties studying while homeless. Other barriers were also were apparent, namely a lack of confidence and feeling 'out of touch' with the education system:

> *"I have looked at college courses and things and I know what's available. It's just having the confidence to say 'right, I'm going to make a decision, I'm going to do that'."*

> *"I'm not good at the, you know, education system. I don't know what goes on any more…I don't know how to do it, I don't know how to get into it."*

And for some respondents, particularly younger women, many of whom had only ever known homelessness, the transition to settled independent living – to having their 'own home' – was contingent upon receiving practical support, for example with budgeting and day-to-day life skills. Several women were very aware that they would find it difficult to cope in their own tenancy without such assistance and could not move into a home of their own until this was available to them:

"Oh help with sort of finding furniture, support for just like someone to talk to about how it is and maybe someone to help me go shopping and keep and eye on us, cos even though I feel like I'm doing this stuff now myself when it actually comes to the crunch I don't know if I can, and knowing how to put on water and stuff around the home that I think a lot of people kind of think is automatic knowledge."

It was noticeable that many of the women interviewed articulated their aspirations in broad, but simple terms: they wanted those things they had lost through being homeless: they were seeking 'normality'. The woman quoted below expressed the views and aspirations of many others:

"So we're properly re-housed….that's all I dream about…just to 'ave normality again. Just an 'ouse what I can clean and cook for me family, and put my children in bed and read 'em a story, and wake up and take 'em to school. Things like that, that's all I really really want…That's all I want in life, to get that. It seems like I've got more chance winning the lottery at the moment…"

8.4 Chapter summary: key findings

- There are high levels of vulnerability evident within the female homeless population – mental ill health, drug and alcohol dependencies, experiences of physical and sexual abuse and traumatic life experiences are commonplace. Many of these needs are not being met or addressed.

- Many women reported wanting help with a wide range of issues – from finding a home, to claiming benefits, to domestic violence – but not receiving the help they required. Many wanted emotional support whether through formal counselling or just 'someone to talk to' which had not been available to them.

- Women's failure to access the support and assistance they require may stem partly from their active exclusion from services. Over 40 per cent of respondents had been excluded from a service. Worryingly, some of the most vulnerable women – care leavers, women who self-harm, women with coping difficulties – were those most likely to have been excluded from services.

- Although many respondents had high-level and complex needs it is often the day-to-day requirements – hot drinks, warm socks – which dominate homeless women's lives.

- Women's aspirations focused on family life, a home of their own, securing work and education courses. Their children were a key motivating force in their lives. However, it was 'normality' which most desperately sought, normality associated with settled, rather than homeless life.

9 Recommendations

The experiences of homeless people are well documented in literature and research but all too often this research is dominated by the views and experiences of homeless men. And while homeless people, regardless of gender, will share many common experiences, a failure to adequately understand the (sometimes distinct and unique) situations and experiences of homeless women can ultimately result in a failure to develop appropriate responses – to develop policies and initiatives sensitive to homeless women's needs; to develop services which are accessible to homeless women; to deliver services in ways which match homeless women's needs and preferences; and to tackle the underlying issues and experiences which result in homelessness.

This research suggests that, despite significant advances in homelessness policy and legislation over the past decade, and a range of new government initiatives and strategies, homeless women are enduring traumatic and difficult homelessness situations and experiences. Many are sleeping rough, placing themselves in danger of assault and sexual attack, and many more are living in a range of hidden and marginalised housing situations. Many are not receiving the assistance they require with accessing accommodation or with addressing their other needs. And very vulnerable women who have already experienced traumas in their lives are still becoming homeless. Indeed comparison between the findings of this research and those of a similar study conducted by Crisis in the late 1990's suggests that homeless women are still encountering many of the same difficulties as they were nearly a decade ago. There is still, then, much work to be done if homelessness amongst women is to be effectively tackled and prevented.

Drawing on the findings presented in this report, this section provides a series of recommendations within five key themes which, if actioned, have the potential to dramatically improve the situations and experiences of homeless women.

1 Local authority homelessness assessments, decisions and practices

Very vulnerable single women are failing to access accommodation from local authorities. Many do not approach a local authority, others are apparently deterred from applying by front-line staff, and others are deemed 'not vulnerable enough' to qualify for housing under the terms of the homelessness legislation. In addition, women with children being temporarily cared for by others are apparently being treated as 'single' and are not, therefore, awarded priority need status. As a result many homeless women are left with no option but to sleep rough, squat, rely on the goodwill of friends and family members or form unwanted sexual partnerships with men in order to put a roof over their heads.

1-A Local authority homelessness assessments should take account of the traumatic life experiences that many homeless women have encountered and recognise the vulnerability which results from such experiences when determining whether a woman qualifies as being in priority need.

1-B The process of determining priority need should always take account of information about homeless women's wider situations, including their non-dependent children.

1-C An independent assessment of local authority practices with regard to homelessness applications and implementation of the Homelessness Act 2002 should be carried out to ensure correct procedures are being adhered to and that the 'advice and information' local authorities are obliged to provide is of practical use to applicants.

2 Responding to the needs and preferences of homeless women

This report has highlighted a range of ways in which services are not reaching, or are not sensitised to the needs of homeless women. Gender does influence homeless women's needs, situations and preferences and services are not always sensitive to this fact, leaving women disengaged from, or reluctant to use, services. As a result, equity of access to services is not always a reality and many homeless women do not receive the support and assistance they require.

2-A Improve the knowledge of rough sleeper and other outreach teams about the locations in which homeless women sleep to ensure equity of access to these important services.

2-B Gender training for management and front-line staff in homelessness agencies should be standard practice to ensure that services do not indirectly discriminate against women by operating in ways which are insensitive to their needs and preferences.

2-C Increase provision of counselling and develop 'informal emotional support' services.

2-D Increase the provision of women-only accommodation and daytime services, and of women-only areas or sessions within mixed services. In mixed services, particularly night shelters, there is a need to improve staff awareness of health and safety issues so that women are safer within mixed environments.

2-E Recognise the existing barriers to homeless women's engagement in education and employment, and develop appropriate, gender-sensitive approaches to increase their access to learning and skills.

2-F Greater consideration should be paid to the physical environment to ensure services are not off-putting to women. In particular, there is a need for welcoming reception areas and the removal of physical barriers such as entrance lobbies and glass divides.

3 Addressing gaps in service provision: preventing and resolving homelessness

This research highlighted a number of gaps in service provision, over and above ways in which services need to become better sensitised to gender differences. Women in prison are losing their accommodation and becoming homeless on release, women under 16 are too young to access homelessness services, women are being separated from their partners because hostels are rarely able to accommodate couples, women are unaware of the services available to them when they first become homeless, and they have to negotiate their way through a confusing myriad of different agencies just to access the support and help they require. The following recommendations, whilst arising from the issues reported by women, are not necessarily gender specific and may be of equal benefit to homeless men.

3-A There is a need to develop or expand services which respond to particular needs or sections of the homeless population including: housing advice services run by housing experts in prisons as standard practice; accommodation and other homelessness services for homeless women under the age of 16; and accommodation provision for homeless couples.

3-B A more integrated approach to meeting women's needs is required. There is a need to develop ways in which services are more joined-up, involving a range of services including sexual and domestic violence, substance misuse and mental health services, which can be navigated by homeless women with greater ease.

3-C Information, education and advice about homelessness should feature on every school curriculum.

3-D Hostels, day centres and other drop-in services should consider the range of services they offer and how these may be expanded. There is evidence of a need for:

- clothing banks from which women can borrow smart clothing when required
- post restaunte services providing women with a fixed address while homeless
- 'left luggage' facilities where women can leave possessions such as sleeping bags and documentation during the day, as well as longer-term storage facilities
- extended opening hours at day centres and other services to provide early morning, weekend and bank holiday provision
- daytime 'napping' facilities in day centres

4 The Role of Non-Homelessness Places and Public Facilities

Homeless women make use of a wide range of public spaces and facilities, from libraries and galleries to bookshops and public transport. These spaces and facilities provide them with many daily necessities – warmth, somewhere to nap, to wash and to rest. They are places where homeless women can be anonymous, are not identifiable as homeless, and where they feel safe.

4-A Raise awareness amongst staff in public spaces (libraries, galleries and such like) about the benefits of these spaces for homeless women, why they use them, and related issues.

4-B Provide information about homelessness, and advertise local homelessness and women's support services in public spaces and places.

4-C Government funds to support homeless women and services for them should be made more widely available i) to public facilities and other non-homelessness agencies to finance homelessness-related initiatives, and ii) to enable homelessness agencies to deliver their services in 'non-homelessness' spaces and services.

5 Paradigm Shift

Much of our knowledge about homelessness is derived from research, statistics and other data inadvertently dominated by the situations and views of homeless men. Our understanding of the needs of homeless people, their experiences and situations is rarely based upon an appreciation of gender differentials. There are issues raised in this report which point to a need to develop and expand our 'thinking' about, and approaches to, women's homelessness – about the situations women find themselves in, about their self-identity, and the ways in which these issues impact on their service use and the ability of policy and practice to tackle homelessness amongst women.

5-A Recognise and consider the invisibility of many women's homelessness – those temporarily accommodated and those sleeping rough – when developing policy and services to ensure new initiatives reach and benefit homeless women.

5-B Develop ideas about how best to work with women who don't define themselves, or don't want to be identified, as homeless.

5-C Recognise that women are engaging in unwanted sexual partnerships as a response to their homelessness and that this is another, apparently all too common, dimension to hidden homelessness. This is particularly important if we consider that many women become homeless in the first place fleeing violent or difficult relationships with men. There are already services working specifically with women in the sex industry who will be all too aware of the link between homelessness and sex work but this awareness needs extending beyond specialist services.

5-D There is an urgent need to start measuring and examining women's homelessness in order to address the deficit in evidence and understanding. All data collection exercises which pertain in any way to homelessness must collect information about women and must be capable of disaggregating their data by gender.

Appendix 1: survey questionnaire

HOMELESS WOMEN SURVEY

Centre for Regional Economic and Social Research, Sheffield Hallam University
for Crisis

Date_____ Location of Interview_____

We would be grateful if you could answer a few questions about your situation to help us understand the experiences of homeless women. You do not have to answer any questions you'd prefer not to answer, you will remain anonymous, and you can end the interview at any time.

Definitions

For the purposes of this survey:

*Being **'homeless'** means not having secure accommodation that you have a right to occupy, or can occupy. E.g. if you are staying with a friend temporarily, or if you can't return to your own home because you are fleeing violence you would be homeless.*

***Sleeping rough** means that you do not have anywhere, temporary or otherwise, to sleep in. People bedding down doorways, cars, derelict buildings, sheds, or any other place that is not designed for people to sleep in would be classed as sleeping rough.*

1) YOUR CURRENT AND PAST HOUSING SITUATION

I'd like to start by asking you a few questions about your housing situation

Q1. What type of accommodation, if any, are you currently living in (e.g. a hostel, staying with friends, rough sleeping)? ……

Q2. How long have you been there (or been sleeping rough)? ……

Q3. How long have you been homeless (i.e. when did you leave your last settled home) ……

Q4. Where were you living immediately before becoming homeless?

Location (e.g. city/town/village)…… With who?.....
Tenure……...

Q5. And why did you leave? ……...
……..
……..
……..

Q6. Did you seek any help, advice or assistance when you realised you might become homeless?
(tick all that apply)
Yes, from friends or family ☐
Yes, from an organisation/service (e.g. advice centre, the council) ☐
Yes, from someone/somewhere else (please specify) ☐
No, I didn't seek help, advice or assistance ☐

Q7. Have you been homeless before now? If so, how many times?.....

Q8. When was the first time you experienced homelessness? *(e.g. how long ago)*……..

Q9. Have you <u>ever</u> been in any of the following housing situations?
(please put the approx. number of times you have been housed in each situation in the boxes provided.)

in a homeless hostel run by the council	_____	in a bail/probation hostel	_____
in a h'less hostel not run by the council	_____	your own council or HA tenancy	_____
in a B & B	_____	in a property you own/are buying	_____
your own tenancy with floating support	_____	in a refuge	_____
with foster parents	_____	in prison/young offenders institution	_____
in your own private rented tenancy/house	____	in a residential detox/rehab centre	_____
with friends on a temporary basis	_____	in a children's home	_____
with relatives on a temporary basis	_____	sleeping rough	_____
in housing provided by NASS	_____	in a squat	_____
with a partner on a *temporary* basis	_____	in supported accommodation for	
in a night shelter	_____	people with mental health problems	_____

Other (please state)……

Q10. Please list the last places you lived or stayed (starting with the most recent) and the reason why you left *(including periods of rough sleeping, in prison and in hospital)*

Where you lived/stayed	Why you left	How long you lived/ stayed there
1)	.....	.....
2)	.....	.....
3)	.....	.....
4)	.....	.....

2) THE SERVICES YOU USE

I'd now like to ask you a few questions about the services you have used

Q11 & Since becoming homeless have you used any of the following services? And are

Q12 there any that you would not consider using under any circumstances? *(tick all that apply)*

	once/ occasionally	regularly	used for a while	not aware of this type of service	would not consider using
Drop-in/day centres for the homeless	☐	☐	☐	☐	☐
Other drop-in/day centres	☐	☐	☐	☐	☐
YWCA	☐	☐	☐	☐	☐
Rough sleeper outreach teams	☐	☐	☐	☐	☐
Other outreach teams	☐	☐	☐	☐	☐
Floating support services/worker	☐	☐	☐	☐	☐
Night shelters	☐	☐	☐	☐	☐
Health centres for the homeless	☐	☐	☐	☐	☐
GP/health centres (not for the homeless)	☐	☐	☐	☐	☐
Accident and Emergency Dept	☐	☐	☐	☐	☐
Family Planning Clinic	☐	☐	☐	☐	☐
Mobile Sexual Health Van	☐	☐	☐	☐	☐
In-patient or out-patient psychiatric services	☐	☐	☐	☐	☐
Detox or rehab service	☐	☐	☐	☐	☐
Council's Housing Advice Centre	☐	☐	☐	☐	☐
Citizens Advice Bureau or similar	☐	☐	☐	☐	☐
Your local MPs surgery	☐	☐	☐	☐	☐
Youth Offending Team	☐	☐	☐	☐	☐
Services for women experiencing violence	☐	☐	☐	☐	☐
Services offering help to younger people	☐	☐	☐	☐	☐
Women only services (of any kind)	☐	☐	☐	☐	☐
Employment agencies	☐	☐	☐	☐	☐
Job Centre	☐	☐	☐	☐	☐
Benefits Agency	☐	☐	☐	☐	☐
College or university	☐	☐	☐	☐	☐
Connexions	☐	☐	☐	☐	☐
The Big Issue	☐	☐	☐	☐	☐

Library	☐	☐	☐	☐	☐
Rent Deposit scheme	☐	☐	☐	☐	☐
Rape Crisis	☐	☐	☐	☐	☐
Counselling service	☐	☐	☐	☐	☐

Others *(please state)*……

Q13. Please list any services you found particularly useful or helpful, or had a positive experience of using *(list as many or as few as you like).*

1. ..... 3. .....
2. ..... 4. .....

Q14. Please list any services you found particularly unhelpful or had a negative experience of using/approaching for assistance *(list as many or as few as you like)*

1. ..... 3. .....
2. ..... 4. .....

Q15. Have you ever <u>been excluded</u> from a service (hostel, day centre, doctors etc), or <u>been</u> <u>reluctant</u> to use a service because of any of the following? *(tick all that apply)*

	Been excluded	Been reluctant to use
your age	☐	☐
your gender	☐	☐
your ethnic origin	☐	☐
your homelessness	☐	☐
your mental health	☐	☐
your physical health	☐	☐
your appearance	☐	☐
your religion	☐	☐
being in a couple	☐	☐
your behaviour	☐	☐
your physical disabilities	☐	☐
your drug or alcohol problems	☐	☐
your offending history	☐	☐
your sexuality	☐	☐
your pets	☐	☐
other (please state)	☐	☐

Q16. Have you applied to a local authority/council as homeless since leaving your last settled home, or during any previous period of homelessness?

Yes, since leaving my last settled home ☐ *(go to Q17)*

Yes, during a previous period of h'lessness but not since leaving my last settled home ☐ *(go toQ17)*
No, I have never applied to the council as homeless ☐ *(go to Q19)*
Don't know / can't remember ☐ *(go to Q19)*

Q17. What was the outcome of your most recent application? *Were you:*

Recognised as homeless?	Yes ☐	No ☐	Don't Know ☐
Recognised as being in priority need?	Yes ☐	No ☐	Don't Know ☐
Found to be intentionally homeless?	Yes ☐	No ☐	Don't Know ☐

Q18. What assistance did you receive from LA/council? (tick all that apply)

Advice about finding a home	☐	Assistance with finding temporary accommodation	☐
A list of hostels in the area	☐	Assistance with finding permanent accommodation	☐
A list of private landlords	☐	Given temporary accommodation (e.g. a hostel place)	☐
None	☐	Provided with a permanent council or HA tenancy	☐

Other (please specify) ……..☐

4. ABOUT YOUR EXPERIENCES

Q19. Have you ever <u>wanted</u> help, support or advice with any of the following, but <u>not received</u> that help ? *(tick all that apply)*

finding a home	☐	mental health issues	☐	counselling	☐
claiming benefits	☐	seeking employment	☐	abortion	☐
budgeting	☐	settling in to a new home	☐	alcohol use	☐
returning to education	☐	staying in education/training	☐	making friends	☐
accessing leisure activities	☐	immigration issues	☐	harassment	☐
pregnancy	☐	relationship difficulties	☐	parenting	☐
independent living skills	☐	someone to talk to	☐	health issues	☐
domestic violence	☐	contacting your parents/family	☐	sexual health	☐
anger management	☐	contacting your children	☐	contraception	☐
gambling	☐	drug use	☐	financial issues	☐
racial harassment	☐	Others *(please state)* ……			

Q19a Are you interested in doing any employment or educational activities, now or in the future?

Yes, employment activities ☐ Yes, educational activities ☐ Yes, both ☐

Q20. Would you say that any of the following statements apply to you? *(tick all that apply)*

I have slept rough	☐	I have experienced alcohol dependency	☐
I have mental health problems	☐	I have experienced drug dependency	☐
I have been in local authority care	☐	I have used drugs to blot out my problems	☐
I have been on probation	☐	I have applied for asylum since coming to the UK	☐
I have problems with reading and writing	☐	I have had a pregnancy terminated	☐
I have a physical disability	☐	I have been in prison/ young offenders institute	☐
I had an unsettled life while growing up	☐	I was excluded/suspended when I was at school	☐

I sometimes self-harm	☐	I do not have much contact with my family	☐
I sometimes find it difficult to cope	☐	My family are very supportive of me	☐
I have a learning disability	☐	I have experienced abuse due to my sexuality	☐
I have experienced domestic violence	☐	I do not like agencies and services being	☐
I have experiences other forms of abuse	☐	involved in my life	☐

Q21. Are there any other statements that you would like to make about yourself? *(please state)*

.....

.....

5. About You

Finally, I need to ask you a few quick questions abut yourself so we know we have surveyed a range of different people

Q22. DOB ..... **Q23. Initials**.....

Q24. Sexuality

Heterosexual ☐ Lesbian ☐ Bisexual ☐

Do not wish to say ☐ Not sure ☐ Other ☐

Q25. Current Relationship status:

Single ☐ Married/in relationship ☐ Widowed ☐ Other .....

Q26. Do you have any dependent children?

Yes (please state how many)_____ *(go to Q27)* No ☐ *(got to Q28)*

Q27. Are your children:

living with you	☐
temporarily being looked after by someone else	☐ *(state who)*.....
temporarily in LA care/foster home	☐
living with someone else permanently/indefinitely	☐ *(state who)*.....
In LA care permanently/indefinitely	☐
adopted to someone else	☐

Other *(specify)* .....

Q28. Ethnic Origin

White		*Black or Black British*		*Other*	
British	☐	British or Black Caribbean	☐	Iraqi	☐
Irish	☐	British or Black African	☐	S.E.Asian	☐
Other white (please state)_____		Other British or Black	☐	Chinese	☐
				Other European	☐
Asian or Asian British		*Mixed Heritage*		Jewish	☐
Indian	☐	White and Black Caribbean	☐	Roma/Gypsy	☐
Pakistani	☐	White and Black African	☐	Somali	☐
Bangladeshi	☐	White and Asian	☐	Kurdish	☐
Kashmiri	☐	Other mixed race (please state)	☐	Iranian	☐

Other Asian (please state)_____ _____ Other ☐

Prefer not to say ☐

Q29. Source of Income *(tick all that apply and stress to respondent that this is CONFIDENTIAL)*

Benefits	☐	Financial help from parents	☐
Begging	☐	Financial help from partner/friends	☐
Part time job	☐	The sex trade (e.g. prostitution)	☐
Full time job	☐	Pension	☐
Savings	☐	Inheritance / trust fund	☐

Something else (please state)_____

Q30. Have you ever had to resort to illegal activity (e.g. theft, fraud) in order make ends meet while you've been homeless? Yes ☐ No ☐ Don't know ☐

Q31. Employment status

Employed full time	☐	Unemployed and available for work	☐
Employed part time	☐	permanently sick or disabled	☐
Full time student	☐	Part time student	☐
Voluntary work	☐	Retired	☐
Self-employed	☐	On employment training or youth training scheme	☐

Something else (please state) _____

Q32. Are you Registered with a GP Yes ☐ No ☐ Prefer not to say ☐

Q33. Do you have any of the following qualifications? *(tick all that apply)*

I don't have any qualifications	☐						
GCSEs or O' levels:	Grade A-C	☐	Below grade A-C	☐			
A' Levels	Grade A-C	☐	Below grade C	☐			
Postgraduate qual:	Masters	☐	Mphil	☐	PhD	☐	diploma or certificate ☐
NVQ or SVQ:	level 1	☐	level 2	☐	level 3	☐	level 4 or 5 ☐
City & Guilds:	Part 1	☐	Craft or Part II	☐	Advanced craft, Part III	☐	
GNVQ/GSVQ:	Foundation or level 1	☐	intermediate or level 2	☐	Advanced or level 3	☐	
RSA:	Stage I, II, or III	☐	Diploma	☐	Advanced diploma	☐	Higher diploma ☐
BTEC:	Higher	☐	National	☐	BTEC or general dip.	☐	BTEC or general cert. ☐

Degree ☐

AS levels ☐

HNC or HND ☐

OND, ONC ☐

Junior certificate (trade apprenticeship) ☐

Teaching qualifications (below Degree level) ☐

Nursing, or other medical qualifications (below Degree level) ☐

Other *(please state)*……..

And finally……

Is there anything else you would like to say? ……
……
……

About the authors

Dr Kesia Reeve is a Senior Research Fellow in Housing at the Centre for Regional Economic and Social Research (CRESR) at Sheffield Hallam University. She has researched extensively around the issues of homelessness and the needs of vulnerable groups and has produced a number of research reports and academic outputs on these subjects.

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Crisis is the national charity for single homeless people.

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