The Homelessness Strategy for Northern Ireland 2012-2017

An Evaluation

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Acknowledgements

Disclaimer

Views expressed in this report are not necessarily those of the Northern Ireland Housing Executive or the University of York. The statistical data on homelessness in Northern Ireland were not collected or validated by the authors, analysis of these data and any errors therein is the responsibility of the authors.

Summary

- This research evaluates the *Homelessness Strategy for Northern Ireland 2012-2017*. The Strategy was designed to place homelessness prevention at the forefront of service delivery, reduce the duration of homelessness by improving access to affordable housing, remove the need to sleep rough and to improve services to vulnerable homeless people. The Strategy was intended to progress Northern Ireland towards a vision of eliminating long-term homelessness and rough sleeping by 2020.

- The Strategy emphasised interagency coordination as essential to achieving the goals for homelessness prevention, meeting the needs of vulnerable homeless people and reducing the duration of homelessness. Enhancing collaboration across the public and voluntary sectors was a key goal of the Strategy.

- Thirty-eight 'Actions' were set by the Strategy. Eleven Actions were related to homelessness prevention, six Actions to access to affordable housing, five to removing the need to sleep rough and 16 Actions to improving services for vulnerable homeless people. As at November 2016, 32 of these 38 Actions were assessed by this evaluation as being complete, a further three were in progress (i.e. significant changes had occurred) and three were not yet complete. The Actions are described in Chapter 1 and progress against each Action is detailed in the remainder of the report. Progress for each Action is summarised in the table that forms Appendix 1 of this report.

- In 2014, the Strategy was reprioritised with five key priorities being identified. These included the introduction of the Housing Options model, a Common Assessment Framework, a Central Access Point, the development of a Housing First service and a range of measures designed to support sustainable tenancies. There was clear evidence of progress in relation to all five of these objectives and further work towards achieving these goals was ongoing.

- Levels of homeless presentations[1] and the number of households owed the Full Duty[2] remained at similar levels between 2011/12 and 2015/16. During the period 2014/15 to 2015/16, increases occurred in the number of households found to be owed the Full Duty, with a drop in presentations being recorded during 2015/16. The reasons for homelessness given by applicants were not subject to marked variation over the period 2011/12 to 2015/16.

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1 Households seeking assistance from the Northern Ireland Housing Executive (NIHE).
2 i.e. assessed as homeless and in priority need.

- An enhancement to preventative services has been associated with marked falls in homelessness presentations and acceptances[3] in England, Scotland and Wales. This pattern had not yet been replicated in Northern Ireland. However, the process of enhancing preventative services, through building Housing Solutions and Support Teams (a Housing Options model), was clearly underway, and future assessment of these patterns will be necessary.

- Access to affordable housing is insufficient in Northern Ireland. Reductions in access to low deposit mortgages have created barriers to owner occupancy since the global banking crisis. The rent levels in the private rented sector remain relatively high and security of tenure is limited. However, unlike England, the end of private rented tenancies is not strongly associated with homelessness, possibly because Housing Benefit reforms have yet to be fully introduced in Northern Ireland.

- A goal to reduce the average duration of temporary accommodation stays from 46 weeks to 40 weeks had been surpassed, with a 36.7 week average being reported in 2015/16[4]. Annual levels of temporary accommodation use remained at similar levels during the period 2011/12 to 2015/16. Recent experience in Wales indicates that enhanced prevention can significantly reduce temporary accommodation use[5], so falls in temporary accommodation use may occur as preventative services become universally available.

- Levels of rough sleeping appear very low in Northern Ireland. There are some limitations with the street count methodology used to estimate numbers and some homelessness service providers reported that, in their view, numbers were higher than the street counts indicate. However, no respondents or data suggested that large numbers of people were living rough in Northern Ireland.

- While numbers of people sleeping rough are low, there is evidence that not all rough sleepers were engaging with or able to reach services. Renewed efforts at service coordination followed the deaths among rough sleepers in Belfast reported during the winter of 2015/16.

- The introduction of a Housing Options approach to prevention, Common Assessment Framework, Central Access Point, and the piloting of Housing First were seen by homelessness service providers as very positive. There was broad consensus among respondents that housing, health, social care, housing advice, preventative and homelessness services needed to work together. The front-line staff, service

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[3] Equivalent to households owed the Full Duty. Priority Need does not apply in Scotland and Wales has specific legal duties for local authorities in respect of homelessness prevention, see Chapter 1.

[4] For households owed the Full Duty under the homelessness legislation.

[5] Use of temporary accommodation has remained high in London, despite preventative measures being in place, this appears to be strongly linked to highly limited affordable housing supply.

managers, policy makers and the homeless people who took part in the research, all shared this view.

- Some gaps in service coordination were reported by managerial and frontline staff in the homelessness sector. Homeless people had also sometimes experienced problems in accessing the full range of support they required. If available housing options were inadequate, insecure or unaffordable, effective joint working, in respect of both prevention and tenancy sustainment, could be undermined.

- Progress had been made in respect of sustaining and developing specific service provision for homeless women, young people and ex-offenders. There had also been positive developments in respect of developing support for homeless people in rural areas.

- In pursuing prevention, service coordination and innovation, in areas such as Housing First, the Strategy was widely perceived as moving homelessness policy in the right directions. There have been some positive developments in preventing and reducing homelessness in Northern Ireland, achievements that have been delivered by most of the agencies, public, voluntary and charitable, that seek to tackle homelessness.

- Gaps remained in service provision and progress in delivering the Strategy had not always been rapid, including the development of preventative services. Better service coordination and interagency planning were not yet fully in place and the social blight of rough sleeping, while rare, was yet to be eradicated.

- The Strategy cannot be judged in terms of whether or not it had reduced homelessness to a functional zero[6], but must instead be examined in terms of the progress that has been made in preventing and reducing homelessness. The Strategy was designed as one of a series designed to eventually end homelessness, it was not intended to end this uniquely damaging social problem within five years.

- Housing remains fundamental to delivering an end to homelessness. Ensuring that adequate, affordable housing with reasonable security of tenure is available is essential to delivering effective homelessness prevention and reducing the extent and duration of homelessness.

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[6] A situation in which homelessness is minimised, i.e. most potential homelessness is prevented and anyone who does become homeless is not homeless on a prolonged or repeated basis.

1   Introduction

This evaluation focuses on the first four and a half years of the implementation of the five-year *Homelessness Strategy for Northern Ireland, 2012-2017*[7]. This first chapter provides an overview of the Strategy, the Reprioritisation of the Strategy in 2014, and describes the evaluation. The second chapter looks at the prevention of homelessness over the period 2012-2016. The third chapter explores access to affordable housing and the fourth chapter looks specifically at rough sleeping. The fifth chapter is concerned with the provision of services to vulnerable homeless households and individuals. Chapter six discusses the Strategy in the international context, drawing comparisons with Scotland, Wales, England and experience and practice from other countries. The report concludes with a discussion of progress and recommendations. The new strategy for Northern Ireland is expected to be launched in the Spring of 2017.

The Homelessness Strategy for Northern Ireland 2012-2017

Northern Ireland has a statutory and regulatory framework[8] that can provide accommodation for households who are homeless, if they meet a number of assessment criteria. These criteria are based upon the original English legislation passed in 1977. Households who are homeless, i.e. have no accommodation they can reasonably be expected to occupy[9], or are about to lose their accommodation (within 28 days), and in priority need, i.e. have dependent children or are assessed as vulnerable can be assisted under the law. However, a local connection to Northern Ireland is expected and households must not have made themselves 'intentionally' homeless.

The Statement of Intent within the former/previous 2002 *Homelessness Strategy* declared that the Northern Ireland Housing Executive (NIHE) would move towards the "development of appropriate primary preventative strategies and services". The strategy also sought to minimise the use of B&B as temporary accommodation, to improve standards within temporary accommodation and to enhance service user involvement in the planning of appropriate support services. A broad goal to enhance strategic coordination was also set, involving the statutory, voluntary and housing association sectors and broader coordination with mainstream services[10].

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[7] Technically this evaluation covers just over four years and 11 months, the fieldwork and analysis being completed in November 2016.

[8] The Housing (NI) Order 1988, the Housing (NI) Order, 2003.

[9] Since April 2004, there has been a requirement that someone has no accommodation in Northern Ireland or Great Britain which they can occupy.

[10] Northern Ireland Housing Executive (2002) *The Homelessness Strategy* Belfast: Northern Ireland Housing Executive.

The Homelessness Strategy for Northern Ireland 2012-2017[11] built on key elements from the 2002 Strategy, but can be described as a more focused and also much more ambitious plan to prevent and reduce homelessness. The Strategy sets out a clear vision, four strategic objectives and 38 'Actions', i.e. 38 specific targets to be achieved.

The vision in the Strategy is that long-term homelessness and rough sleeping are to be eliminated by 2020. This vision centres on ending the extremes of homelessness, which are associated with the most harm and risks to individuals[12] and with the highest costs to public services.

The four strategic objectives specified by the strategy are as follows:

1. To place homelessness prevention at the forefront of service delivery;
2. To reduce the length of time households and individuals experience homelessness by improving access to affordable housing;
3. To remove the need to sleep rough;
4. To improve services to vulnerable homeless households and individuals.

The Strategy places a specific emphasis on integration and joint working as the means by which to deliver an effective response to homelessness in Northern Ireland and to enhance homelessness prevention. The Strategy notes:

> *…tackling homelessness in all its dimensions will require the collaboration of a wide range of partners from the statutory, voluntary and community sectors. For the vision to 'eliminate long term homelessness and rough sleeping' to be realised it will be necessary for relevant organisations to work together to deliver housing, employment, health, financial support and welfare services to those who experience homelessness*[13].

Table 1.1 summarises the 38 Actions in relation to the four strategic objectives and sub-themes within those objectives. The first 11 Actions relate to objective 1 homelessness prevention, Actions 12-17 relate to improving access to affordable housing, Actions 18-22 to removing the need to sleep rough and Actions 23-38 to improving services to vulnerable homeless households and individuals. The 38 Actions are as listed after Table 1.1.

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[11] Northern Ireland Housing Executive (2011) *Homelessness Strategy for Northern Ireland 2012-2017* Belfast: Northern Ireland Housing Executive.

[12] Jones, A. and Pleace, N. (2010) *A Review of Single Homelessness in the UK 2000 - 2010*, London: Crisis; Busch-Geertsema, V., Edgar, W., O'Sullivan, E. and Pleace, N. (2010) *Homelessness and Homeless Policies in Europe: Lessons from Research* Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities; Fitzpatrick, S., Johnsen, S. and White, M. (2011) Multiple exclusion homelessness in the UK: key patterns and intersections *Social Policy and Society,* 10(04), pp.501-512.

[13] Northern Ireland Housing Executive (2011) *Homelessness Strategy for Northern Ireland 2012-2017* Belfast: Northern Ireland Housing Executive, p.7.

Table 1.1   Strategic Objectives, Sub-Themes and Actions

Strategic Objective	Sub-themes	Actions
To place homelessness prevention at the forefront of service delivery	Early Intervention	1 – 4
	Pre-crisis Intervention	5 – 7
	Preventing repeat homelessness	8 – 11
To reduce the length of time households and individuals experience homelessness by improving access to affordable housing	Temporary accommodation	12 – 15
	Permanent accommodation	16 – 17
To remove the need to sleep rough	Rough Sleepers	18 – 21
	Addiction Services	22
To improve services to vulnerable homeless households and individuals	Services in response to domestic violence	23 – 26
	Services in response to sexual and violent offenders	27 – 29
	Services in response to women offenders	30 – 31
	Services in response to migrant workers/persons from abroad	32
	Services in response to rural homelessness	33 – 34
	Services in response to youth homelessness	35 - 38

- **Objective 1: To place homelessness prevention at the forefront of service delivery**
    - *Early Intervention*
        - **Action 1:** Collect and analyse data for all the ETHOS homelessness categories by 2012/13
        - **Action 2:** Measure the extent of hidden homelessness by 2012/13.
        - **Action 3:** Prevent repeat homelessness through multi-agency intervention, to be initiated by 2012/13 and fully operational by 2014/15.
        - **Action 4:** Produce an assessment framework to provide holistic assessment services outside of Belfast by Health and Social Services, to be in place and rolled out across all areas by 2014/15.
    - *Pre-Crisis Intervention*
        - **Action 5:** Provide comprehensive housing and homelessness advice service to all who require it, free of charge, to be fully in place by 2013/14.
        - **Action 6:** Provide pre-release housing advice, including tenancy sustainment to all prisoners, to be fully available by 2013/14 at all prisons/detention centres.

- **Action 7:** Enhance partnership working across the core agencies in relation to young people leaving the juvenile justice system, to be in place by 2013/14.
  - o *Preventing Repeat Homelessness*
    - **Action 8:** Introduce Tenancy Support Assessments to help Housing Executive tenants to sustain their tenancies, to be in place by 2013/14.
    - **Action 9:** Develop peer support networks that can provide support to Housing Executive tenants help them sustain their tenancies, to be in place by 2013/14.
    - **Action 10:** Develop a referral mechanism to enable the provision of floating support services to vulnerable individuals in the private rented sector, to be in place by 2013/14.
    - **Action 11:** Examine family mediation/family intervention programmes as a means to help young people sustain Housing Executive tenancies, to be completed by 2014/15.
- **Objective 2: To reduce the length of time households and individuals experience homelessness by improving access to affordable housing**
  - o *Temporary Accommodation*
    - **Action 12:** Develop "Pathway Models"[14] to enable appropriate homeless households to move from temporary accommodation to longer term housing, to be in place by 2013/14.
    - **Action 13:** Undertake a fundamental review of the current temporary accommodation portfolio with regards to its strategic relevance, financial viability and access criteria, to be completed by 2015/16.
    - **Action 14:** Examine the "Housing-Led" model[15] to consider its applicability to Northern Ireland, to be completed by 2015/16.
    - **Action 15:** Reduce the average length of time in temporary accommodation from 46 weeks to 40 weeks over the life span of the strategy.
  - o *Permanent Accommodation*
    - **Action 16:** Examine how Welfare Reform[16] impacts on homelessness, to be undertaken by 2012/13.
    - **Action 17:** Introduce a Northern Ireland wide Private Rented Access Scheme, to be in place by 2014/15.

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[14] See Chapter 3.

[15] Housing-Led is the term for Housing First and related service models used in the Republic of Ireland and by the European Commission, see Chapter 3.

[16] The Welfare reforms had not been implemented in Northern Ireland at the time of writing, see Chapter 3 for a description of the changes.

- **Objective 3: To remove the need to sleep rough**
  - *Rough Sleepers*
    - **Action 18:** Evaluate existing services and information sharing arrangements in relation to the needs of those with alcohol addictions, to be completed by 2013/14.
    - **Action 19:** Agree service changes to ensure effective interventions, to be in place by 2013/14.
    - **Action 20:** Consider a "Housing Led" model[17] as an alternative to one providing a continuum of services, to be undertaken by 2013/14.
    - **Action 21:** Produce a new Belfast Rough Sleepers Strategy, to be available by 2014/15.
  - *Addiction Services*
    - **Action 22:** Develop a mechanism which will enable all agencies to refer their clients to addiction services, to be introduced by 2014/15.
- **Objective 4: To improve services to vulnerable homeless households and individuals.**
  - *Services in response to domestic violence*
    - **Action 23:** Continue to provide support for the domestic violence helpline.
    - **Action 24:** Support the MARAC[18] process through the provision of accommodation and advice services.
    - **Action 25:** Roll out the Sanctuary Scheme[19] as a MARAC option across Northern Ireland, to be in place by 2013/14.
    - **Action 26:** Review refuge provision by 2014/15.
  - *Services in response to sexual and violent offenders*
    - **Action 27:** Seek the contribution of all appropriate agencies to a pre-release and post-release management process, to be agreed and in place by 2015/16.
    - **Action 28:** Introduce a case management approach for agencies to enable those deemed appropriate to make the transition to permanent accommodation taking account of risk assessment and management, to be in place by 2015/16.
    - **Action 29:** Develop appropriate accommodation solutions for high risk offenders, to be in place by 2015/16.

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[17] i.e. Housing First and related service models (see Chapter 4).

[18] Multi-Agency Risk Assessment Conference (see Chapter 5).

[19] Sanctuary Schemes are victim centred initiatives designed to enable households at risk of domestic violence to remain in their own accommodation, where it is safe for them to do so, where it is their choice and where the perpetrator does not live in the accommodation, see: Jones, A., Bretherton, J., Bowles, R. and Croucher, K. (2010) *The Effectiveness of Schemes to Enable Households at Risk of Domestic Violence to Remain in Their Own Homes*, London: Communities and Local Government, and Chapter 5.

- *Services in response to women offenders*
  - **Action 30:** Undertake research and analysis of the need for bespoke accommodation facility for women offenders, to be completed by 2012/13.
  - **Action 31:** Assist Probation Service Northern Ireland in the implementation of their Accommodation Strategy for ex-offenders.
- *Services in response to migrant workers/persons from abroad*
  - **Action 32:** Identify the specific needs, including the housing needs of Black and Minority Ethnic (BME) groups and consider options for improvements to existing services by 2013/14.
- *Services in response to rural homelessness*
  - **Action 33:** Produce Homeless Action Plans setting out how homelessness services to rural communities can be improved, to be implemented from 2012/13.
  - **Action 34:** Measure the extent of rural homelessness including the number of households and individuals presenting as homeless in rural locations, to be initiated by 2014/15.
- *Services in response to youth homelessness*
  - **Action 35:** Relevant agencies to set out their contribution to the development of preventative programmes that aim to reduce homelessness for youth client groups, to be undertaken by 2012/13.
  - **Action 36:** Review investment in current prevention programmes and initiatives and ensure resources are targeted at those young people most at risk, demonstrating improved outcomes, to be undertaken by 2014/15.
  - **Action 37:** Review existing joint working arrangements, with particular reference to the delivery of information, assessment and support services, to be undertaken by 2014/15.
  - **Action 38:** Relevant agencies to set out their contribution to the development of a continuum of suitable supported accommodation services, which support clear and flexible pathways to independence, to be undertaken by 2014/15.

The 2014 Reprioritisation

In 2014, various elements in the Homelessness Strategy were re-prioritised and new multi-agency Forums were established to drive forward five newly defined key priorities:

1. The introduction of the **Housing Options** model, based on local authority practice in Scotland and England. This approach examines an individual's options and choices in the widest sense, when they look for housing advice, in order to prevent that person becoming homeless. The model contains elements of prevention, e.g. support to prevent an eviction, and rapid intervention to stop homelessness from actually occurring, i.e. providing re-housing before existing housing is lost, where housing loss cannot be prevented. All tenure options are explored when re-housing is deemed necessary. The advice can extend beyond immediate housing-related needs, including debt advice (where homelessness is linked to financial problems), mediation (where homelessness is threatened due to non-violent family or partner relationship breakdown) and support with health and mental health issues (again where these are linked to the risk of homelessness). Help with seeking employment may also be provided where homelessness risk has arisen because of a loss of income. There is an emphasis on multi-agency working to address any support or other needs, in order to minimise the risk of homelessness. This priority supported Objective 1 of the Strategy, **to place homelessness prevention at the forefront of service delivery.**

2. The development of a **Common Assessment Framework** (CAF). This is a standardised system available to all providers for assessing and identifying the support needs of all homeless applicants regardless of where they present for assistance. This system supports Objectives 1, 3 and 4 of the Strategy, **to place homelessness prevention at the forefront of service delivery, to remove the need to sleep rough** and **to improve services to vulnerable homeless households and individuals.**

3. The development of a **Central Access Point** (CAP). This facility is designed to give advice on current accommodation availability and which has access to a range of support services. The goal of the CAP is to provide a single point of access, that can be remotely accessed, for anyone in need of homelessness services. This goal supports the pursuit of objectives 1, 3 and 4 of the Strategy, **to place homelessness prevention at the forefront of service delivery, to remove the need to sleep rough** and **to improve services to vulnerable homeless households and individuals.**

4. The development of **Housing First**. This modifies the original, less specific, goal to develop 'Housing-Led' services, which include Housing First and related models within a broadly defined group. Housing First is designed specifically to end long-term and recurrent homelessness associated with high support needs and meet the needs of highly vulnerable homeless people. Housing First uses ordinary housing and

intensive, flexible mobile case management within a harm reduction approach following a recovery orientation[20]. This priority primarily supports objective 4 of the Strategy, **to improve services to vulnerable homeless households and individuals**, but also relates to objective 3, **to remove the need to sleep rough**, as Housing First can be employed to help people with high support needs with a repeated or sustained history of living rough.

5. A range of measures designed to support **sustainable tenancies.** Various systems of support which provide residents and potential residents with the necessary support to give them the best chance of successfully maintaining their tenancy, or to prevent their tenancy breaking down. Supporting People services will work with NIHE and other landlord services to ensure adequate Floating Support services are put in place to support people in sustaining their tenancies. This supports objective 1 and objective 4 of the Strategy, **to place homelessness prevention at the forefront of service delivery** and **to improve services to vulnerable homeless households and individuals**, and also relates to objective 3, **to remove the need to sleep rough**.

In addition, under the 2014 reprioritisation changes were made to the structures and groups charged with administering and delivering the homelessness strategy. This comprised an inter-departmental Steering Group, a Central Agency Homelessness Forum and three Regional Homelessness Forums (Belfast, North and South). The Regional Forums are the local engagement structures between the NIHE and voluntary and statutory partners in the delivery of key areas of work within the Homelessness Strategy. The Forums were charged with focussing on two main themes; to analyse local needs to identify gaps in services in order to contribute to the development of region specific and prioritised action plans and to facilitate partnership working in relation to service planning and commissioning.

About the Evaluation

This independent evaluation of the Strategy was designed to review the following key questions, as specified by NIHE.

1. Did the Homelessness Strategy 2012-2017 meet the legislative requirements?

2. To what extent were the themes/objectives of the Homelessness Strategy 2012-2017 successfully delivered to achieve the 38 Actions of the Strategy (and the Reprioritised Strategy 2014)?

3. To what extent were the delivery and monitoring mechanisms effective?

A number of tasks were specified by NIHE. The research team being expected to:

• Set out key achievements of current strategy to date;

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[20] See: Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu

- Seek feedback from key stakeholders (internal and external) around success of strategy (i.e. talk to policymakers, commissioners, service providers and homeless people);

- Undertake a statistical review indicating key data and trends throughout lifetime of strategy;

- Identify outstanding or non-achievable objectives and clearly set out reasons for non-implementation and decide if Actions need to be brought forward in to new strategy.

There were also a number of specific questions that the evaluation was intended to explore:

- Explore whether the existing homelessness strategy met the legislative requirements?

- Consider whether the themes/objectives within the strategy the right ones?

- Assess the extent to which NIHE and its partners were successful/unsuccessful in achieving progress against the 38 Actions.

- Determine whether the delivery mechanisms used (PSI Groups/Regional Homelessness Forums) were successful or unsuccessful?

- Consider whether NIHE engagement with the homelessness sector was sufficient to achieve the aims of the Homelessness Strategy.

- Were there adequate monitoring arrangements in place? And to;

- Examine direct homelessness funding in NI (less SP) with comparable jurisdictions in the UK.

The evaluation was a short exercise within a relatively constrained budget. Following commissioning, the evaluation was initiated in July 2016 and concluded in November 2016. The time allocated to the core research team for the evaluation was just under eight weeks of staff time. Constraints and requirements within the policy cycle meant that this evaluation of the Strategy had to be completed before the nominal end of the 2012-2017 strategy, as there is a requirement to issue the next strategy in the Spring of 2017. This evaluation therefore covers almost all[21] of the five years 2012-2016.

The evaluation involved the analysis of the available data on homelessness, and here the research team must acknowledge the timely arrival of the work by Fitzpatrick *et al* reviewing the levels and nature of homelessness in Northern Ireland in some detail, which is drawn upon in the following text[22] and to the considerable support provided by NIHE in arranging access to the relevant homelessness statistics. Alongside reviewing relevant policy papers

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[21] Work concluded a month before the end of 2016.

[22] Fitzpatrick, S.; Pawson, H.; Bramley, G.; Wilcox, S. and Watts, B. (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

and progress reports, the bulk of the evaluation involved talking to homelessness service providers, at both front line and managerial level, commissioners, policy makers and to people experiencing homelessness[23]. In summary, this fieldwork involved 42 interviewees from strategic and service delivery levels, alongside interviews with currently homeless people:

- Nine homeless people in Belfast and Derry/Londonderry.
- Sixteen front-line staff working in homelessness services in (focus group participation, Belfast and Derry/Londonderry).
- Twenty-six staff working for NIHE and government departments and at strategic level in the homelessness sector.

It is important to note that while the Strategy covered by this evaluation was for a designated period of 2012-2017, the strategic vision it was designed to pursue has a 2020 target, i.e. the elimination of long-term homelessness and rough sleeping in Northern Ireland. Similarly, the pursuit of the core objectives to enhance homelessness prevention, enhance access to affordable housing and to improve services for vulnerable households are *ongoing* objectives, which the next homelessness strategy can be expected to also pursue, just as it will set goals in relation to ending rough sleeping and long-term homelessness.

The evaluation of the 2012-2017 Strategy is therefore a question of examining progress towards strategic objectives. The Strategy was not designed, or intended to, deliver an effective absolute end to long-term homelessness, rough sleeping, or fully developed preventative services, but instead to make progress towards those goals. This means the 2012-2017 Strategy cannot be assessed in terms of whether it has reduced homelessness to a functional zero[24], but must instead be judged in terms of the tangible progress made towards this goal.

The measurement of progress can be assessed through looking at the delivery of the 38 Actions, some of which had deadlines attached to them, and the progress towards the four core objectives. Chapter two looks at the prevention of homelessness, the third chapter explores access to affordable housing, while the fourth chapter looks specifically at rough sleeping and long-term homelessness. The fifth chapter is concerned with the provision of services to vulnerable homeless households and individuals.

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[23] See acknowledgements.

[24] Broadly speaking a situation where homelessness is as minimised as possible, not all homelessness can be prevented, but effective prevention and the right combination of homelessness services can mean that only very low numbers of people experience homelessness for only short periods. The test is that homelessness does not pool, or accumulate over time, but is instead characterised by small numbers of people whose experience of homelessness is short and whose exits from homelessness are rapid. This has been achieved in Denmark and Finland (see Chapter

2   Preventing Homelessness

Introduction

This chapter explores the progress made with preventing homelessness during the first five years of the *Homelessness Strategy for Northern Ireland 2012-2017*. Beginning with an overview of the available data the chapter then moves on to explore progress towards homelessness prevention at strategic level, before examining performance in relation to the specific targets that were designed to place homelessness prevention at the forefront of service delivery.

The Level of Homelessness

Statutory Homelessness

In 1989, NIHE assumed responsibilities for particular groups of homeless people. This responsibility broadly mirrored the 1977 legal duty place on local authorities in England[25]. Homeless households that contained dependent children or a person defined as 'vulnerable'[26], i.e. unable to fend for themselves, were within 'priority need' groups and were owed the Full Duty, if their homelessness was not intentional and there was a local connection to Northern Ireland. In 2004, the Housing (NI) Order 2003, was applied, which stipulated that someone seeking assistance from the NIHE was to be regarded as homeless if they had no accommodation available for their occupation anywhere in the UK[27].

The statutory system produces statistics on households, which include single people, couples, lone and two parent households with dependent children, that seek assistance from NIHE, i.e. 'present' as homeless and on those who are found to be owed the Full Duty and are re-housed via NIHE assistance.

These statistics are *not* a measurement of homelessness in Northern Ireland, but they can be used to explore possible trends in homelessness. The reason these data cannot be used as a measure is that they are administrative data, recording contacts with the statutory system by homeless people, rather than being a survey of the homeless population. Any household or individual that is homeless, but who does not present themselves to NIHE, is not recorded by these statistics.

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[25] Northern Ireland had additional priority need categories of persons without dependent children who were at risk of physical violence and young people aged 16 to 21 at risk of financial or sexual exploitation.

[26] Vulnerable due to old age, mental illness, physical disability or other special reasons.

[27] Gray, P. and Long, G. (2009) Homelessness policy in Northern Ireland: Is devolution making a difference? In Fitzpatrick, S.; Quilgars, D. and Pleace, N. (2009) *Homelessness in the UK: Problems and Solutions* Coventry: Chartered Institute of Housing.

A recent review of homelessness levels in Northern Ireland notes that statutory homelessness increased considerably during the early 2000s, reporting that since 2005/6, statutory homelessness has been at 'historically high' levels[28]. In 2000/1, 12,694 households presented as homeless and 6,457 were assessed to be Full Duty Applicants, presentations were the equivalent of 68% of the 2015/16 level and Full Duty Applicants were equivalent to 57% of the 2015/16 level[29]. Presentations to NIHE were 6% higher in 2011/12 than in 2015/16, but a higher number of households were accepted as Full Duty Applicants (2,181 households, an increase of 24%, Figure 2.1). A higher proportion of households were found homeless and owed the main duty in 2015/16 (60%) than in 2011/12 (45%).

Figure 2.1   Homelessness Presentations and Full Duty Applicants, 2011/12-2015/16
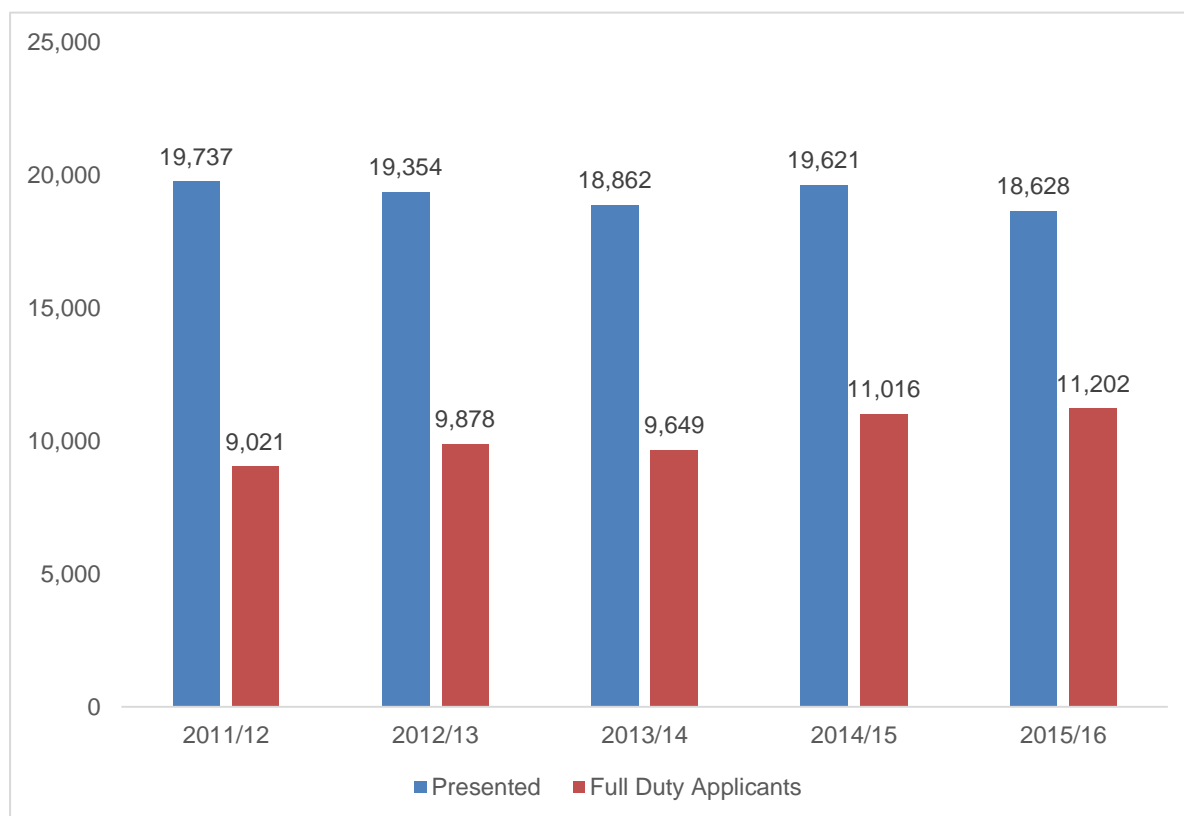
Source: Northern Ireland Housing Executive. Note: Figures refer to households, which include families with two or more members.

The level of presentations remained within a fairly narrow range during the period 2011/12 to 2015/16 (the lowest figure in 2015/16 was equivalent to 94% of the highest figure in 2011/12). The number and rate at which applicants have been found to be owed the Full Duty has increased[30], with the highest figure recorded in 2015/16 being equivalent to 124% of the lowest figure, recorded in 2011/12. There was a 6% fall in presentations between 2014/15 and 2015/16 and a marginal increase in households found to be owed the Full Duty (2%).

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[28] See Fitzpatrick, S. et al (2016) The Homelessness Monitor: Northern Ireland 2016 London: Crisis.

[29] Source: NIHE homelessness statistics.

[30] See also Fitzpatrick, S. et al (2016) The Homelessness Monitor: Northern Ireland 2016 London: Crisis.

Over the period 2011/12 to 2015/16, 96,202 households presented as homeless and 50,766 were determined to be Full Duty Applicants. Northern Ireland contained 703,275 occupied households at the last Census[31]. The 2011/12-2015/16 data are equivalent to 14% of occupied households in terms of presentations and 7% of occupied households in terms of applicants found to be owed the Full Duty. Figure 2.3 summarises homelessness presentations and Full Duty Applicants in relation to the 2011 Census record of occupied households in Northern Ireland. In 2015/16 presentations were equivalent to 2.6% of all occupied households and Full Duty Applicants were equivalent to 1.6% of all occupied households (based on the number of occupied households reported in the 2011 Census).

Figure 2.2   Homelessness Presentations and Full Duty Applicants as Equivalent Percentage of All Occupied Households in Northern Ireland (as at 2011 Census)
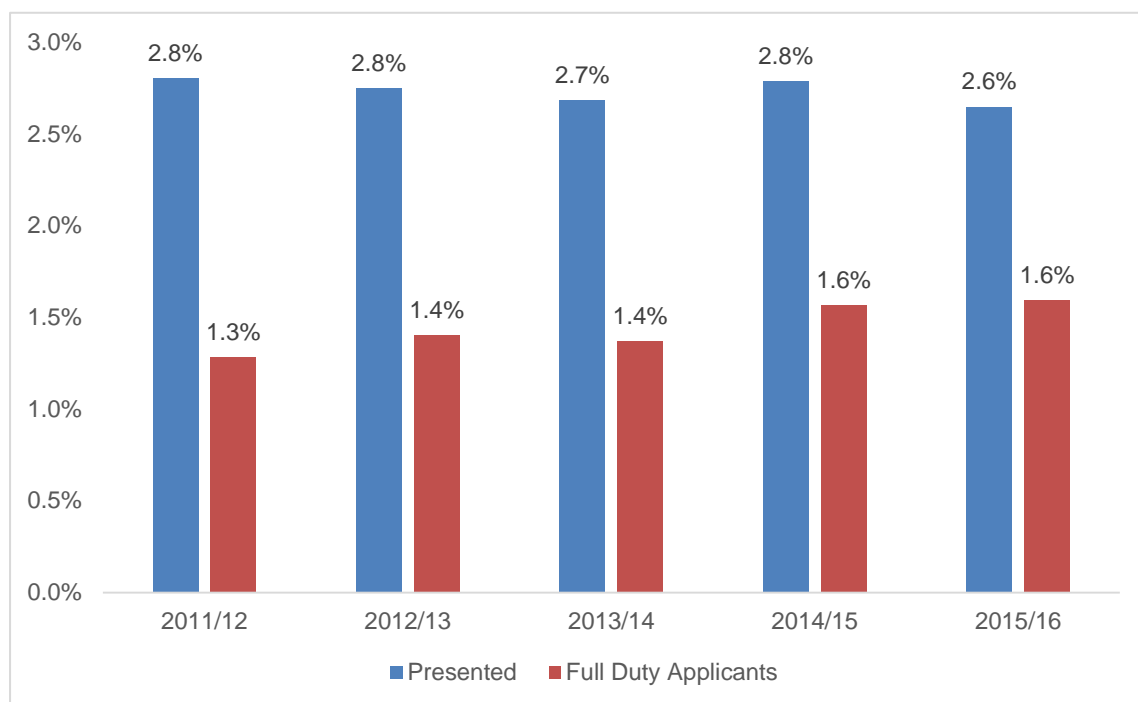
Sources: Northern Ireland Housing Executive and Northern Ireland Statistics and Research Agency. Note: Figures refer to households, which include families with two or more members.

As has been noted elsewhere, the marked decreases in presentations and full duty applicants, seen in England since 2003/4, in recent years in Scotland and, following legislative reforms, very recently, in Wales have not been recorded in Northern Ireland. Levels of presentations and acceptances are, consequently, relatively higher in Northern Ireland[32]. However, it is important to note that each of the three statutory systems in Great Britain are now, with the recent Welsh changes, distinct, which means direct comparisons are not really possible.

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[31] Source: NISRA http://www.nisra.gov.uk/Census/2011_results_population.html

[32] Fitzpatrick, S. et al (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

Table 2.1 shows the reasons for homelessness recorded for households presenting to NIHE between 2011/12 to 2015/16. The data are presented graphically in Figure 2.3.

Table 2.1   Reasons for Homelessness, Presenting Households

REASON	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Sharing/family dispute	4,696	4,317	3,733	3,549	3,891	3,671
Relationship breakdown	2,502	1,838	1,921	1,789	1,849	1,531
Domestic violence	1,010	896	855	831	956	845
Loss of PRS housing	2,646	2,166	2,617	2,568	2,841	2,480
No accommodation*	1,674	969	1,513	1,399	1,458	1,212
Intimidation	694	462	584	666	590	544
Accommodation not reasonable	3,013	2,779	3,069	3,173	3,663	3,922
Release from hospital, prison etc.	375	314	415	449	471	431
Fire/flood etc.	437	58	81	62	84	93
Mortgage default	561	449	509	421	387	216
Civil disturbance	54	33	37	29	27	36
Neighbourhood harassment	1,599	1,112	1,140	1,142	1,516	1,357
Other	897	613	732	701	791	638
No data/reason	0	3,731	2,148	2,083	1,097	1,652
Total	20,158	19,737	19,354	18,862	19,621	18,628

Source: Northern Ireland Housing Executive. *No accommodation in Northern Ireland.

Figure 2.3   Reasons for Homelessness, Presenting Households
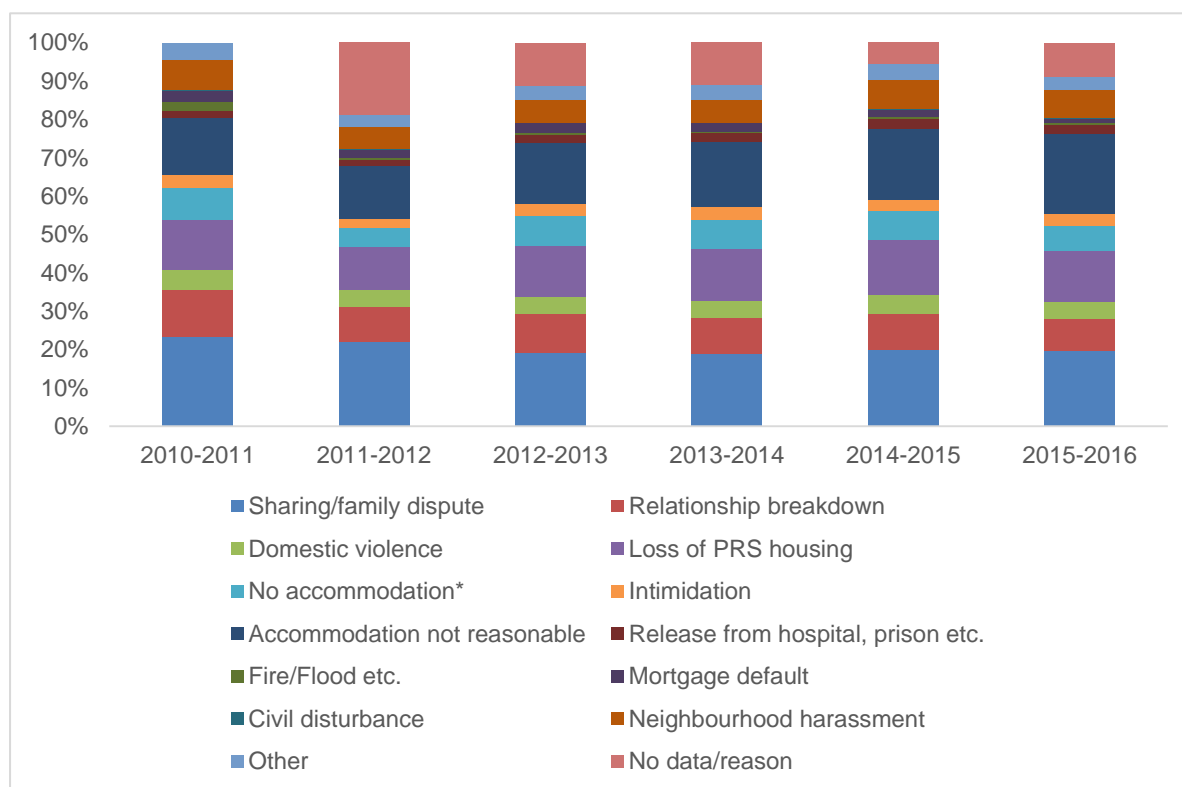
Source: Northern Ireland Housing Executive, *No accommodation in Northern Ireland.

Trends in the reasons recorded for presenting as homeless have been relatively constant over the period 2010-2011 to 2015-16. Sharing or family disputes have remained a prominently recorded reason, as has loss of private rented sector (PRS) housing. However, reports of accommodation not being reasonable among households presenting as homeless have increased, from 14.9% in 2010/11 to 21.1% in 2015/16[33].

The marked increase in loss of private rented sector housing as a cause of homelessness, seen particularly in England, has not been replicated in Northern Ireland. Recent analysis has suggested that this reflects the delayed implementation of welfare reform in Northern Ireland and the continued practice of direct payments to private landlords, which seem credible explanations, although there are also some notable differences between housing markets[34].

Table 2.2   Reasons for Homelessness, Full Duty Applicants

REASON	2010-2011	2011-12	2012-2013	2013-2014	2014-2015	2015-2016
Sharing/family dispute	1,995	2,149	1,783	1,673	1,912	2,084
Relationship breakdown	954	784	794	754	778	706
Domestic violence	829	697	720	721	832	750
Loss of PRS housing	1,200	988	1,299	1,307	1,479	1,460
No accommodation*	614	369	620	524	584	582
Intimidation	361	303	411	380	405	414
Accommodation not reasonable	2,644	2,215	2,556	2,782	3,117	3,413
Release from hospital, prison etc.	226	182	244	256	288	293
Fire/flood etc.	169	37	57	33	59	65
Mortgage default	200	227	252	208	199	122
Civil disturbance	25	26	25	21	18	30
Neighbourhood harassment	854	753	723	667	952	902
Other reasons	373	291	394	323	393	381
Total	10,444	9,021	9,878	9,649	11,016	11,202

Source: Northern Ireland Housing Executive. *No accommodation in Northern Ireland.

Table 2.2 shows the reasons for homelessness recorded for Full Duty households and Figure 2.4 presents the same information graphically. The main point to note is the differences between households presenting and Full Duty applicants is the lower rate at which households owed the Full Duty reported 'accommodation not reasonable' as the cause of their homelessness (an average of 27% of presenting households from 2010/11 to 2015/16, compared to an average of 17% of Full Duty applicants over the same period). As has been

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[33] This may be the recorded reason when an older person, unable to manage their existing home owing to support and treatment needs, applies, see: Fitzpatrick, S. et al (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

[34] Ibid.

noted elsewhere, the category of 'accommodation not reasonable' may be used to record older people who can no longer manage in their existing home due to support needs[35].

Figure 2.4 Reasons for Homelessness, Full Duty Applicants
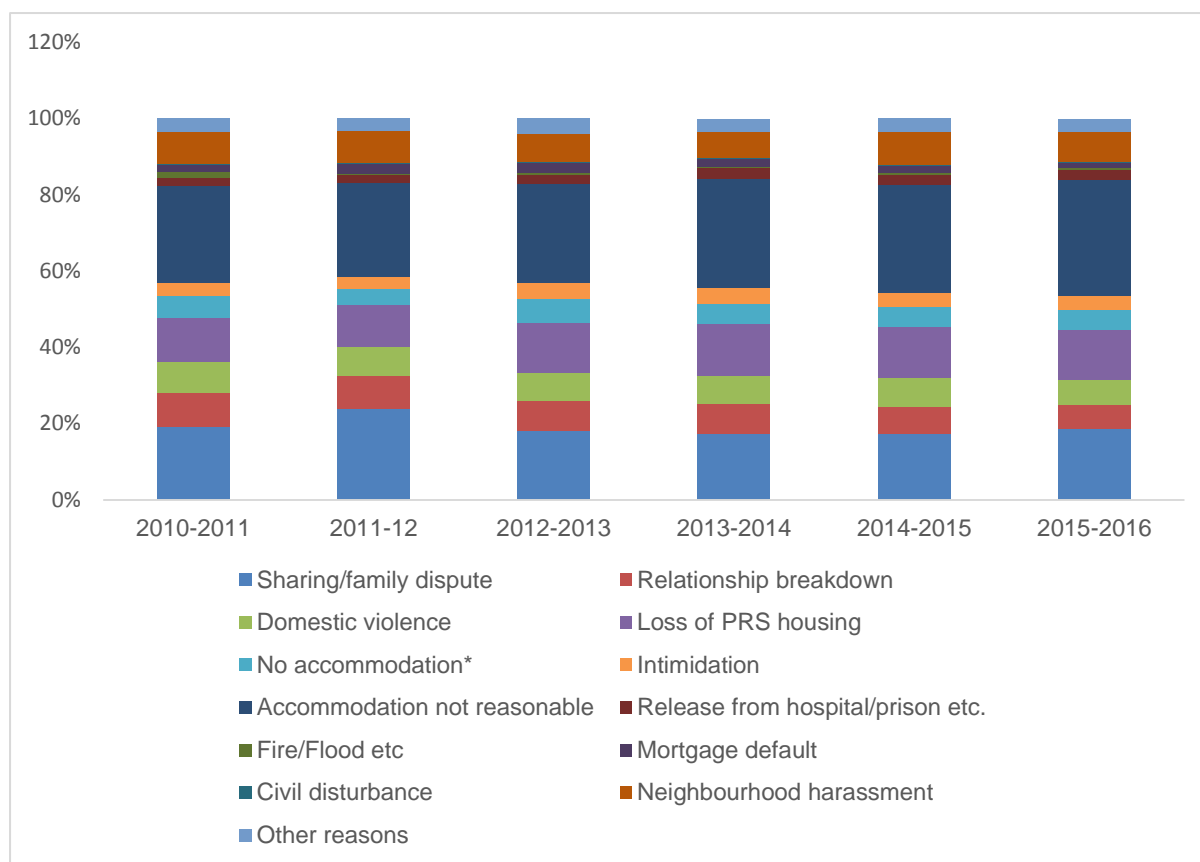
Source: Northern Ireland Housing Executive, *No accommodation in Northern Ireland.

The tendency to house older people with support needs, which is not typically found in the statutory systems in England, Wales or Scotland, is evidenced in Table 2.2. In itself, this does not explain the generally higher rate of statutory homelessness acceptances, i.e. proportion of presenters who are determined to be Full Duty applicants in Northern Ireland. As has been noted elsewhere, the widespread use of homelessness prevention, in England, latterly in Scotland and now in Wales, seems at least a partial reason for the differences seen in Northern Ireland[36] (see below).

Women's homelessness, which is increasingly being highlighted as an issue by British and European researchers[37], including researchers in the Republic of Ireland[38], is clearly in evidence in these data. Single women constituted an average of 18.2% of Full Duty applicants over the period 2012/13 to 2015/16, with the available research evidence

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[35] Ibid.

[36] Fitzpatrick, S. et al (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

[37] Mayock, P. and Bretherton, J. (Eds) (2017) *Women´s Homelessness in Europe* London: Palgrave Macmillian.

[38] Mayock, P. and Sheridan, S. (2012) *Women's Homeless 'Journeys': Key Findings from a Biographical Study of Homeless Women in Ireland*, Dublin, School of Social Work and Social Policy & Children's Research Centre.

strongly suggesting that homeless households containing dependent children are disproportionately headed by a woman who is a lone parent[39].

Table 2.2   Household Type, Full Duty Applicants

GROUP	2012-2013	2013-2014	2014-2015	2015-2016
Single male 16-17	1.0%	0.8%	0.8%	0.6%
Single male 18-25	6.2%	6.2%	5.9%	6.4%
Single male 26-59	17.4%	17.8%	17.7%	17.7%
Single female 16-17	1.1%	1.0%	0.9%	0.8%
Single female 18-25	7.7%	6.9%	6.7%	6.9%
Single female 26-59	9.9%	9.9%	10.3%	10.4%
Couples	4.1%	4.1%	4.3%	4.2%
Families	37.9%	37.8%	38.0%	36.6%
Pensioner households	14.8%	15.5%	15.4%	16.3%
Undefined	<0.1%	<0.1%	0.0%	0.0%
Total	100.0%	100.0%	100.0%	100.0%

Source: Northern Ireland Housing Executive. *No accommodation in Northern Ireland.
Note: Data available from 2012/12 onwards

Recent analysis shows the number of households in temporary accommodation ranges between 2,800 and 3,000 per annum and is broadly static. Average stays are between 36 and 37 weeks, a lower average duration than was reported in 2012, of 46 weeks[40]. The same source reports that there are considerable variations in length of stay, but as in London, longer stays are associated with self-contained private rented sector accommodation.

People Sleeping Rough

Data on people sleeping rough are largely confined to Belfast. Information has been collected via a street count methodology, which suggests levels of people living rough are very low, at around six individuals a night[41], though the experience of frontline service providers in the city suggests that higher numbers are present (see Chapter 4).

The data on rough sleeping were collected on the basis that it is important to try to differentiate between street-using populations, such as people getting together to drink in public spaces, and people who are actually sleeping rough, drawing on approaches used to assess *No Second Night Out* projects in England. There are a number of concerns about this methodology, which centre on coverage, concealment and the difference between the stock and flow of rough sleeping populations. While the approach attempt to control for genuine rough sleepers by collecting data at night and to control for flow, the number of people experiencing rough sleeping over a period of time, as opposed to stock measurement, the

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[39] Pleace, N., Fitzpatrick, S. Johnson, S.; Quilgars, D. and Sanderson, D. (2008) *Statutory homelessness in England: The experience of families and 16-17 year olds* London: Department of Community and Local Government.

[40] Fitzpatrick, S. et al (2016) The Homelessness Monitor: Northern Ireland 2016 London: Crisis.

[41] Northern Ireland Housing Executive, The Welcome Organisation and Depaul Belfast City Centre Management (2016) *Belfast Street Needs Audit* Belfast: NIHE.

number experiencing rough sleeping on a single night, by collecting data over 12 weeks, the inherent methodological limitations of street count were not fully overcome. Anyone sleeping outside the area covered by the count, anyone who is concealed and anyone who sleeps rough outside the period of data collection, is not counted. The use of street counts was abandoned by the Office for National Statistics after concerns about data quality and an alternative approach employed for the 2011 Census. Street counts are widely regarded as unreliable[42].

Single (Non-Statutory) Homelessness

Visible single homelessness is possible to explore, to a degree , by looking at the extent and patterns of homelessness service use. As with the data on statutory homelessness, these data do not constitute a survey of single homeless people, but are instead a measurement of service contacts by single homeless people. As with the data on applicants to the statutory system, these data can give some indications of numbers and trends, and suggest a population of some 1,800 single homeless people using services at any one point in Northern Ireland, heavily concentrated in Belfast[43].

Hidden Homelessness

In 2013, the number of households living temporarily with family and friends, because they had no alternative, was estimated at some 11,000, the estimate being derived from a cross-sectional sample from the data on households applying for NIHE housing[44]. A recent analysis, drawing on Census and other survey data, has suggested a much higher number, of between 76,000 and 136,000 adults living in concealed households in Northern Ireland. The differences between this estimate and the 2013 figure are explained in part by the inclusion of non-dependent children and households who would prefer to live independently[45]. As the latter measure is, in part, an estimate of overall housing need, the former measure may be a better guide to the scale of hidden homelessness.

ETHOS

In 2013, an exploratory exercise tested the possibility of using ETHOS, the European typology of homelessness and housing exclusion, developed under the auspices of FEANTSA[46], the European federation of national organisations working with homeless people[47], to inform homelessness policy in Northern Ireland.

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[42] Baptista, I., Benjaminsen, L., Pleace, N. and Busch-Geertsema, V. (2012) *Counting Homeless People in the 2011 Housing and Population Census*, EOH Comparative Studies on Homelessness 2, Brussels: FEANTSA.

[43] Pleace, N. and Bretherton, J. (2013) *Measuring Homelessness and Housing Exclusion in Northern Ireland: A test of the ETHOS typology* Belfast: Northern Ireland Housing Executive.

[44] Ibid.

[45] Fitzpatrick, S. et al (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

[46] Fédération Européenne d'Associations Nationales Travaillant avec les Sans-Abri

[47] http://www.feantsa.org/en

The report of the 2013 exercise can be found online[48] and guidance for ETHOS is also available online[49]. At the point the research was undertaken, it was estimated that at least 6,795 households were homeless in Northern Ireland, with a further 18,680 experiencing housing exclusion, according to ETHOS definitions[50]. Further data collection did not take place, meaning progress against these potential indicators of change in homelessness was not recorded. In part, further data collection to populate ETHOS was not attempted because the researchers who had conducted the 2013 exercise reported a number of important caveats to the utility of ETHOS[51] (see discussion of Action 1, below).

Progress in Preventing Homelessness

The Comparative Extent of Homelessness Prevention

The available data do not provide a complete picture of homelessness, but the review of the available statistics undertaken for this evaluation, coupled with the results of other recent analysis of homelessness levels[52], suggests a broadly static situation. Northern Ireland has not seen the pattern of a marked increase in preventative activity and significantly decreased levels of presentations and acceptances as a result, as reported first in England, then Scotland and most recently in Wales.

Presentations have fallen somewhat in the last year for which data are available, but the differences between 2015/16 and the period 2011/12 to 2014/15 are small. There has been an increase in households accepted as Full Duty applicants in the last two years for which data are available. Other data are less reliable and extensive, but do not suggest a marked downturn in homelessness associated with the implementation of the strategy. Rough sleeping levels were reported to be extremely low in the recent Belfast street count, particularly in comparison with some cities in Great Britain, yet there are some concerns about the robustness of the methodology used to enumerate this population (see Chapter 4).

Exact measurement of the effectiveness of prevention in other contexts is not possible, because there are some inherent difficulties in measuring every element of homelessness. However, it is again possible to look at administrative data on contacts with statutory homelessness systems to observe trends in presentations and applications, which can provide some information on the effects of preventative services. Again, data on statutory homelessness systems are *not* a measure of homelessness, they are a measure of *contacts*

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[48] http://www.nihe.gov.uk/measuring_homelessness_and_housing_exclusion_in_northern_ireland.pdf

[49] http://www.feantsa.org/en/toolkit/2005/04/01/ethos-typology-on-homelessness-and-housing-exclusion?bcParent=27

[50] Pleace, N. and Bretherton, J. (2013) *Measuring Homelessness and Housing Exclusion in Northern Ireland: A test of the ETHOS typology* Belfast: Northern Ireland Housing Executive.

[51] Ibid.

[52] Fitzpatrick, S. *et al* (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

with a specific set of homelessness services, as anyone who is homeless and not using these services is not counted.

England

In England, the numbers of households found statutorily homeless are at much lower levels than was the case prior to the policy shift towards increased homelessness prevention and the use of the Housing Options team model[53]. In 2003/4, 135,420 households were found statutorily homeless in England, more than twice the level reported in 2015/16 (57,740). Far more preventative activity takes place in England now than was the case in 2003/4, when 123,370 cases of successful prevention and relief were reported, compared to 213,290 cases in 2015/16[54]. The rise in preventative activity is broadly seen as reducing the level of statutory homelessness acceptances in England significantly. However, some concerns have also been expressed that homeless households may sometimes be diverted away from the statutory system by preventative services when this is not the appropriate response, particularly in relation to single vulnerable homeless people[55].

The trend towards fewer acceptances and more prevention has slowed pace in recent years. Acceptances have increased in England, by almost 15% between 2011/12 and 2015/16 (from 50,290 to 57,740 households found to be owed the Main Duty under English legislation, equivalent to Full Duty Applicants). Equally, while prevention rose very rapidly from 2003/4 onwards, reaching a peak of 228,410 successful cases of prevention and relief in 2013/14, it has fallen back to 220,690 cases in 2014/15 and to 213,290 in 2015/16 (93% of the 2013/14 level)[56].

Scotland

Direct comparison with Scotland over the period 2011/12 to 2015/16 is not possible, as this period coincided with the introduction of the major legislative change that saw the removal of the distinctions between homeless households based on 'priority' and 'non- priority' need. Partially in preparation for these changes, Scotland increased the strategic emphasis on homelessness prevention[57] and levels of presentations began to fall, dropping from 55,646 in 2010/11 to 45,551 in 2011/12. Levels had fallen to 34,662 presentations in 2015/16, after the legislative change had taken effect. By 2015/6, presentations were at 76% of the level reported in 2011/12, again with the caveat that different legislative frameworks were in place at these two dates.

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[53] See Chapter 1

[54] Source: DCLG https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness

[55] Pawson, H. (2007) Local authority homelessness prevention in England: empowering consumers or denying rights? *Housing Studies* 22(6), pp. 867-883.

[56] Source: DCLG https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness

[57] Anderson, I. (2007) Sustainable solutions to homelessness: the Scottish Case, *European Journal of Homelessness* 1, pp. 163-183.

As the distinction between priority need and non-priority need households was removed in Scotland, the rate at which households were found homeless and eligible for housing increased, from an average of 56% of households presenting during 2000/01 to 2009/10, to an average of 81% during 2013/14 to 2015/16. However, the overall number of households accepted decreased, from 32,282 in 2011/12 to 27,618 in 2015/16 (acceptances in 2015/16 were at 85% of the level in 2011/12[58]). Again, allowing that major legislative change occurred in Scotland, the available evidence suggests that the preventative shift has reduced contact with statutory homelessness services[59].

Wales

In Wales, a major policy shift towards prevention, designed to fundamentally alter the way in which the statutory homeless system, which had mirrored the English legislation, has only just occurred at the time of writing. The Housing (Wales) Act 2014 replaced what was seen as an 'all-or-nothing' system which excluded single homeless people from meaningful assistance; with local authorities being required to take steps to prevent or alleviate homelessness with everyone who seeks assistance and is either homeless, or threatened with homelessness. The law extends the duty to anyone threatened by homelessness within 56 days (from 28 days). These duties are not limited by priority need, local connection or intentionality. The law also created a relief duty when someone is homeless, to take all reasonable steps to help relieve homelessness when prevention has not been successful. The duty to help is *not* a duty to secure accommodation. The Welsh Government[60] described the role of the new legislation as follows:

> *We want to see a statutory framework that supports the vision of all-encompassing service provision. It needs to be shaped in such a way that it ensures that everyone can have access to the help that they need.*

Emerging evidence shows that the legislative change, which commenced in April 2015[61], is reducing the number of households who remain homeless after seeking assistance and there has also been a reduction in the number of people accommodated in temporary accommodation. Direct comparison over time is not possible, but Dr Peter Mackie of Cardiff University has produced an analysis estimating how the patterns of Welsh statutory homelessness have changed[62] (Table 2.3).

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[58] This is not a comparison of Scotland 'before and after' the legislative changes, as local authorities were already re-orientating themselves towards the imminent changes in the legislation.

[59] Source for all statistics: Scottish Government http://www.gov.scot/Topics/Statistics/Browse/Housing-Regeneration/RefTables/Homelessness201516

[60] Welsh Assembly Government (2009) *Ten year homelessness plan for Wales: 2009–2019*, Cardiff: Welsh Assembly Government

[61] http://gov.wales/docs/desh/publications/160324-code-of-guidance-for-local-authorities-on-allocation-of-accommodation-and-homelessness-en.pdf

[62] Estimate originally produced for the homeless charity Crisis, working with Nicholas Pleace, in early 2016 to explore the possibilities of legislative change to enhance homelessness prevention in England, see Gousy, H. (2016) *No One*

Table 2.3 compares two quarters, two years apart, to control for the effects of local authorities re-orientating themselves towards the imminent legislative change in 2014. The differences are stark, a 67% fall in households presenting that were found eligible, homeless and in priority need over the two quarters and in other forms of presentation. The estimated increase in preventative activity is equally evident, at 132%.

The first full year of data from Wales, since the legislative change, shows that 1,563 households were assessed as being owed the main homelessness duty in 2015/16, a marked drop of 69%, compared to 5,070 in 2014/15. Acceptances had been falling in Wales, from 6,515 in 2011/12 down to 5,115 in 2013/14 (78% of the level reported in 2011/12), but the scale of the drop when the legislative reforms were introduced is self-evident, there being no other explanatory variables or shifts in context sufficient to produce this kind of change. Welsh local authorities provided 7,128 households with prevention assistance, of which 4,599 (65%) had a successful outcome during 2015/16[63].

Table 2.3   Estimated total number of households assisted in Wales under the Housing (Wales) Act 2014 (Estimate for Oct-Dec 2013 compared with data from Oct-Dec 2015)

Homelessness decisions	Oct-Dec 2013	Oct-Dec 2015	% change
Eligible, unintentionally homeless and in priority need	1,220	405	-67%
Eligible, homeless and in a priority need but intentionally so	160	85	-47%
Eligible, homeless but not in priority need	800	405	-49%
Eligible, but not homeless or threatened with homelessness	685	1,585	+132%
Action to prevent and/or relieve	2,796	4,135	+48%
Ineligible	45	60	+33%
Total decisions	5,705	6,675	+17%

Source: Estimates produced by Dr Peter Mackie, Cardiff University, March 2016.

Overview

Following a redesign of frontline services, Housing Solutions and Support Teams became operational in Belfast, South Down and Causeway during 2016. The roll-out of the Housing

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Turned Away Changing the law to prevent and tackle homelessness London: Crisis. The figures for 2013 are based on an estimate, using local authority administrative data from six local authorities where homelessness prevention was recorded, albeit in very different ways (i.e. some held a separate database of prevention cases whilst others included prevention cases as a not homeless decision in their statutory returns). This data were recoded, adding homelessness prevention/relief as a decision category. It was found that 49% of all cases were homelessness prevention cases and 12% were not homeless. Applying these findings at a national scale, it was found that the total number of not homeless cases then reduced significantly from the figure in the statutory returns. See: Mackie, P.; Thomas, I. and Hodgson, K. (2012) *Impact analysis of existing homelessness legislation in Wales: A report to inform the review of homelessness legislation in Wales* Cardiff

http://www.senedd.assembly.wales/documents/s7352/impactanalysisofexistinghomelessnesslegislationinwales.pdf

[63] Source: Welsh Government https://statswales.gov.wales/Catalogue/Housing/Homelessness

Solutions and Support Team approach will be ongoing throughout 2017. The goal is that the entire system will be in place by the end of 2017.

At the point this evaluation came to a close, the process of reorientation towards delivering preventative services was underway. As this report is being completed, there is no statistical evidence suggesting the kinds of reductions in Full Duty Applicants which followed the introduction of prevention in, for example, Wales, but the introduction of the Housing Solutions and Support Team approach was not yet complete.

At the time of writing, pilots are collecting data under the new Housing Solutions and Support Model, but these data are of course restricted to those areas where the approach was being tested. These data were not available to the research team, but as the process of developing and rolling out homelessness prevention continues, will obviously be of crucial interest in relation to the next homelessness strategy.

The views of stakeholders, working at strategic level in the homelessness sector and within government departments and NIHE[64], was that the emphasis the Strategy placed on prevention was correct. The general emphasis on homelessness prevention and the reprioritisation of the Strategy in relation to Housing Options were praised, but while the direction of travel was viewed positively, some concerns were raised about the speed with which the shift towards prevention had occurred. Collectively, respondents took the view that progress had increased quite rapidly within the last year, but there was a broad consensus that there were still some challenges and more work needed to be done. Different stakeholders at strategic level gave the following views:

> *This Strategy was extremely well planned, it was based upon some very in-depth research carried out in relation to all aspects of homelessness….We were happy with the strategy – and I think what you'll find is that the sector as a whole were happy with the strategy…what came afterwards – a different matter.*

> *I don't think it was all actioned early enough. That whole Housing Options approach was slow to get off the ground.*

> *Housing Options – clearly quite a bit of work has been done around that – but there is still more work to be done. A lot of it comes down to training and support for staff…new staff coming into Housing Options…need that broader knowledge base, to be able to advise on housing. I think it's positive, but still more work to be done.*

> *Housing options – this has been the main focus – a large exercise over 3–4 years…it's been a slow process, we've had to understand systems, change systems and change staff. Passed over to redesign*

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[64] See Chapter 1

> *to inform the development, comprehensive assessment of all of the needs, enabling steps, and looking at different models.*

While the development of the Housing Solutions and Support Team approach was ongoing, there were some indications of early, positive results. Different stakeholders in Belfast made the following comments:

> *There are a number of things we are able to do that we couldn't do before. Before someone went straight into the waiting list, whereas now we look at the options to sustain their tenancy – this has been a cultural shift for staff.*

> *Housing Solutions has made a big difference, how people are being responded to, whilst this is all anecdotal, it's how the staff have experienced this and also how the clients are feeling – the way they feel they are responded to. Also quicker response times, it speeds the process up...there's been a change in mind set in terms of how they work, improved communication and working relationships. There have been a number of training sessions and there's been more opportunities to chat cases through.*

The effectiveness of the Housing Solutions and Support Team approach was questioned by some respondents. These questions centred on how effective the approach was at preventing homelessness, rather than re-directing households away from the statutory system, a concern about 'gatekeeping' (i.e. preventing access to the statutory system over preventing access to homelessness) also expressed in relation to the use of prevention in England[65]. From a rural perspective, the model was sometimes criticised as being built around 'urban' assumptions.

> *Certainly things have improved but not to the extent that we would like to see. Certainly it is reported that the number of people presenting are down, but those being accepted is up. Is that masking the real picture? We're not sure yet because Housing Options hasn't been evaluated. It may be that people are being redirected – some of the things that have been put in place like single lets – things are not running in tandem.*

> *In fact when I was looking at some of the things - in terms of Housing Options – the assumption that integrating services will make them more effective to homelessness – however, it's conceptualised to an urban setting and it's characterised by a one size fits all approach. It requires considerable resources and the concentration*

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[65] Pawson, H. (2007) Local authority homelessness prevention in England: empowering consumers or denying rights? *Housing Studies* 22(6), pp. 867-883.

of services in a small geographical area – which is Belfast. The moment you're outside of Belfast – that goes for all of the services – some of the characteristics (of Housing Options) don't even exist in a regional setting. Certainly services in the new strategy – need to consider greater services and service characteristics outside of Belfast.

The evaluation results suggest a situation of mixed progress, with some positive results from early implementation, a concern that the development and implementation of the Housing Solutions and Support Team approach had not happened more quickly and across all of Northern Ireland and some hesitation about the effectiveness of the approach, both in overall terms and in specific contexts.

The experience of currently homeless people indicated that a preventative offer had not always been accessed or sought. There were two issues, which can be applied only to the relatively small group of homeless people who were interviewed for this evaluation. One finding, which is broadly supported by research in Northern Ireland and elsewhere[66], is that some groups of homeless people, including people with more complex needs, may avoid services, other than low threshold services that provide food and shelter, but which do not place any specific requirements or expectations on service users. Preventative services may be able to reach these groups, for example by outreach, but may encounter difficulties in engagement. The second finding was that experience with homelessness services could be mixed, of course this is the perception of service use only from the service user perspective, but some respondents had not been offered support to prevent their homelessness. Different homeless people shared the following views and experiences:

You're not really advised to go to the Housing Executive – you are waiting there for hours and hours and they can't find nowhere for you. You go to a night shelter – but there's no guarantees there either. You can be walking around all night.

There are a lot of failings in the system that need to be sorted, because some of this is easily prevented.

There is no-one talking about how to come out of homelessness.

There were reports from these respondents that they had received no or limited direction by the statutory authority (NIHE) in terms of their rights under the homelessness legislation. This question was framed in different ways, including using the term advice and assistance but none of the respondents indicated that this had been offered to them.

This group of people were not representative of homeless people as a whole, nor indeed those who were currently homeless, but the presence – even if it is in relatively small

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[66] Jones, A. and Pleace, N (2010) A Review of Single Homelessness in the UK 2000 - 2010, London: Crisis.

numbers – of homeless people who are not accessing services or whose experiences with services is not delivering a satisfactory preventative offer, is some cause for concern. Many people are, of course, assisted out of homelessness by NIHE and other service providers, and there is some evidence that the new Housing Solutions and Support Team approach was delivering positive results, with the caveat that implementation is often viewed as not moving forward quickly enough.

Two independent reviews of the trends in homelessness in Northern Ireland, produced in 2014[67] and 2016, have reported similar findings. A range of respondents[68] reported the move towards prevention was positive, but the pace at which this move was occurring was not seen as sufficient. The 2016 report notes:

> *Many of our key informants in 2013 had been involved as stakeholders in the development of the 2012-2017 Strategy and were generally fairly satisfied with its content, and in particular with its' heralding of a stronger emphasis on prevention. However, there was a lot of disappointment with regard to its implementation; comments that were echoed in 2016[69].*

Progress towards Actions and Key Priorities

A total of eleven actions were intended to support the delivery of the first objective of the Strategy, i.e. to place prevention at the forefront of service delivery. The 2014 reprioritisation focused on the implementation of the Housing Solutions and Support Teams as a key priority in delivering a preventative approach.

Action 1: Collect and analyse data for all the ETHOS homelessness categories

This action, set to be completed by 2012/13, had been fully achieved, with an exercise that attempted to populate the ETHOS homelessness typology and test the utility of the approach for Northern Ireland, being conducted in 2013[70]. The original idea had been that ETHOS would provide a data set with which Northern Ireland's homelessness strategy could be clearly compared with those in other countries and regions, particularly in Europe. This would allow progress to be comparatively assessed, specifically in relation to delivering homelessness prevention, but also in other respects. However, the report noted a number of significant caveats about ETHOS:

- ETHOS was a typology, a means of conceptualising the different dimensions of homelessness, it was not designed to provide systematic process for data collection.

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[67] Fitzpatrick, S.; Pawson, H.; Bramley, G.; Wilcox, S. and Watts, B. (2014) *The Homelessness Monitor: Northern Ireland 2013* London: Crisis.

[68] 15 informants were interviewed for the Fitzpatrick *et al* (2016) report.

[69] Fitzpatrick, S. et al (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis, pp. 16-17.

[70] Pleace, N. and Bretherton, J. (2013) *Measuring Homelessness and Housing Exclusion in Northern Ireland: A test of the ETHOS typology Belfa*st: Northern Ireland Housing Executive.

- ETHOS use definitions of homelessness that were in some respects broader and, in others, narrower, than the statutory definition of homelessness. In particular, ETHOS defines some situations that would, in Northern Ireland, be viewed as homelessness, as forms of housing exclusion, i.e. as housing need rather than homelessness. Being designed as a pan-European standard, ETHOS makes allowance for the statutory/non-statutory dimensions of homelessness, which exist only in the UK and, to an extent, in France. The alternative version of ETHOS, 'ETHOS Light' which was designed for survey/census use, collapses and redefines some categories, but still has these limitations.

- Certain elements of ETHOS were very difficult to populate, particularly with respect to accurately counting the extent of hidden or concealed forms of homelessness.

- ETHOS conflates households and individuals at *risk* of homelessness (a risk than may not transpire in every case), such as people currently living in institutions who might be at risk of homelessness, with households and individuals who *are* homeless[71].

- ETHOS does influence international debates about the nature and enumeration of homelessness, particularly at European level and in Canada and New Zealand. However, ETHOS is not an international standard, countries and regions that might be compared with Northern Ireland tend not to record data on homelessness in ways that are fully compatible with ETHOS.

This Action had been completed, but the broad conclusion of the exercise was that existing data collection, while not perfect, was more suited to Northern Ireland's needs than ETHOS. By European standards, data on homelessness and housing exclusion are relatively extensive and of high quality, the level of understanding of homelessness in Northern Ireland is greater than in many comparable European countries or regions[72]. It was apparent that the respondents interviewed for this evaluation were often not aware of ETHOS, and did not see it influencing the Strategy in either positive or negative terms or as having any impact on their operational work or service delivery. Different respondents, at strategic level, reported the following views:

> *We're aware of the ETHOS typology but it makes no difference to our practice on the ground.*
>
> *There has been no obvious use of data collected or this typology - in the development or delivery of services – to actually change or*

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[71] See also: Amore, K.; Baker, M. and Howden-Chapman, P. (2011) The ETHOS Definition and Classification of Homelessness: An Analysis *European Journal of Homelessness* 5,2, pp. 19-37. There is no time condition specified in ETHOS, i.e. homelessness is *not* counted as everyone in an institutional setting, such as hospital or prison, who is about to leave and has nowhere to move to (e.g. within 28 days or 56 days of leaving and in that situation), but instead counts everyone in such institutions as 'homeless'.

[72] Pleace, N. and Bretherton, J. (2013) *Measuring Homelessness and Housing Exclusion in Northern Ireland: A test of the ETHOS typology* Belfast: Northern Ireland Housing Executive.

improve services. And actually in terms of the development of the new strategy they are still talking about the remodelling of services and the need to engage with the sector to identify the needs. You'd think if they'd done this that this wouldn't need to be done – and that they would know what is needed.

Action 2: Measure the extent of hidden homelessness by 2012/13

The exercise to explore the utility of ETHOS and estimates using Census and survey data have given a partial picture of hidden or concealed homelessness in Northern Ireland. As noted above, estimates range from 11,000 to between 76,000 and 136,000 adults[73], the differences in numbers being linked to differences in definition. However, hidden homelessness remains difficult to quantify and there are inherent challenges in tracking populations that are not visible and whose living situations are fluid, because they are characterised by precariousness[74]. There were some concerns from respondents that the extent and nature of hidden homelessness was not fully understood. Limits in existing recording systems around the statutory system were noted, as was the tendency of some groups to not present as homeless, by different respondents:

> *When we're talking about hidden homelessness I can see obviously why it's difficult to quantify – but at the minute there's an issue. We quantify where the applicant wants to go – we capture where they want the solution to be – not where they're coming from. So we're missing a trick in a sense – in identifying where that lack of housing or temporary accommodation is.*

> *People don't come to the Housing Executive, particularly young people, because they feel a statutory organisation can't help them, they will be hit with the 'shared room rate' – so no point going to NIHE.*

Only partial progress can be noted in respect of this Action, in that attempts to understand the extent of hidden homelessness have been made, but that the scale and nature of this aspect of homelessness remain unclear. It is important to note that the inherent challenges in counting hidden homeless populations are experienced elsewhere, with even countries with advanced data collection on homelessness generally having to estimate the scale of hidden homelessness[75].

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[73] Pleace, N. and Bretherton, J. (2013) op.cit. , Fitzpatrick *et al*, (2016) op. cit.

[74] Pleace, N. and Bretherton, J. (2013) *Measuring Homelessness and Housing Exclusion in Northern Ireland: A test of the ETHOS typology* Belfast: Northern Ireland Housing Executive.

[75] Busch-Geertsema, V.; Benjaminsen, L.; Filipovič Hrast, M. and Pleace, N. (2014) *Extent and Profile of Homelessness in European Member States: A Statistical Update* Brussels: FEANTSA.

Action 3: Prevent repeat homelessness through multi-agency intervention

The goal in the Strategy was to ensure this process was initiated by 2012/13 and fully operational by 2014/15. The re-prioritisation of the Strategy in 2014 (see Chapter 1) was specifically intended to promote interagency working towards achieving this Action. The five interrelated key priorities all contributed towards this goal:

- Introducing Housing Solutions and Support Teams (Housing Options).
- Introducing the Common Assessment Framework
- Introducing the Central Access Point.
- The use of Housing First (as a preventative service option for high need individuals and for recurrently homeless people with high support needs).
- Using a range of measures designed to sustain tenancies, using coordination between Supporting People and landlord services.

This combined interagency approach was intended to deliver the right housing solution first time for homeless presenters and maintain them in a secure tenancy, drawing upon the right support to break the potential cycle of repeat homelessness. This Action can consequently be regarded as completed.

The progress in relation to Housing Solutions and Support Teams was discussed in some detail above. The development of this approach was viewed positively, but the speed of progress was subject to criticism.

The idea of a multi-agency response towards repeated homelessness is a longstanding one and the development of the approach, including Common Assessment Framework and a Central Access Point has been influenced by practice elsewhere. Again, respondents reported the view that the speed at which progress towards these goals was not rapid, but also noted that developing these systems was not simply a matter of copying processes, systems and paperwork from elsewhere, there was a need to adapt these models to the specific requirements of Northern Ireland. Some specific points were made about the requirement for a bespoke IT system to be rolled out to support these processes, alongside training needs. Both systems were seen as important in two respects:

- Ensuring comprehensive assessments and the correct package of multi-agency support for potentially recurrently homeless people and those with a history of recurrent homelessness.

- Streamlining systems to manage temporary accommodation, to ensure the right services are in place to avoid repeated/sustained use of temporary accommodation.

There is an extensive evidence base, including experimental evaluations (randomised control trials) from Canada and France, showing that Housing First can effectively address long-term and recurrent homelessness among people with high and complex needs[76].

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[76] Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu

Support for the use of a Housing First approach was considerable and the pilot service in Belfast and Derry/Londonderry, which has recently been evaluated[77], was also viewed positively by respondents. A number of points can be made about the use of Housing First in relation to preventing repeat homelessness[78]:

- There is evidence that Housing First can be used effectively with people whose recurrent homelessness is linked to high and complex support needs.

- There is some evidence that targeting homeless people who may be at risk of repeated homelessness can enhance preventative services, but it is equally clear that this is not yet a precise science[79]. Equally, accurate prediction of which homeless people will - in the context of most Housing First services tending towards achieving housing stability for one year for eight out of every ten service users - benefit from a Housing First service, cannot as yet be clearly predicted[80].

- Housing First is demonstrably effective, based on the existing evidence base, with recurrently homeless people with high and complex needs. Currently, targeting Housing First on people without experience of homelessness, who may be at risk of recurrent homelessness, is likely to involve some margin of error.

Among respondents, Housing First was seen as offering potential to prevent recurrent homelessness, but within an array of services, including lower intensity support models, rather than as a single response. There were, as with other aspects of preventative services, concerns about the speed at which Housing First was being introduced and whether sufficient coordination was in place. Different respondents made the following comments:

> *Housing First approach – and sustaining tenancies – and floating support – this all links in with prevention. I think they need to look at more support services in the community – particularly if the Housing Executive is going to be using the Private rented sector to house people in.*

> *The Housing First model was piloted and then there was an evaluation – there is an expectation in the sector that information will be shared – but that doesn't come through so quickly.*

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[77] Boyle, F and Palmer, J with Ahmed, S (2016) The Efficiency and Effectiveness of the Housing First Support Service piloted by Depaul in Belfast, funded by Supporting People: An SROI evaluation.

[78] Pleace, N. (2016) Housing First Guide Europe Brussels: FEANTSA http://housingfirstguide.eu; Quilgars, D. and Pleace, N. (2016) Housing First and Social Integration: A Realistic Aim? Social Inclusion 4.4, DOI: 10.17645/si.v4i4.672; Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness European Journal of Homelessness 7.2, 21-41.

[79] Greer, A.L., Shinn, M., Kwon, J. and Zuiderveen, S. (2016) Targeting Services to Individuals Most Likely to Enter Shelter: Evaluating the Efficiency of Homelessness Prevention. Social Service Review, 90(1), pp.130-155.

[80] Padgett, D.K; Henwood, B.F. and Tsemberis, S.J. (2016) Housing First: Ending Homelessness, Transforming Systems and Changing Lives New York: Oxford University Press.

The broader issues of coordination between agencies will be revisited in more detail in Chapter 5, but it is worth noting that issues with interagency working were reported in relation to prevention. Chief among these concerns was that not all the partner agencies had sufficient commitment to joint working, with staff who were not in the position to make decisions being sent to planning meetings by some agencies and non-attendance by others being reported (see Chapter 5).

In relation to sustainable tenancies, there were some concerns expressed that necessary service coordination was not always in place. Effective joint working was seen by some respondents as integral to the delivery of sustainable tenancies. Again, the idea of sustainable tenancies was broadly supported by the respondents to this evaluation, but there were some concerns about training and the effectiveness of joint working.

Broadly, the reprioritisation of the strategy that supported the targeting of repeated homelessness by preventative services was welcomed. There were concerns about progress and about the perceived disproportionate emphasis placed on Housing First.

Action 4: Produce an assessment framework to provide holistic assessment services

This Action was intended to be completed by 2014/15 and was centred on health and social services and ensuring systems were in place outside Belfast. This Action was in progress. The development of the Common Assessment Point and Common Assessment Framework had been emphasised in the 2014 Reprioritisation (see Chapter 1) and work had progressed. The key elements of this work are:

- One-time assessment using an appropriate assessment tool.

- An integrated process for Housing Options interview/homelessness assessment and support needs

- Assessment and response underpinned by information sharing protocols

- Seamless pathways between services that support the individual.

- Performance measures that focus on short and long term outcomes for the client.

- Developing and adapting suitable IT systems.

Progress in relation to Common Assessment has just been discussed. The broad point that the direction of travel was seen as correct but that there were concerns both about the speed at which things were happening and the level at which different agencies were engaging with interagency planning and service delivery (see Chapter 5).

Action 5: Provide a comprehensive housing and homelessness advice service

The original action required that housing advice should be available to all who require it, free of charge, should fully in place by 2013/14. This objective had been partially achieved in late 2016. This was because Housing Options (the Housing Solutions and Support Teams)

were in place in some areas and were intended to become available across Northern Ireland during the course of 2017.

As the Housing Solutions and Support Teams are rolled out, the intention is that comprehensive directories of services and signposting, will be developed to allow highly trained staff to deliver a "one and done" approach to assisting clients with their support needs. In other words, a full advice service, covering housing, support and any treatment needs, is intended to be in place across Northern Ireland. Respondents acknowledged the work being done in this area and while work was ongoing, this Action could be regarded as completed.

At the time of writing, Housing Rights[81] is funded from the NIHE homelessness budget to provide comprehensive housing and homeless advice services including the development of the "Community Housing Advice Partnership" (CHAP), which consists of 24 voluntary advice agencies. A comprehensive website, phone line and in-house advisor service are provided by Housing Rights, which is free of charge. The presence of these services, as noted by some respondents, reflects a longstanding commitment to providing housing advice that dates back to the early 2000s. There was universal and strong support for the role undertaken by Housing Rights and the quality and reach of their comprehensive housing advice services.

A few respondents reported that there was, in their view, insufficient monitoring of what housing advice services were doing. There needed, from this perspective, to be a greater emphasis on looking at what advice services were achieving. Alongside this, the need for universal standards of consistency and quality, as developed in other jurisdictions, such as Scotland, was strongly emphasised. Different respondents made the following comments.

> *It's got a really strong prevention focus – but this needs to be articulated in terms of measurability and numbers.*
>
> *This needs to be quality assured, in terms of skills and knowledge with systems to check the advice given. There is a need for housing advice standards, similar to Scotland* [there] *should be an agreement that all staff should work and be trained to these standards.*
>
> *It needs to be done properly. Should be a standard framework in place…*
>
> *I don't know where the standards are…very important thing…if we are serious about housing advice…and it's the actual core to a strategy.*
>
> *The right advice at the right time. This is recognised in other jurisdictions, but there is no framework of standards here.*

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[81] http://housingrights.org.uk

Action 6: Provide pre-release housing advice, including tenancy sustainment to all prisoners.

When the Strategy was written the intention was that this service should be available by 2013/14 at all prisons/detention centres. This objective had been fully achieved. Housing Rights, funded by NIHE, had met targets to deliver housing advice to all prisoners. The 'Beyond the Gate'[82] service, also delivered by Housing Rights provided further advice and assistance upon release. An evaluation of the Beyond the Gate pilot project[83] indicated some positive results. Positive views about the Beyond the Gate service were also reported by some of the respondents working for other organisations who were interviewed for this evaluation.

Action 7: Enhance partnership working for young people leaving the juvenile justice system

This Action was intended to be in place by 2013/14 and applied to all core agencies, i.e. NIHE, social services and the Woodlands Juvenile Justice Centre[84] and the Hydebank Wood women's prison and young offenders' centre. This objective had been fully achieved. Enhanced joint working arrangements were reported to exist to facilitate supported transitions, to reduce the risk that young people leaving the Juvenile Justice system would become homeless.

Good Practice Guidance for meeting the accommodation and support needs of young people was agreed between the NIHE and the five Health and Social Care Trusts in April 2015.[85] The guidance, which has been issued to all relevant stakeholders, addresses the needs of 16/17 year olds leaving Woodlands. In addition, Housing Rights provide an enhanced advice service in Hydebank.

Although this Action was reported as being achieved, some criticisms were made of the post release support systems available to young offenders. Improvements compared to past practice were acknowledged, but some respondents argued that better strategic planning was still required, in particular to prevent regional disparities in terms of the type and nature of support received across HSC Trust areas. Planning for release, when a young person had only a short sentence, could be challenging, some of those under 21 also required sustained support, which could place pressure on services that were facing new demand from young people leaving the Juvenile Justice system. Different respondents made the following comments:

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[82] http://housingrights.org.uk/news/beyond-gate-helping-vulnerable-prisoners-resettle-community

[83] Wright, J. (2016) *Review of Year 1 pilot project, Beyond the Gate*. Over 20% had sustained their accommodation for more than six months (post release) and almost 15% had sustained their accommodation for up to six months (temporary and permanent accommodation).

[84] The Centre provides education, care and support. This includes support for the parents/carers of young offenders.

[85] *Meeting the Accommodation and Support Needs of 16 – 21 year olds,* Regional Good practice guidance agreed by the NIHE and the H&SC Trusts, December 2014.

I don't believe there is a coherent approach to people leaving the justice system – and in particular for young people.   There certainly have been improvements in terms of joint commissioning for 16–17 year olds – but there are still weaknesses.

There are still people in NI Prison Service short-term – just been released – we are not able to safely allocate and there are issues about the appropriateness of the accommodation.

Action 8: Introduce Tenancy Support Assessments

Tenancy support assessments were intended to help Housing Executive tenants to sustain their tenancies and were meant to be in place by 2013/14. This Action was interlinked with the introduction of the Housing Solutions and Support Teams and had therefore been partially achieved at the time of writing, reflecting the as yet incomplete roll-out of these services. Training was provided to NIHE staff in 2014 following the piloting of this approach in the Southern Region, with protocols being in place to ensure that comprehensive assessments took place, with follow-up visits also being integrated into procedures. As these assessments were in place, this Action was regarded as completed.

The comprehensive Housing Options assessment identifies the client's support needs with the intention being that that adequate floating support can be in place where required to ensure tenancy sustainment. The further development of some initiatives including starter packs and models of furniture provision via social enterprise are being explored at the time of writing, with the intent of further improving tenancy sustainment. These arrangements were praised by some respondents, two different respondents making the following comments:

> *There are good ideas now in terms of assessing vulnerabilities and also in terms of looking at what's out there, which agencies. Landlord Services is working on directories…these are referred to as interactive mind maps. These will then need to be localised… done for the South Down area.*

> *The matrix for assessing vulnerabilities brings structure.*

These systems were not seen as perfect by every respondent. Issues around the management of anti-social and nuisance behaviour, i.e. use of probationary tenancies[86], and around the speed at which services were put in place were reported, there were also sometimes resource issues.

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[86] A probationary tenancy allows eviction on the same basis as private rented sector tenancy, anti-social behaviour can be managed through quickly removing a tenant. This can be criticised as being an option that might lead to further homelessness, as opposed to trying to manage the issue through support, see: Jones, A., Pleace, N., Quilgars, D. and Sanderson, D. (2006) *Addressing Antisocial Behaviour: An Independent Evaluation of the Shelter Inclusion Project*, London: Shelter.

They are allocated but then can't move in, no furniture and equipment and then have to wait 6–8 weeks to get a Community Care grant. Also perhaps need additional support and it's not always available.

Action 9: Develop peer support networks for Housing Executive tenants

This Action was intended to provide support to Housing Executive tenants to help them sustain their tenancies and was intended to be in place by 2013/14. A three-year Time Bank scheme was established in Redburn and Loughview, in conjunction with Volunteer Now[87]. Time Banking, which has generated some positive results when used for homeless people[88], centres on the exchange of Time Credits, a form of barter economy. An individual contributes an hour of their time, supporting others or the community and earns a Time Credit, which enables them access to an hour of someone else's time. Reports from the Time Bank appear positive, although it does not appear to have been subject to a formal evaluation as yet. This Action had been completed.

Action 10: Develop referral to floating support services to vulnerable individuals in the PRS

This Action was intended to be in place by 2013/14. A 2012 Review had reported that alongside barriers centred on affordability and landlord attitudes, the capacity to use the private rented sector as housing solution for vulnerable groups was also limited by a lack of access to appropriate floating support[89]. A Private Rented Sector Access Scheme, called Smartmove[90], began operation in April 2014, undertaking a needs assessment as part of the process of securing private rented sector housing. Smartmove is part of the broader emphasis on Housing Options which is integral to the 2014 reprioritisation of the strategy.

The views of the respondents about Smartmove were mixed. The criticisms centred on the perception that the service was too narrow in focus, dealing with only statutory homelessness. Initially, Smartmove was targeted at creating new tenancies in the private sector for full duty applicants on the waiting list for more than six months. The service was then re-orientated to reflect the Housing Options approach, being widened to include all homeless people requiring a housing solution and extending management services to sustain existing tenancies.

There were also criticisms that this Belfast centred service model did not take into account the varying availability of suitable private rented sector housing. Support services were also

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[87] http://www.volunteernow.co.uk/volunteering/timebanking/person-become-a-member/redburn-loughview-community-forum/

[88] Bretherton, J. and Pleace, N. (2014) *An Evaluation of the Broadway Skills Exchange Time Bank* York: University of York.

[89] Ellison, A.; Pleace, N. and Hanvey, E. (2012) Meeting the housing needs of vulnerable homeless people in the private rented sector in Northern Ireland Belfast: Housing Rights Service.

[90] http://www.smartmove-housing.com

sometimes reported as not being in place or as insufficient. Different respondents made the following comments.

> *I think what they were trying to do was good because if you're homeless then the main priority should be to get you housed, but I think they narrowed it a bit too far. I think those access schemes are a good idea but I don't know whether it's time to review the model...But I have had feedback that this just doesn't work in some areas, because there isn't the private rented sector accommodation there, so that's an issue.*

This Action was achieved in the sense that a system was put in place, but there were questions about focusing increasingly on statutory homelessness, on the availability of the private rented sector as an option in some areas and around the coordination and delivery of support. A requirement for an evaluation was built into the Smartmove scheme contract and this evaluation will commence in April 2017.

Action 11: Examine family mediation/intervention programmes

This Action centred on exploring family mediation and family intervention programmes as a means to help young people sustain Housing Executive tenancies. The goal set by the Strategy was for this to be completed by 2014/15.

The Edges Project in Larne, Newtownabbey and Fermanagh delivered by Start 360 provides a range of interventions including family mediation, designed to avoid disruption to education, offending behaviour and homelessness[91]. Referrals to the project come from NIHE. This pilot project will be evaluated on completion in August 2017. As this project is targeted on 13-17 year-olds, the key role is early prevention. There are in addition, at the time of writing, 10 floating support service schemes, with capacity to support 490 young people, though these are resettlement and tenancy sustainment models, rather than mediation. Broader services, designed to promote sustainment of positive family relationships, such as Family Mediation Northern Ireland, are also in place.

The Action itself was focused on no more than the exploration of these service models which means that it had been completed. Clearly, the model is being explored, though the results are not yet available on the pilot service being delivered by Start 360.

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[91] http://www.start360.org/services/40/edges/

3 Improving Access to Housing

Introduction

This chapter explores the progress made with improving access to housing during the first five years of the *Homelessness Strategy for Northern Ireland 2012-2017*. The chapter explores progress towards improving access to housing at strategic level, before examining performance in relation to the specific Actions, that were designed to enhance access to housing and to reduce the duration and extent of homelessness.

Progress in Improving Access to Housing

Overview

A number of pressures exist on affordable housing supply in Northern Ireland. These can be summarised as follows[92]:

- Access to owner occupancy has fallen, despite relative reductions in house prices since the 2007-2008 crash, a result of reduced availability of low-deposit mortgages.

- The private rented sector is relatively insecure[93] and the costs of private renting are relatively high. Affordability is a barrier to private rented sector housing for both homeless and potentially homeless households. The associations drawn between welfare reform and the loss of private rented tenancies as an increasing 'cause' of homelessness in England have not been replicated in Northern Ireland. This is possibly due to differences in the implementation of changes to the welfare system and the private rented market.

- It is unlikely there will be sufficient social housing to meet housing need. New build social housing is not going to be developed on any scale in the medium term and the future role of NIHE and the management of its housing stock has not been determined at the time of writing. The capacity of housing associations to develop new social rented stock is likely to be as limited, assuming similar conditions to those in England, Scotland and Wales.

The respondents frequently and repeatedly identified affordable housing supply as a major barrier to preventing and reducing homelessness in Northern Ireland. This was particularly true of respondents working at operational level in homelessness services. Multiple respondents, the last two of whom were currently homeless people, made the following comments:

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[92] See also: Fitzpatrick, S. *et al* (2016) The Homelessness Monitor: Northern Ireland 2016 London: Crisis.

[93] Kenna, P., Benjaminsen, L., Busch-Geertsema, V. and Nasarre-Aznar, S. (Eds) (2016) *Promoting protection of the right to housing - Homelessness prevention in the context of evictions* Brussels: European Union.

It's the lack of availability of housing – the housing points for a house in north or west Belfast – to get the points for the threshold – there's all these barriers. They're pushing this model [Housing Options] *but the access is ridiculous.*

There is no single people housing out there in social housing.   The big issue is just the lack of housing.

Smartmove and Housing First, whilst they are there, they're not really significant options for our clients. For our high need clients there is nowhere for them to go. Also young people, their options are limited because of the single room rate.

Private landlords don't want [people claiming benefits] *and whenever they do, it's the really crappy stuff that they can't let out. And so many private landlords in Northern Ireland have single properties…came into the market during the property boom, they're not landlords – it's someone who's doing it on the side.*

There is not enough permanent accommodation in terms of the Housing Strategy, people are silted up in temporary accommodation. The cost of the single lets, say over the 5 years, would tell a tale. It's bound to be cheaper to facilitate a move into permanent accommodation.

I had applied for housing, but I didn't attend the interview, there was no point. You get about 50 to 60 points for living in the Foyer but unless you have over 200 points you can't get a house in your preferred areas.

You would be waiting for a very long time to get your points and the areas you wanted. It's very hard to get a place.

Progress towards Actions and Key Priorities

Six Actions were put in place to contribute towards the delivery of the second strategic objective of the Strategy, i.e. to reduce the length of time households and individuals experience homelessness by improving access to affordable housing. The key priorities identified by the 2014 review of the Strategy did not include specific goals in relation to access to housing or increasing affordable housing supply.

Action 12: Enable homeless households to move on from temporary accommodation

This Action, to develop pathway models to enable appropriate homeless households to move from temporary accommodation to longer term housing, was intended to be in place by 2013/14. Three specific initiatives had been developed by NIHE that were identified as intended to address this Action at the time of writing:

- Housing First (see Chapter 2, 4 and 5).

- Smartmove (see Chapter 2).

- Housing Options, i.e. the Housing Solutions and Support Teams, which were still being rolled-out with the intention of being available across Northern Ireland by 2017 (see Chapter 2).

There had been significant progress towards achieving this action. Staff in the Homelessness Policy Unit produced a monthly report which was brought forward to the Performance Review Group, containing NIHE Landlord Services, which were required to focus on appropriate solutions for people in temporary accommodation.

This Action was interlinked with the implementation of the Housing Solutions and Support Teams. It is important to note however that all three of the identified initiatives were intended as approaches that would *remove* the need to use temporary accommodation (where practical and possible) rather than just minimise the duration of stays in temporary accommodation. Housing First, in particular, is intended as an entirely housing-led intervention, the model being posited on placing a homeless person with high and complex needs in ordinary, independent housing as rapidly as possible. The Housing First model actively seeks to avoid the use of hostels and other temporary, congregate and communal, accommodation and to promote social integration and health and well-being by providing stable, secure, suitable housing as rapidly as possible[94]. Smartmove has, according to reports gathered during the course of this evaluation, been re-orientated towards Full Duty Applicants, but again, it can, at least in theory, be used to place a household or individual found to be at risk of homelessness straight into settled housing.

Action 13: Review temporary accommodation

This Action centred on undertaking a fundamental review of the current temporary accommodation portfolio with regards to its strategic relevance, financial viability and access criteria, which was to be completed by 2015/16. The Palmer Report commissioned by Supporting People began a process of looking at temporary accommodation and recommended the closure of some hostels[95]. Steps were also made towards a review of NIHE hostel accommodation in 2014, but the process had been put on hold while the operational changes around Housing Options (the Housing Solutions and Support Teams) were put into place. Regional Forums have been asked to review local service provision with a view to realigning existing services to more appropriately meet need within a continuum of services, to identify unmet need and to develop appropriate commissioning plans[96].

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[94] Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu

[95] www.nihe.gov.uk/strategic_review_of_supported_accommodation_in_northern_ireland_funded_by_the_supported_people_programme.pdf

[96] This Action has been brought forward as an action in the draft Homelessness Strategy 2017-22, which became the subject of public consultation at the time of writing of this evaluation.

Some respondents were highly critical of a perceived lack of progress, despite the 2015/16 deadline, with respect to this Action. It was widely reported that the existing temporary accommodation system had become silted up and was too expensive, with Full Duty Applicant households and other homeless people spending too long in hostels and other forms of temporary accommodation. High usage of single lets as temporary accommodation was also criticised. This view was maintained in the context of another Action, centred on reducing the duration of stays in temporary accommodation, having been achieved (see Action 15, below). Different respondents reported the following views:

> *The fundamental review of current temporary accommodation hasn't happened…this has had a significant impact….it was supposed to be up to us to determine and identify the need – and then strategically through the regional forums to have an input to planning but this hasn't happened.*

> *The strategic overview hasn't happened. They need to think overall about single lets and whether to retain or get rid of* [those]. *The issue with single lets is that people are in them for years – it becomes permanent – the big question is how can you move people on from temporary accommodation?*

> *There has been no fundamental review of current temporary accommodation…I would have seen that in terms of producing some results in terms of the remodelling of services or the development of services, and in reality there's nothing has happened.*

Action 14: Examine the Housing-Led model

Under the 2014 reprioritisation (see Chapter 1), this action effectively became more specific, examining the applicability of Housing First to Northern Ireland, rather than the wider categorisation of 'housing-led' approaches of which Housing First is one. This Action was to be completed by 2015/16. The piloting and independent review of a Housing First service was completed in 2016[97], which meant that this Action had been fully completed (see Action 3 and chapters 2, 4 and 5).

Action 15: Reduce average time in temporary accommodation to 40 weeks

This Action, to reduce the average length of time in temporary accommodation from 46 weeks to 40 weeks over the life span of the strategy had been achieved and also surpassed. The average length of time in temporary accommodation in 2015/2016 was 36.7 weeks.

Annual placements in temporary accommodation had remained relatively stable during the period 2011/12 to 2015/16, with 2,738 households in 11/12 and 2,890 households in 15/16.

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[97] Boyle, F and Palmer, J with Ahmed, S (2016) The Efficiency and Effectiveness of the Housing First Support Service piloted by DePaul in Belfast, funded by Supporting People: An SROI evaluation.

Placements peaked at 2,989 in 2013/14, were close to that level in 2012/13 at 2,911 and were at their second lowest, at 2,817 in 2014/15[98]. Total use of temporary accommodation had remained steady, but the average duration of stays had fallen over the period covered by the Strategy.

A number of respondents commented that whilst the reduction was commendable, the length of time in temporary accommodation was still too long. Prolonged stays in temporary accommodation were viewed as having a significant impact on people's physical and mental health and also impacted families and children in terms of factors such as schooling and proximity to family and wider social networks.

The research evidence here indicates that prolonged stays in specific types of temporary accommodation may have negative impacts on health and well-being. A series of studies on B&B hotel use as temporary accommodation in London during the late 1980s and early 1990s reported detrimental effects on health[99]. A sustained reduction in the use of B&B hotels as temporary accommodation has been achieved in Northern Ireland, predating the 2012-2017 Strategy. When temporary accommodation is self-contained, adequate and in a location which is not very distant from informal support or services and is not characterised by social problems, e.g. an ordinary house or flat on an ordinary street, detrimental effects on health are less evident. However, potentially negative effects exist in relation to uncertainty about the future, particularly a lack of predictability and stability[100].

Action 16: Examine how Welfare Reform impacts on homelessness

This Action was to be undertaken by 2012/13, but the implementation of the welfare reforms has not yet been completed in Northern Ireland. The Spare Bedroom Subsidy or 'bedroom tax' will be fully mitigated until 2020[101]. NIHE was reported as continuing to monitor the likely impact of the changes and has undertaken some modelling of the possible impacts, which some commentators expect to directly and adversely influence the level and nature of homelessness in Northern Ireland[102]. The potential impact of the welfare reforms was viewed as significant and the challenges that were presented by the changes were considerable, according to several respondents:

> *The questions need to be answered, will Welfare Reform close the*
> *Private Rented sector route with no backdating of Housing Benefit*
> *and no local housing allowances? Until something is done about the*
> *permanent housing supply, welfare reform will be an issue.*

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[98] Source: Northern Ireland Housing Executive.

[99] Pleace, N. and Quilgars, D. (1996) *Health and Homelessness in London: A Review* London: The King's Fund.

[100] Pleace, N., Fitzpatrick, S., Johnson, S., Quilgars, D. and Sanderson, D. (2008) *Statutory Homelessness in England: The experience of families and 16-17 year olds* London: Communities and Local Government.

[101] See: Fitzpatrick, S. *et al* (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

[102] Ibid.

The details are now being looked at…There is a clear link here to hidden homelessness. We haven't come up with the answers and how we're going to work to mitigate this.

This is coming down the track; eventually we will be hit by things like the bedroom tax and we need to be flexible enough to respond to that; we all know it's coming.

Action 17: Introduce a Private Rented Sector Access Scheme

This Action was designed to be in place by 2014/15. The Action had been achieved. A Private Rented Sector Access Scheme, called Smartmove[103], began operation in April 2014. As noted under Action 10 (see Chapter 2), Smartmove had shifted from a focus on Full Duty Applicants to a wider preventative role. Some respondents talked about a perceived need to move expectations away from social housing, which was more secure and had more affordable rents and towards the more realistic option of the private rented sector, which Smartmove could support. Equally, the pressures on the adequate and affordable private rented housing were raised,

There is a need to re-educate people on the need to consider the private rented sector as a move. In reality this is the only option available to many people; there are questions of affordability and people resist this as an option.

The Private rented sector – it is a seller's market at the moment – they have young business people and professionals looking for accommodation, against that our people can't compete.

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[103] http://www.smartmove-housing.com

4   Rough Sleeping and Long-Term Homelessness

Introduction

This chapter explores the progress made with reducing rough sleeping and long-term homelessness during the five years of the *Homelessness Strategy for Northern Ireland 2012-2017*. Beginning with an overview, the Chapter moves on to examine performance in relation to Actions and key priorities that were designed towards eliminating rough sleeping and long-term homelessness by 2020.

Progress in Ending Rough Sleeping and Long-Term Homelessness

Overview

The measurement of people sleeping rough, using a modified street count methodology, suggests levels of people living rough are very low, at around six individuals a night, in Belfast[104]. This level, compared to other European cities of similar size and prominence is an *extremely* low level. This could be taken as indicating that progress towards the 2020 goal to eliminate rough sleeping is very strong, to the point that it can be argued that the goal has effectively, already been met.

Two criticisms can be levelled against such an assertion. The first is methodological. As noted in Chapter 2, there are marked limitations in using street counts, which the modified methodology employed in Belfast does not fully overcome. People outside the area covered by the count are not recorded, people who are not easily visible are not recorded and anyone sleeping rough outside the period covered by the count is also not recorded[105] (see Chapter 2).

The second criticism comes from the respondents to this evaluation and from other sources indicating that the levels of rough sleeping are higher. The media reported five deaths among people living rough, within Belfast, over the period December 2015 to March 2016[106]. The same number of deaths being reported by a homelessness charity over the course of the Winter of 2014-2015[107]. Reports from within the homelessness sector, which are anecdotal but also based on contacts with people who are currently homeless, also suggest somewhat greater numbers. The research team for this evaluation talked to currently homeless people who said 20 to 30 individuals were living rough in Belfast at any

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[104] Northern Ireland Housing Executive, The Welcome Organisation and DePaul Belfast City Centre Management (2016) *Belfast Street Needs Audit* Belfast: NIHE.

[105] Baptista, I., Benjaminsen, L., Pleace, N. and Busch-Geertsema, V. (2012) *Counting Homeless People in the 2011 Housing and Population Census* Brussels: FEANTSA.

[106] http://www.belfastlive.co.uk/news/belfast-news/woman-found-dead-after-sleeping-11065389

[107] http://www.thepavement.org.uk/stories.php?story=1737

one point. This contrasted with the estimate of six people living rough at any point in time, reported by the modified street count. One respondent highlighted what they saw as the importance of not defining a 'rough sleeper' in narrow terms:

> *Anecdotally I know there are loads of people sleeping rough in subways and particularly young people. But the street audit showed very low numbers of rough sleepers on the streets. There does seem to be more people on the streets but we're told that they're not really homeless. Whether it's to do with homelessness or not, or whether it's to do with drug use and legal highs, they're not making it home at night and they're becoming used to a lifestyle pattern for them; then they must be at high risk.*

Despite these differences in perception, views on the degree of progress in ending rough sleeping in Northern Ireland were not polarised. There were those asserting that there was very little rough sleeping at all, but those criticising that viewpoint were not suggesting that large numbers of people were living rough. This evaluation found a broad perception that rough sleeping, while present and linked to some deeply disturbing events, including deaths on the street, was not a social problem being experienced by many people. Levels were, from the differing perspectives, seen as broadly seen as being low. For some, there were major social problems around homelessness that were centred on populations who were *not* sleeping rough. Different respondents made the following comments:

> *The issue here is hidden homeless, the sofa surfing, the majority of people that come through our doors won't necessarily have been rough sleeping. Stay with their Aunties, stay with their friends, stay with the cousins.*

> *…too much attention on rough sleeping – given the scale of the problem in Northern Ireland…it's only really a Belfast problem.*

> *We can alleviate the need to sleep rough – but ending homelessness is very different.*

Some criticisms were directed at the efforts made to respond to rough sleeping in Belfast following the 2015/16 deaths. Some respondents highlighted what was seen as a tendency to fire-fight a problem that had attracted media attention while other aspects of homelessness were not being addressed. This is not to suggest there were respondents who downplayed the deaths or the experience of living rough that was occurring, but there were some taking the view that the social problem of homelessness was much wider. One respondent put this opinion in the following terms:

> *A wee bit too much attention in the current strategy – it's really Belfast and because it's so political.*

People are still experiencing rough sleeping and, it does appear, dying as a consequence, but there are not direct parallels with what is happening on the streets of some broadly comparable European countries[108], or indeed with many of the larger cities in England[109], Scotland[110] and Wales[111]. Northern Ireland appears - again bearing the limitations in available data in mind - to have comparatively very low levels of people sleeping rough.

Data in respect of long-term homelessness were not available. The main methods by which these populations are counted and monitored is via periodic surveys of homelessness services, or through the ongoing collection of information via a shared dataset across homelessness services, the CHAIN database in London being one example[112].

When a survey is conducted of homelessness services over a time-limited period, the chances are that many of the people surveyed will be long-term homeless people, often with high and complex needs. American research, based on surveys, initially seemed to suggest that most homeless people were long-term homeless and had high and complex needs. However, when an alternative approach was used, which like CHAIN, involved collecting information on everyone using homelessness services for a year or more, this picture was proven to be incorrect. One American study found the number of long-term and repeatedly homeless people was small, at around 22% of the population using homelessness services, but this 22% consumed 67% of the bed-nights (a 20 bed hostel would have 20 bed-nights available per night, 7,300 nights over one year)[113]. A pattern which CHAIN data and survey research suggests also exist, at least to an extent, in London and in other parts of England[114].

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[108] In 2014, Denmark estimated it had 595 people living rough at any one point and Finland estimated 332 people, while Sweden reported 280 (broadly comparable in population size) Source: Busch-Geertsema, V.; Benjaminsen, L.; Filipovič Hrast, M. and Pleace, N. (2014) *Extent and Profile of Homelessness in European Member States: A Statistical Update* Brussels: FEANTSA.

[109] The 2015 rough sleeper count in England reported 3,596 people, 940 of whom were in London. The same methodological limitations apply to this count as to that conducted in Belfast, i.e. it is likely to underrepresent the population because the population is fluid, hidden and exists outside areas where counting takes place. Note that there is evidence that migrant populations are among those sleeping rough, at potentially higher rates in London than is the case in Belfast, see:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/503015/Rough_Sleeping_Autumn_2015_statistical_release.pdf

[110] http://www.gov.scot/Resource/0050/00508824.pdf

[111] https://thewallich.com/news-rough-sleeping-increase-cardiff/

[112] http://www.mungos.org/chain

[113] Kuhn, R. and Culhane, D.P.(1998) Applying Cluster Analysis to Test a Typology of Homelessness by Pattern of Shelter Utilization: Results from the Analysis of Administrative Data Available at:
http://works.bepress.com/dennis_culhane/3/

[114] Jones, A. and Pleace, N. (2010) A Review of Single Homelessness in the UK 2000 - 2010, London: Crisis; Fitzpatrick, S., Johnsen, S. and White, M. (2011) Multiple exclusion homelessness in the UK: key patterns and intersections. *Social Policy and Society*, 10(04), pp.501-512.

The debates about the nature of long-term and repeated homelessness are complex and the available data indicate that the extent and nature of this social problem is not constant, but can be influenced by factors like differences in welfare systems and strategic and service-delivery level responses to homelessness[115]. A clearer image of long-term homelessness in Northern Ireland, understanding numbers, characteristics, experiences and support and treatment needs is required before progress towards the reduction of this form of homelessness can be monitored (see chapters 6 and 7).

Progress towards Actions and Key Priorities

Five Actions were put in place to contribute towards the delivery of the third strategic objective of the Strategy, i.e. to remove the need to sleep rough. The key priorities identified by the 2014 review of the Strategy that related to this objective included the introduction of the Common Assessment Framework, the Central Access Point and the development of Housing First (see also chapters 1, 2, 3 and 5).

Action 18: Evaluate services and data sharing for homeless people with alcohol addiction

This Action focused on evaluating existing services and information sharing arrangements in relation to the needs of those with alcohol addictions and was scheduled to be completed by 2013/14. This Action had been partially achieved at the time of writing. The ongoing development of the Common Assessment Framework providing the basis for a standardised system for identifying specific support needs around alcohol, wherever a homeless or potentially homeless person seeks assistance.

Regional Forums set up following the launch of the reprioritised homelessness strategy have been tasked with undertaking a needs analysis, with a view to identifying gaps in services provision and informing commissioning plans. This process will incorporate data collection on the needs of those with addictions.

Action 19: Agree service changes to ensure effective interventions

This Action centres on modification of existing service responses to enhance effectiveness when working with people sleeping rough. The goal was that this change would be in place by 2013/14.

The available evidence is that services that follow a harm reduction framework using personalisation and co-production, in which people living rough are shown respect, given choice and control and work in collaboration with support workers, are most effective. The Rough Sleepers Initiative, which greatly reduced the level and extent of rough sleeping in London during 1990-1999, adopted this approach with the Tenancy Sustainment Team

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[115] Benjaminsen, L. and Andrade, S.B. (2015) Testing a Typology of Homelessness Across Welfare Regimes: Shelter Use in Denmark and the USA. *Housing Studies* 30(6), pp.858-876.

model, which also informed the later, again successful, *Coming in from the Cold* strategy[116]. Globally, the evidence in support of Housing First, which forms part of the national homelessness strategies in Belgium, Canada, Denmark, Finland, France and the USA, highlights the importance of giving homeless people with complex needs choice and control, alongside active engagement by support with a recovery orientation[117]. The importance of flexibility in service responses towards people sleeping rough is also highlighted in the current evidence base[118].

A Joint Ministerial Action Plan was produced in January 2016 which included a number of agreed service changes including an increase in hours in street outreach services, extension of crash (emergency) facilities in Belfast and an arrangement between NIHE and Belfast Health and Social Care Trust to ensure homeless people discharged from hospital are signposted to the correct services. Progress had been made in building structures that should, when fully operational, allow for joint assessment and the creation and deployment of flexible, user-led, packages of support were being developed. These included the Common Assessment Framework and Central Access Point, while the Housing First model itself, which had been piloted and reviewed[119], is an example of the innovative service models that have proven successful in ending homelessness for many people with high and complex needs. The Regional Forums were also intended to realign services to allow for a more effective set of supports for people sleeping rough (see Chapter 1). This Action can be regarded as complete on the basis of this evidence.

Action 20: Consider a "Housing Led" model

This Action, to consider "Housing Led" model as an alternative to one providing a continuum of services, was intended to be undertaken by 2013/14. The re-prioritisation of the Strategy introduced a more specific key priority to develop a Housing First service, which has a distinct form[120], rather than to explore a housing-led service, which is within a broader categorisation encompassing several different forms of floating support service.

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[116] Lomax, D. and Netto, G. (2007), *Evaluation of Tenancy Sustainment Teams*, London: Department for Communities and Local Government.

[117] Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu; Padgett, D.K; Henwood, B.F. and Tsemberis, S.J. (2016) *Housing First: Ending Homelessness, Transforming Systems and Changing Lives* New York: Oxford University Press; Goering, P., Veldhuizen, S., Watson, A., Adair, C., Koop, B., Latimer, E., Nelson, G., MacNaughton, E., Streiner, D. & Aubry, T. (2014) *National At Home/ Chez Soi Final Report*. Calgary, AB: Mental Health Commission of Canada.

[118] Busch-Geertsema, V., Edgar, W., O'Sullivan, E. and Pleace, N. (2010) *Homelessness and Homeless Policies in Europe: Lessons from Research* Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities.

[119] Boyle, F and Palmer, J with Ahmed, S (2016) *The Efficiency and Effectiveness of the Housing First Support Service piloted by Depaul in Belfast, funded by Supporting People: An SROI evaluation.*

[120] Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu

This goal had been fully achieved, with a Housing First service being piloted and evaluated. The results of this evaluation are reported elsewhere[121], but there is an understanding that the Housing First will now form a core element of the strategic response to rough sleeping. Housing First should, based on experience elsewhere[122], also provide a means to reduce long-term and recurrent homelessness, alongside a role in reducing experience of rough sleeping (see Action 3 and chapters 2 and 5).

Action 21: Produce a new Belfast Rough Sleepers Strategy

This Action was intended to be delivered by 2014/15. A revised strategy for Belfast has been developed, which focuses on a multi-agency approach, designed to provide services in response to street activity, including rough sleeping, begging and street drinking. Long term rough sleepers have been identified, with case management being provided by the Belfast Housing Solutions and Support Team. Services were, at the time of writing, being reviewed to ensure that easily accessible bed spaces were in place and there was clear communication between NIHE, City Council, PSNI and Belfast City Centre Management. An audit of rough sleeping had been undertaken, reporting low numbers[123], though there are some limitations to the modified street-count methodology that was employed (see Chapter 1). NIHE also provided the *Homelessness Services in Belfast: Action Plan* to support the Belfast strategy.

Respondent views on the development of the Belfast Rough Sleepers Strategy were largely positive. The initiative was welcomed as a serious attempt to address the issue of rough sleeping, particularly in the context of the deaths among rough sleepers that had occurred during the winters of 2014/15 and 2015/16. The respondents, working at strategic and service delivery level, identified two key challenges, with different respondents making the following points:

- Some people sleeping rough were not engaging with services.

- The need for a wider strategy, encompassing areas outside Derry/Londonderry and Belfast.

    There is still reluctance from some people to go into hostels – and to go into certain hostels – and I think we need to look at that. So rather than saying that there's loads of hostels and beds out there – if people don't want to go into hostels then we need to look at the model we are providing and the services

[121] Boyle, F and Palmer, J with Ahmed, S (2016) The Efficiency and Effectiveness of the Housing First Support Service piloted by Depaul in Belfast, funded by Supporting People: An SROI evaluation.

[122] Padgett, D.K; Henwood, B.F. and Tsemberis, S.J. (2016) Housing First: Ending Homelessness, Transforming Systems and Changing Lives New York: Oxford University Press

[123] Northern Ireland Housing Executive, The Welcome Organisation and DePaul Belfast City Centre Management (2016) Belfast Street Needs Audit Belfast: NIHE.

They're only looking at rough sleeping in two places – Belfast and Derry – and the assumption is that there is no rough sleeping anywhere else….there isn't a lot of rough sleeping elsewhere but they need to have a NI wide strategy.

Respondents also reported a concern that the range, number and diversity of services now provided across Belfast for street homeless was actually counter-productive – examples were given of people purposefully sleeping in certain areas in order to receive free sleeping bags and food – and moving around to avail of various services through the night. There was an overall concern that the plethora of services was in fact supporting people to continue to live on the streets rather than enabling them to get into appropriate accommodation or services.

Action 22: Develop a mechanism for referral to addiction services

This Action, to develop a mechanism which will enable all agencies to refer their clients to addiction services, was to be introduced by 2014/2015. Again, this action was interdependent on wider goals for the Strategy and the key areas identified by the 2014 reprioritisation, including Housing Options (Housing Solutions and Support Teams), the Common Assessment Framework and the Central Access Point (see Chapters 1, 2, 3 and 5). As these various elements were still in the process of being rolled-out at the time of writing, this Action had been partially achieved.

5　Services for Vulnerable Homeless Households and Individuals

Introduction

This chapter explores the progress made with improving services for vulnerable homeless adults and individuals during the five years of the *Homelessness Strategy for Northern Ireland 2012-2017*. The chapter explores progress towards improving services for vulnerable homeless households and individuals at strategic level, before examining performance in relation to the specific Actions, that were designed to enhance services for homeless people with support needs.

Progress in Improving Services for Vulnerable Homeless People

Overview

The direction of travel in the Strategy, towards coordination and joint working, using a Housing Options model (Housing Solutions and Support Teams), the Common Assessment Framework and Central Access Point, combined with the emphasis on Housing First, was universally praised. In relation to meeting the needs of vulnerable people who had become homeless, strategic level and operational level respondents and, indeed, homeless people themselves, stressed the need for service coordination. One respondent summarised the views of many others:

> *Integration is the only way forward – it's about understanding that we're only one community – that doctors should be responding to mental health issues, that there's a recognition that a 17 year old with no home to go to has a right to a home, that women have the right to remain in their own home with the protection they deserve against the men who are using violence against them.*

Respondents working at strategic and operational level highlighted the need for orchestrated, flexible packages of support from multiple agencies. There was a need for coordinated support to avoid situations in which vulnerable adults kept using what, were supposed to be, emergency or short-term services on a sustained or repeated basis, without successfully exiting homelessness. Having the right mix of support in place at the right point was emphasised by different respondents, as were some issues in delivering coordinated packages of support:

> *…higher need individuals with large amounts of wraparound* [multiple and complex] *needs are stuck in that revolving door of hostels and services.*

The other side is to try and help people who are chronic homeless, there is a lack of understanding amongst housing staff, the work that needs to be done with someone to transition them into permanent housing. If you try to house someone too quickly - you can put in as much floating support and other support as you like – but that tenancy will fail. We have lots of young people coming in through our doors, they were given permanent accommodation or a tenancy, it fails because there's not enough support and they weren't ready. There needs to be an emphasis to work with people to get them ready for independent living. That needs to be broadened out across the sector. There needs to be a lot of preparation, no point in people just biding their time until they get accommodation.

I think there are gaps…I think there are cracks – and there's people falling through those cracks big time. Especially in terms of mental health. We've had cases where people have been asked to leave other homeless services because they're not getting Housing Benefit. Then they arrive with us, we realise they have huge mental health needs, and they're not capable of doing what they need to do to access Housing Benefit… they don't have the mental capacity.

The big gap for us in terms of our client base is the complex needs of the client…mental health, addiction and homelessness. To me there's a major gap in the joint working that is required.

We need to get everyone around the table, the biggest problem we face is the multiple and complex needs of the clients we're working with. We do this on a smaller scale, getting people around the table…

Basic issue around assessment and diagnosis, before they can access certain services…obviously clinical reasons for some of this, but when you're at the coal face trying to provide some sort of support, it seems as if there's a blockage in the system, you're kinda of helpless.

The emphasis on coordination between agencies, which lies at the heart of the Strategy (see Chapter 1) was seen as correct, but in practical terms this kind of interagency coordination and joint working was not always in place at the time of writing. There could be issues in bringing all the required agencies together and in accessing specific supports, such as mental health services. The movement towards a Housing Options model, with the Common Assessment Framework and Central Access Point was of course designed to overcome these issues around coordination, but the process of implementation was not yet complete at the time of writing (see Chapter 2).

Frontline homelessness service providers also reported challenges in finding suitable, affordable housing in an appropriate location. Where accommodation and housing needs

could not be properly met, there was no suitable central point, no hub, around which it was possible to organise floating support, because a coordinated package of support needed someone to be housed, in order to be effective. The inherent limits of trying to treat and support people who living in homelessness services, or on the street, have long been realised; effective support to someone who is homeless and vulnerable requires someone to be living in suitable accommodation[124].

Respondents did not generally view the use of the private rented sector positively, owing to concerns about affordability, quality and security of tenure. Pressures on social rented housing stock were seen by some respondents as meaning it was not always a realistic option to pursue. Different respondents made the following points:

> *The suitability of the places they are offering, the places they are offering young people – we just know – they're not going to be there for very long….and we find… they are all being offered the same place. Then you've just got a whole gathering of them together.*

> *Affordability of housing, especially the care leavers, they are entitled to the higher rate until they're 21, being put into accommodation they can't then afford, as the rate halves. This has a huge impact; the young people find it really difficult to prepare for that.*

> *I just think that Housing Solutions, for those who are most vulnerable on the streets, I find that culturally it's quite difficult for the Housing Solutions staff to understand the complexity of some people – it's like slot people into a hole somewhere – I think they need a lot more training.*

> *We have worked with young people who have multiple complex needs, drug and alcohol issues, MH problems, and there is nowhere for us to move them onto, there's just a complete absence of options.*

Commissioning structures and resource levels were also reported as sometimes presenting challenges when different elements of the homelessness sector attempted to coordinate with one another. Funding was allocated on a service-by-service basis, rather than linked to homeless households or individuals, which meant that a service had to sometimes cut off support it was providing, as part of a package of services, after a certain resource limit was reached.

> *Joint partnership really works, but that's a big problem with the Strategy. For example, if they are paying for me to do a service, for*

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[124] Quilgars, D. and Pleace, N. (2003) *Delivering Health Care to Homeless People: An Effectiveness Review*, Edinburgh: NHS Health Scotland.

example we say to Women's Aid, you deal with the issue around Domestic Violence and we'll deal with the issue around social isolation. But that joined-up approach is frowned upon…it's viewed as duplication of services…but it's not, it's about the support you can put in.

Two weeks is the maximum we've ever really got to do partnership work – but that's not enough.

The homeless people who participated in this research had sometimes received coordinated support, but had sometimes not been able to access or worked with services that they could successfully engage with. Again, it is important to note that this small group was not necessarily representative of homeless people as a whole. Three sets of experiences were reported by homeless people. The first was what can be characterised as a partial success, in that one or two elements of support had been put into place, but not everything that they required to successfully sustain an exit from homelessness had been available. The second was a lack of access to anything except low threshold services offering emergency accommodation or daycentre services, i.e. being kept fed and sheltered, but not able to access rehousing. The third was access to coordinated services that had worked, which had delivered at least a short-term exit from homelessness.

Two months ago I got a flat – but there's no support in the flat – and I feel lonely…I locked the flat last night and slept outside…I want to give it up, I'm lonely and I have mental health problems – I feel safe on the streets – that's my family.

Not knowing what you will be doing from night to night – it's very uncoordinated – so limited in terms of spaces…I got fed up of it – back and forth each night. I ended up back on the streets.

My key worker and all the staff – they have helped me with money and benefits – helped me to sort out stuff for my flat….staff do support you.

Many homeless people are directly assisted by the statutory system, with 11,202 households being accepted as Full Duty Applicants in 2015/16. Alongside this, there is the network of homelessness services provided for single homeless people and the support targeted on single homeless people. A lot of assistance and support – and access to housing – is facilitated by homelessness services and NIHE, but there is equally some evidence suggesting that vulnerable homeless people are sometimes falling through the safety nets and support systems that are in place.

There was some evidence of repeated homelessness. Homeless people, who were usually lone adults with high and complex needs, appeared to sometimes be accessing services but were not able to sustain an exit from homelessness. For some front-line staff, this was again linked to service coordination:

The most frustrating thing for us that we see repeat clients, that we had managed to get a flat for, worked really intensively with over 24 hour periods, for months sometimes, they have moved out and within weeks the tenancy has failed.

Progress towards Actions and Key Priorities

Sixteen Actions were put in place to contribute towards the delivery of the fourth strategic objective of the Strategy, i.e. to improve services to vulnerable homeless households and individuals. The key priorities identified by the 2014 review of the Strategy that related to this objective included the introduction of the Common Assessment Framework, the Central Access Point and the development of Housing First (see also chapters 1, 2, 3 and 4).

Action 23: Continue to support for the Domestic Violence helpline service

This Action had been fully achieved. NIHE funds the 24 hour Domestic and Sexual Violence helpline. In 2015/16 the NIHE agreed to provide up to £113,000 of funding to the helpline. NIHE also funded a replacement telephony system for the service in the same year.

Action 24: Support the MARAC process

This Action centred on continued support for the Multi-Agency Risk Assessment Conference (MARAC) process[125]. MARACs are intended to provide a forum for sharing information and coordinating support to reduce harm to high-risk domestic violence victims. Research has suggested this response to domestic violence can enhance efficiency through close joint working between key agencies, improving safety, security and support. MARACs are mainly focused on women, who experience domestic violence at a far greater rate than men and who are at much greater risk of dying as a consequence of domestic or gender-based violence. NIHE remains involved in the MARAC process providing accommodation and advice service. A protocol is now in place with Women's Aid setting out referral procedures and monitoring arrangements. This Action had been fully achieved.

Action 25: Roll out of the Sanctuary Scheme

This Action was centred on rolling out a Sanctuary Scheme as a MARAC option across Northern Ireland and was intended to be in place by 2013/14. A Sanctuary Scheme can be described as a multi-agency victim centred initiative which aims to enable households at risk of (domestic) violence to remain in their own homes and reduce repeat victimisation through the provision of enhanced security measures and support[126]. Sanctuary schemes are mainly intended for women at risk of domestic and gender based violence, reflecting the much higher rates at which women experience domestic violence.

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[125] Robinson, A.L., 2004. *Domestic Violence MARACs (Multi-Agency Risk Assessment Conferences) for Very High-risk Victims in Cardiff, Wales: A Process and Outcome Evaluation*. Cardiff University School of Social Sciences.

[126] Jones, A., Bretherton, J., Bowles, R. and Croucher, K. (2010) ^, London: Communities and Local Government.

This Action had been fully achieved with the Sanctuary Scheme option which was available for all Housing Executive tenants who are victims of domestic violence at the time of writing. Wider availability of the Sanctuary Scheme could be explored, as there is an evidence base indicating that this model can be effective and can be the preferred option of women at risk of domestic violence. A key strength of the model is that a woman (and children where present) can remain in their own neighbourhood and within contact of their social supports, rather than having to physically move what may be considerable distances[127].

Information provided by NIHE indicated that the Sanctuary Scheme had been approved for full implementation in May 2011, shortly before the Strategy came into effect in 2012. Figures provided by the NIHE indicated a total of 48 cases/jobs had been completed under the Sanctuary scheme to a cost of some £40,000, as at September 2014[128].

Action 26: Review refuge provision

Refuge services provide safe emergency accommodation and support to women and children escaping or at risk of domestic violence and abuse. The usual model is congregate supported accommodation, with on-site staffing. Specialist services are sometimes provided for men, BME and LBGT people at risk of violence, though these tend not to be found outside major cities.

This Action was intended to be achieved by 2014/15. This Action had been partially achieved at the time of writing. Women's Aid is reported as undertaking an ongoing review of refuge provision, reviewing the fitness for purpose of the current refuges and working to upgrade existing services where necessary. New refuge provision was being developed at the time of writing, developed by Women's Aid in conjunction with Ulidia Housing Association. In 2016, some existing refuge provision was shared, rather than offering self-contained apartments, and work was proceeding to upgrade these services on a phased approach. The recently constituted Regional Homelessness Forums will be reviewing the needs of all key client groups, including victims of domestic violence, and identified needs will be reflected in commissioning plans developed through these forums (see Chapter 1).

Action 27: Multi-agency contributions to the pre and post-release management process

This Action, which was to be agreed and in place by 2015/16, centred on seeking the contribution of all appropriate agencies to the pre and post-release risk management process for sexual and violent offenders. This process uses multi-agency to minimise any risk that someone with a history of violent/sexual offences is appropriately supervised, supported and monitored, part of which is to ensure that they do not become homeless. At the time of writing a procedure is in place where NIHE staff take part in prison pre-release

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[127] Ibid.

[128] Most recent figures available at the time of writing.

LAPP (Local Area Public Protection Panel) meetings with other agencies, as part of the risk management process. This Action had been achieved.

Action 28: Case management for transition to permanent accommodation for sexual/violent offenders

This Action, scheduled to be in place by 2015/16, was intended to introduce a case management approach for agencies to enable sexual/violent ex-offenders, where deemed appropriate, to make the transition to permanent accommodation taking account of risk assessment and management. Again, these processes involve balancing concerns about ensuring that community safety is maintained, that support needs are met and that homelessness for former offenders in these groups is avoided.

This Action had been achieved. At the time of writing, NIHE staff meet with approved premises management on a quarterly basis to review the housing/homeless applications of offenders. The Housing Options approach is intended to further develop personal housing solutions for all clients, including ex-offenders, who will be individually case managed.

Action 29: Develop appropriate accommodation for high risk offenders

Designed to be in place by 2015/16, this Action centred on ensuring appropriate accommodation solutions were in place for high risk offenders. A specific service has been contracted for this purpose by NIHE the DIME (Dispersed Intensively Managed Emergency accommodation) project, which offers temporary accommodation and support with an emphasis on community safety, meeting support needs and preventing homelessness among high risk offenders (released on probation) and ex-offenders. This Action has been fulfilled by the provision of the DIME project, which was reviewed in 2011, however, no evaluation or outcomes data for the DIME was available for the period covered by the Strategy, so the effectiveness of this service cannot be reported upon.

Action 30: Assess the need for bespoke accommodation for women offenders

Action 30 centred on undertaking research and analysis on the need for a bespoke accommodation facility for women offenders and was to be completed by 2012/13. This Action had been achieved. The Regional Forums set up following the launch of the reprioritised homelessness strategy (see Chapter 1) were identifying gaps in services provision, which could lead to the commissioning of a specific facility or service for women offenders, if required. NIHE had also met with the Department of Justice to review the situation for women offenders with the conclusion being reached that existing services were sufficient. Some respondents described progress towards completing this Action as slow, although activity had increased in recent months. While accommodation for women offenders was available, some respondents questioned whether this was adequate.

The use of a fixed site service, employing communal or congregate living, with on-site staffing is one option. In Manchester, Threshold Housing Association within the New Charter

Group has developed a Housing First pilot which is specifically focused on homeless women with complex needs, which can include a history of offending[129].

Action 31: Assist PBNI in the implementation of their Accommodation Strategy

This Action, to support the Probation Board for Northern Ireland (PBNI) in the implementation of their accommodation strategy for ex-offenders did not have a specific timeline attached to it. The Action had been achieved at the time of writing, NIHE was meeting regularly with PBNI and the Department for Justice (DOJ) to discuss issues around the accommodation needs of offenders. Preliminary analysis of existing services had been carried out by DOJ and further work was ongoing. NIHE were also represented on the PPANI (Public Protection Arrangements Northern Ireland) Strategic Management Board which meets quarterly and chaired the quarterly PPANI Accommodation sub-group. NIHE also sat on the Hostel Managers Forum for approved premises which are funded by Supporting People, which includes six hostels providing accommodation for 76 individuals.

Action 32: Identify the specific needs of BME groups and consider improvements to existing services

This Action, which was to be completed by 2013/14, centred on identification of the specific needs, including the housing needs, of Black and Minority Ethnic (BME) groups and the consideration of improvements to existing services. This Action had been fully achieved. The Asylum Development Unit is designed to identify and meet the housing needs of Asylum Seekers and translation services are provided in homeless hostels and at NIHE services. The Supporting People programme has responded to identified need and funds various projects, such as STEM (supporting tenancies for ethnic minorities).

Respondents' comments with regard to this Action were positive with respect to service provision, but issues were again reported with securing sufficient, adequate, suitable and affordable housing. One respondent commented:

> *Whilst there have been developments in hostels, it's the move-on and follow-on accommodation that is the biggest difficulty. There are very limited options, only some parts of South Belfast where there is private rented sector and the population is transient.*

Action 33: Produce Homeless Action Plans for rural communities

Action 33 centred on the production of Homeless Action Plans, setting out how homelessness services to rural communities can be improved within an implementation date set at 2012/13. This Action had been completed, in that planning systems had been put in place. The Housing Options (Housing Solutions and Support Teams) element was, however, still being rolled and would not cover all areas until 2017.

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[129] http://thp.org.uk/sites/default/files/housing_first_leaflet.pdf

In 2012/13 Homeless Action Plans were produced locally. Following the launch of the reprioritised strategy, new Regional Forums (Belfast, North and South) were established and these are tasked with identifying local need and informing the commissioning plans to address this (see Chapter 1). A mid-year review of Homeless Action Plans was scheduled to take place in 2016, but had not yet occurred at the time this evaluation of the Strategy was being undertaken.

Respondents were positive about the specific consideration of rural areas within the wider Strategy. However, as noted in Chapter 2, some questioned whether the Housing Options (Housing Solutions and Support Teams) approach was an inherently 'urban' approach, drawing attention to the less service-rich environment that existed outside Belfast and Derry/Londonderry. Housing Options was seen as posited on the assumption that an array of homelessness and other support and treatment services would be accessible. Some respondents thought a specific set of targets for rural areas needed further development, one commented:

> I would like to see more detail in terms of identifying actions and targets. It needs to be more specific. It needs to identify hidden homelessness. It needs to identify actions, a strategy in terms of what needs to be done with timelines and timescales…

Action 34: Measure the extent of rural homelessness

This Action was focused on the measurement of the extent of rural homelessness, including the number of households and individuals presenting as homeless in rural locations, and was to be initiated by 2014/15. This Action had been achieved. Rural homelessness is measured on a quarterly basis by NIHE and represents 11–13% of the total homeless population. The Homeless Policy and Supporting People units had also contributed to the development of the NIHE Rural Action Plan to address the specific needs of rural homeless clients.

From an external perspective, the limitations of available data on homelessness do need to be noted. Northern Ireland lacks clear data on hidden or concealed homelessness and measurement of rough sleeping has both methodological and geographical limits. The statutory homelessness statistics provide indications of the scale and trends in homelessness, but are not a measure of homelessness, recording contacts with the system, but excluding any homeless person or household who does not present as homeless (see Chapter 1).

Respondents raised the question of the extent of hidden homelessness in rural areas, while noting that there was data on contact with the statutory system and homelessness services. Different respondents commented on the possible extent of hidden homelessness in rural areas and related this to homelessness services and social housing being concentrated in the towns and cities.

…social housing. If there isn't any in their area, they don't see the point of applying or even know about it.

So they are living with wider family. This is effectively not a choice or an option. They either stay in a rural area in these circumstances, or move into a hostel in the town…

Action 35: Relevant agencies to collaborate on reducing youth homelessness

The goal of the Strategy was that this Action should be achieved by 2012/13, with relevant agencies being expected to set out their contribution to the development of preventative programmes that aimed to reduce homelessness for young people. The evaluation found that the structures had been put in place and this Action had been completed, while further work was ongoing in this area (see Action 11).

An inter-agency Young Persons Regional Reference Group has been established to monitor and address youth homelessness. There are a number of specific projects being supported, such as the Edges interagency project delivered by Start 360, a preventative service focused on 13-17 year-olds at risk of offending, entering care and possible risk of homelessness (see Action 11)[130].

Action 36: Review prevention programmes to ensure resources are targeted on youth homelessness

Action 36 was centred around a review of investment in prevention programmes and initiatives. The goal was to ensure resources were targeted at those young people most at risk and was to be undertaken by 2014/15. There was also a concern to demonstrate improved outcomes in respect of the prevention of youth homelessness.

This Action had been achieved. The Young Persons Regional Reference Group noted in Action 35 above has ensured multi-agency collaboration to ensure resources are targeted on youth homelessness. NIHE had increased funding for the Simon Community to enhance their homelessness prevention programme from 2013-14 onwards. This included presentations in schools and youth groups and was targeted towards young people in disadvantaged areas. The prevention programme included the establishment of a 'One Stop Shop' at 259 Antrim Road[131]. A number of specific accommodation services have been developed for young people which are funded by Supporting People.

Action 37: Review existing joint working arrangements for young people

Action 37 centred on a review of existing joint working arrangements, with particular reference to the delivery of information, assessment and support services for young people, was to be undertaken by 2014/15. Joint working arrangements were undertaken in conjunction with Social Services and mutually agreed Regional Good Practice Guidance was issued in April 2015[132], this Action being assessed as complete (see also Action 7).

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[130] http://start360.org/services/40/edges/

[131] http://www.simoncommunity.org/our-work/homelessness-services-northern-ireland/

[132] *Meeting the Accommodation and Support Needs of 16 – 21 year olds,* Regional Good practice guidance agreed by the NIHE and the H&SC Trusts, December 2014.

Action 38: Promote clear and flexible pathways to independence for young people

The final action of the Strategy required relevant agencies to set out their contribution to the development of a continuum of suitable supported accommodation services, which support clear and flexible pathways to independence for young people. This Action was to be undertaken by 2014/15.

This Action had been achieved. Ten floating support schemes with a capacity for 490 young people were in place. The interlinked development and roll-out of the Housing Options (Housing Solutions and Support Teams) was underway and was due to be completed in 2017.

Feedback from the ongoing redesign of NIHE frontline services is expected to inform the future development of needs analysis and a commissioning framework for homeless services. Work will also be undertaken in conjunction with Supporting People to attempt to ensure that a continuum of supported accommodation, as required in each area, incorporating pathway models through to permanent housing solutions is developed.

Again, from an external perspective, the developing evidence base indicates there are reasons to explore the possibility of using Housing First and housing-led models for the support of young people at risk of homelessness. In Canada, following the adoption of Housing First as a national strategy, policy attention has turned to the possibility of youth-focused Housing First services[133].

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[133] Gaetz, S. (2014) A safe & decent place to live: Towards A Housing First Framework for Youth Toronto: Canadian Observatory on Homelessness Press.

6   Evaluating the Homelessness Strategy

Introduction

This final chapter provides an overview of the *Homelessness Strategy for Northern Ireland 2012-2017*, draws conclusions on the progress that had been made by the end of 2016 and makes recommendations in relation to the next strategy. The chapter begins by setting the evaluation in context, discussing why the evaluation was undertaken at this point and the role of the Strategy in working towards the 2020 targets, to eliminate long-term homelessness and rough sleeping. Lessons from other homelessness strategies are then considered, looking at countries and other administrations where successes have been achieved in homelessness prevention and in ending long-term and recurrent homelessness. Finally, the chapter looks at the successes that have been achieved, in the light of the progress made in reducing and preventing homelessness in other contexts, and makes some recommendations for the next strategy.

Setting the Evaluation in Context

Acknowledgement of Achievements

There are, as is briefly described below, homelessness strategies which have reduced experience of homelessness to the point where it is extremely unusual for a citizen to become homeless, let alone experience sustained or recurrent homelessness. These systems are not perfect and some homeless people still fall between gaps, but the social problem of homelessness has been nearly, but not completely, eradicated in other contexts. One lesson from outside experience is that no system of homelessness prevention and reduction will be entirely perfect. The factors that trigger homelessness, from relationship breakdown through to treatment needs, domestic violence and economic factors cannot be stopped entirely. This said, experience from other countries shows it can be a realistic goal is to minimise experience of homelessness, through the correct mix of prevention and support services, so that only very low numbers of people experience long-term or repeated homelessness.

While the evidence base has limits, it does appear that countries with highly developed welfare systems and relatively extensive service provision for homeless people have less homelessness than countries without those characteristics. International evidence indicates that what would be potential homelessness in some other contexts is stopped in places like Northern Ireland, because of the relatively extensive welfare, health, housing and homelessness services that are available. Homelessness appears to be higher in administrations and countries without the kinds of systems that Northern Ireland

possesses[134]. In Southern and Eastern Europe, or the USA, Australia or Canada, the available evidence is that homelessness may be higher than is the case in Northern Ireland[135].

The critique provided in this final chapter must be seen in this context. This evaluation has found ambiguity and limitations in the design and implementation of the *Homelessness Strategy for Northern Ireland 2012-2017*. However, the daily achievements, for NIHE, for government departments and, particularly, for the homelessness sector in preventing and reducing homelessness must be fully acknowledged.

An Early Evaluation of an Ongoing Strategy

This evaluation was undertaken in the latter part of 2016, several months before the Strategy was designed to come to an end. Progress was measured as at 2016, this was not an evaluation of the final outcomes achieved by the Strategy. An obvious point here is in relation to the pursuit of prevention and the 2014 reprioritisation focus on a Housing Options model, which were to be rolled out by the end of the Strategy. A Housing Options model is being rolled out at the time of writing, this process is not yet complete, but then the period covered by the Strategy is not over.

Equally, the Strategy was designed, in part, to pursue a longer term objective, to end rough sleeping and long-term homelessness by 2020, not by 2017. The goals of the Strategy also need to be considered in quite precise terms. The objective to place prevention at the forefront of service delivery is, clearly, not a target to prevent homelessness at a set level by a set date, in the way that (to give an illustrative example) a target to reduce Full Duty Applicant numbers by 30%, by a given date, would be.

This evaluation has been undertaken at this point in time because of the policy cycle in Northern Ireland, which requires that a new Homelessness Strategy will be in place by the Spring of 2017. The new Homelessness Strategy is in the process of development at the time of writing.

Homelessness Strategies in other Contexts

Detailed comparison with other homelessness strategies is not possible. There are too many differences in culture, economy, health, welfare and housing systems to directly compare

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[134] Shinn, M. (2007) International Homelessness: Policy, Socio-Cultural, and Individual Perspectives. *Journal of Social Issues*, 63(3), pp.657-677; Fitzpatrick, S. and Stephens, M. (2014) Welfare regimes, social values and homelessness: Comparing responses to marginalised groups in six European countries. *Housing Studies*, 29(2), pp.215-234; Benjaminsen, L. and Andrade, S.B. (2015) Testing a Typology of Homelessness Across Welfare Regimes: Shelter Use in Denmark and the USA. *Housing Studies* 30(6), pp.858-876.

[135] The standard, extent and comparability of homelessness statistics varies across different countries. Some of those countries which might be expected to have relatively high levels of homelessness also have limited data on the extent and nature of homelessness, see: Busch-Geertsema, V.; Benjaminsen, L.; Filipovič Hrast, M. and Pleace, N. (2014) *Extent and Profile of Homelessness in European Member States: A Statistical Update* Brussels: FEANTSA.

the Homelessness Strategy for Northern Ireland 2012-2017 with say the US Federal Strategy or the Finnish National Homelessness Strategy.

However, it is possible to look at other strategies and consider, in broad terms, what those strategies sought to achieve, how they were developed and implemented and the outcomes they delivered. Several commonalities between successful homelessness strategies are evident[136]:

- A small number of clear, simple goals.

- A high degree of focus on arriving at political consensus and on vertical and horizontal intersectoral cooperation.

- Dedicated, ring-fenced allocation of resources.

- Coordinated assessment, referral and outcome monitoring systems, supported by data sharing.

- A similar approach, combining extensive preventative services, ranging from housing advice through to high intensity one-to-support, combined with a second tier of evidenced-based service provision for homeless people with high and complex needs.

- Recognition that the success of a homelessness strategy is underpinned by access to adequate, sustainable and affordable housing.

USA

In the USA, Federal attention has been focused on improvements in prevention and in reducing what is termed 'chronic' homelessness (i.e. long-term and recurrent homelessness associated with high and complex support needs). Federal strategy has combined the use of preventative services, an approach influenced by the English development and deployment of a more preventative approach in the early 2000s, with growing use of Housing First services.

Policy and administrative processes in America are complex, as individual states and cities have a considerable degree of control over social policy. New York, for example, is one of the few places that attempts to provide emergency shelter for the homeless population, whereas other cities and State respond to homelessness quite differently. Federal Strategy therefore sits atop and alongside differentiated State, County and city-level homelessness strategies. The Federal Strategy can be summarised as follows:

- There is a dedicated organisation for the development, implementation and coordination of the national homelessness strategy, the US Interagency Council on Homelessness (USICH). The Council, which meets four times a year, contains

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[136] See also Pleace, N. (2013) *Evaluating homelessness services and strategies: A Review* Brussels: FEANTSA http://www.habitact.eu/files/activity/actionresearch/_evaluationreview_habitat.pdf

the head of every major Federal government department and representation from the White House.

- The Federal Strategy *Opening Doors: Federal strategic plan to prevent and end homelessness* is subject to monitoring and an annual review. The objectives of the strategy, as at 2015 were:

  - Prevent and end homelessness among Veterans in 2015[137].

  - Finish the job of ending chronic homelessness in 2017.

  - Prevent and end homelessness for families, youth, and children in 2020.

  - Set a path to end all types of homelessness.

- A specific pattern of service delivery

  - Homelessness prevention

  - Housing First and related service models, including Critical Time Intervention (CTI)

  - A general emphasis on using service models that have been subject to academic evaluation, Housing First and Critical Time Intervention, for example, being viewed as 'evidence based' models.

  - Shared systems for checking service fidelity (ensuring services are consistent) and monitoring referrals, assessments and service outcomes. Using these systems is a requirement of receiving Federal funding.

- An annual count and estimation of homeless population is produced for the US Congress[138], which in 2015, reported:

  - The number of individuals experiencing chronic homelessness declined by 31% between 2010 and 2015.

  - Veteran homelessness dropped by 36%, between 2010 and 2015.

  - Between 2010 and 2015, family homelessness declined by 15%.

  - Overall, homelessness has declined by 11% reduction since the release of the *Opening Doors* Strategy.

The US *Opening Doors* Strategy notes:

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[137] Veteran homelessness is a particular issue in the USA, where rates of military enlistment and military service are comparatively high.

[138] *The 2015 Annual Homelessness Assessment: Report (AHAR) to Congress, Part 1: Point-in-Time Estimates of Homelessness* and Th*e 2015 Homelessness Assessment Report to Congress Part 2: Estimates of Homelessness in the United States*

From years of practice and research, we have identified successful approaches to end homelessness. Evidence points to the role housing plays as an essential platform for human and community development. Stable housing is the foundation upon which people build their lives—absent a safe, decent, affordable place to live, it is next to impossible to achieve good health, positive educational outcomes, or reach one's economic potential. Indeed, for many persons living in poverty, the lack of stable housing leads to costly cycling through crisis-driven systems like emergency rooms, psychiatric hospitals, detox centers, and jails. By the same token, stable housing provides an ideal platform for the delivery of health care and other social services focused on improving life outcomes for individuals and families. Researchers have focused on housing stability as an important ingredient for the success of children and youth in school. When children have a stable home, they are more likely to succeed socially, emotionally, and academically[139].

Homelessness is higher in the USA than in Northern Ireland, where from an American perspective homelessness would be seen as a relatively smaller social problem than is the case in America. However, there is evidence from the US that a dedicated organisation, rolling evaluation and consistent outcome monitoring of the homelessness strategy, alongside an emphasis on evidence-led interventions has produced clear reductions in homelessness.

Finland

Finland has reduced homelessness to a functional zero. Homelessness still occurs, as the various trigger factors, ranging from relationship breakdown, domestic violence through to unmet support and treatment needs, cannot be eradicated. However, the homeless population is very small, in both relative and absolute terms. Homelessness is a functional zero in the sense that homelessness is very often either prevented or ended rapidly. In Finland, experience of homelessness is either avoided, or not sustained, in most instances. Historically, extensive welfare, social housing and public health systems made experience of homelessness in Finland relatively low. In the 2000s, it was realised that as much as 45% of the population who were homeless were long-term and recurrently homeless people with high support needs. Homelessness was not being quickly ended for a group of high need individuals for whom existing service provision was apparently not effective[140]. In response,

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[139] USICH (2015) Opening Doors: federal strategic plan to prevent and end homelessness 2015 Washington DC: USICH, p.7.

[140] Tainio, H. and Fredriksson, P. (2009). The Finnish homelessness strategy: from a 'staircase' model to a 'housing First' approach to tackling long-term homelessness. *European Journal of Homelessness*, 3, 181-199.

a series of strategic plans were produced, targeted on long-term and recurrent homelessness. The Finnish strategy can be summarised as follows[141]:

- A sustained effort to develop political consensus to support the strategy, led by the Ministry of Environment and Y Foundation, the latter organisation being responsible for a high proportion of social housing development in Finland. Building relationships across government, with the homelessness sector and asking municipalities (local authorities) to sign letters of intent, that bound them to supporting the strategy, were important in generating a shared direction among partner organisations and in delivering on the intent to end long-term homelessness.

- Creation of a dedicated budget to support the strategy.

- Using phased approach, with successive strategies seeking to achieve clearly defined and simple goals. Paavo I (2008-2011) sought to halve long-term homelessness by 2011. Paavo II (2011-2015) sought to eliminate long-term homelessness by 2015. Paavo I concentrated mainly on long-term homelessness, drawing heavily on Housing First and related service models. Paavo II also included further development of preventative services, coordination of access to social housing and the development of lower intensity homelessness services.

- Annual monitoring of outcomes, recording how homelessness was changing across every municipality in Finland, this monitoring has recorded[142]:

  o By 2014, 362 people were living on the streets, in emergency shelters and in transitional housing - across Finland as a whole - equivalent to 0.006% of the Finnish population.

  o Finland brought down the numbers of people experiencing long-term homelessness by 26% between 2008 and 2014. The proportion of the homeless population who were long-term homeless people was reduced from 45% in 2008 to 29% in 2014.

  o Total homelessness fell, at a lower rate than long-term homelessness. In 2014, Finland was the only European country to report a fall in absolute levels of homelessness[143].

  o Approximately 2,500 new housing units had been constructed or acquired for the homeless, and approximately 350 new professionals in housing social work had been hired to work on homelessness prevention, as at 2015[144].

[141] Pleace, N., Culhane, D.P., Granfelt, R. and Knutagård, M. (2015). *The Finnish Homelessness Strategy: An International Review*. Helsinki: Ministry of the Environment.

[142] Housing market survey prepared by ARA, the Housing Finance and Development Centre of Finland, on the basis of data regarding homelessness in the year 2014 http://www.ara.fi/en-US

[143] Busch-Geertsema, V.; Benjaminsen, L.; Filipovič Hrast, M. and Pleace, N. (2014) *Extent and Profile of Homelessness in European Member States: A Statistical Update* Brussels: FEANTSA.

Other International strategies

There are other examples of success. Denmark shares several characteristics with Finland and has a level of data collection and integration on the homeless population which means homelessness is monitored and understood more completely than anywhere else in Europe. Again, homelessness is a comparatively small social problem, though Denmark found the same pattern as in Finland, the presence of recurrently and long-term homeless people with high support needs whom existing services did not appear to be working effectively with. As in Finland, strategic responses targeted that population with Housing First and related service models, including Critical Time Intervention (CTI). As in Finland, Denmark has been able to reduce homelessness to a functional zero[145].

In both Canada and France, major experimental evaluations (randomised control trials) of Housing First have been completed and been found to deliver markedly more effective responses to long-term homelessness associated with mental health problems. Both countries now have National Housing First strategies. Current research evidence indicates that levels of long-term and recurrent homelessness in Canada and France will fall significantly[146].

In some European countries, homelessness strategies are either less effective, or have not yet been introduced. There are examples of local and regional reductions in homelessness, but the kinds of sustained reductions and coordination at national level seen in countries like Denmark, Finland or the USA, are not present. Not every comparable country has a successful homelessness strategy, nor does every comparable country possess a homelessness strategy[147].

England, Scotland and Wales

A comparative discussion, looking at detail at the introduction of prevention in England, Scotland and Wales was included in Chapter 2. Current evidence is, arguably, insufficient to give a definitive answer as to quite how well prevention works[148], yet there is a broad policy consensus that a real reduction in homelessness has been achieved by the shift towards prevention in England and Scotland. Policy and researcher belief in the inherent effectiveness of prevention underpinned the recent changes to the Welsh legislation. The shift to prevention has, in England, Scotland and Wales, brought about rapid downwards

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[144] Pleace, N., Culhane, D.P., Granfelt, R. and Knutagård, M. (2015). *The Finnish Homelessness Strategy: An International Review.* Helsinki: Ministry of the Environment.

[145] Benjaminsen, L., 2013. Policy review up-date: Results from the Housing First based Danish homelessness strategy. *European Journal of Homelessness*, 7(2).

[146] Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu

[147] FEANTSA (2012) *On the Way Home? FEANTSA Monitoring Report on Homelessness and Homeless Policies in Europe* Brussels: FEANTSA.

[148] Pawson, H. (2007) Local authority homelessness prevention in England: empowering consumers or denying rights? *Housing Studies* 22(6), pp. 867-883.

trends in acceptances, a pattern that has not been replicated in Northern Ireland because a preventative focus has only recently emerged[149].

The Homelessness Strategy for Northern Ireland 2012-2017

Prevention

The move towards homelessness prevention has happened faster, with more immediate effects, in England, Scotland and Wales than has been the case for Northern Ireland. It is important to note, as was discussed at the beginning of this chapter, that the *Homelessness Strategy for Northern Ireland 2012-2017* and 2014 reprioritisation deadlines that have not yet been reached. The goal of the Strategy was also to bring prevention to the forefront of service delivery, not to deliver set reductions in acceptances or presentations to the statutory system by a certain point.

A Housing Options led approach is in the process of being rolled out over the course of 2016/17 and appears to be on course to be delivered. There is clear progress towards achieving this goal, which is broadly welcomed by the homelessness sector and other agencies. Nevertheless, the process of introducing prevention appears to have taken significantly more time than was the case in England, Scotland or Wales. The intention to "provide a more strategic approach to prevention of homelessness" was expressed in the preceding homelessness strategy for Northern Ireland[150].

Levels of homelessness, as noted in Chapter 2, appear broadly static in terms of presentations, but there have been recent increases in the number of Full Duty Applicants. The test of the existing Strategy and the imminent replacement Strategy will be if the falls in acceptances, reported in the other statutory systems, start to be replicated in Northern Ireland. Reductions should also be seen, over time, in use of services for single homeless people. Rough sleeping levels appear to be low and should remain so, there should be no escalation and evidence of reductions in long-term and recurrent rough sleeping.

Internationally, there are two key lessons from effective homelessness strategies:

- Targeting of preventative services has met with mixed levels of success[151]. This is because some of the characteristics associated with specific forms of homelessness, such as long-term and recurrent homelessness being associated with mental health problems and drug/alcohol use, can arise before but also *after*

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[149] See Chapter 2 and Fitzpatrick, S. *et al* (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

[150] Northern Ireland Housing Executive (2002) *The Homelessness Strategy* Belfast: Northern Ireland Housing Executive.

[151] Greer, A.L., Shinn, M., Kwon, J. and Zuiderveen, S. (2016) Targeting Services to Individuals Most Likely to Enter Shelter: Evaluating the Efficiency of Homelessness Prevention. *Social Service Review*, 90(1), pp.130-155.

homelessness has occurred. Equally, people with characteristics such as mental health problems, that are associated with homelessness, do not all become homeless.

- Effective homelessness prevention provides a universally accessible service that has the capacity to rapidly triage, referring people with support needs to more intensive services while providing advice and assistance to those who only require a relatively small amount of help[152].

Affordable Housing

As discussed in Chapter 3, Northern Ireland does face pressures in relation to the supply of affordable, adequate housing and some specific issues related to segregation. Northern Ireland is unlikely to be in a position where development of new social housing on any scale is feasible and the private rented sector and owner occupation will remain relatively expensive for lower income groups.

A key lesson from other homelessness strategies is the importance of affordable, adequate housing in delivering homelessness prevention and in reducing homelessness. Interagency coordination can be enhanced, preventative systems put into place and new, innovative models of service delivery developed, but any homelessness strategy ultimately fails or succeeds by whether or not sufficient housing can be found. This is a structural challenge, a housing policy challenge that extends into every dimension of housing need, moving beyond homelessness. The specific concerns about housing supply in relation to the Strategy are:

- Housing that is unaffordable and/or which offers insufficient security of tenure can act as a driver of homelessness in and of itself. As has been noted elsewhere, the associations between the end of private rented sector tenancies and statutory homelessness seen in England has not been replicated in Northern Ireland, but this is in a context in which the welfare reforms have not been fully implemented[153].

- Sustainment of exits from homelessness can be adversely influenced by housing supply problems. Tenancies may not be sustained if the right housing is not available or support services may have to engage at a higher level for a longer period of time to make unsuitable housing work. Finland experimented with congregate models of Housing First, which did not use individual apartments or houses, and while successes were achieved, intensive staffing was necessary[154].

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[152] Pleace, N., Culhane, D.P., Granfelt, R. and Knutagård, M. (2015). *The Finnish Homelessness Strategy: An International Review.* Helsinki: Ministry of the Environment.

[153] See Fitzpatrick, S. *et al* (2016) *The Homelessness Monitor: Northern Ireland 2016* London: Crisis.

[154] Pleace, N.; Knutagård, M.; Culhane, D.P. and Granfelt, R. (2016) 'The Strategic Response to Homelessness in Finland: Exploring Innovation and Coordination within a National Plan to Reduce and Prevent Homelessness' in S.

- Homelessness exists in multiple forms, some of which are associated with income poverty relative to housing costs. In contexts where housing supply is unaffordable to lower income people, including those in paid work, homelessness can increase in part due to economic reasons. American research reports a considerable working homeless population, in full time and part time paid work, who cannot afford housing[155].

Maximising affordable housing supply will in practice mean working to ensure minimum standards, affordability and security of tenure with private landlords and other agencies prepared to help meet wider housing need. Cross subsidy arrangements have been used in London, including mixed development sites where full 'market value' housing is sold or rented, to subsidise lower cost home ownership, or social rented housing[156].

Rough Sleeping and Long-Term Homelessness

The extent of rough sleeping in Northern Ireland may be greater than the street count methodology used in Belfast indicates, because there are significant methodological limitations to this approach (see Chapter 4). However, while rough sleeping may be higher, the numbers are not great. The key concerns are:

- To ensure that highly vulnerable individuals are not in situations where a lack of interagency coordination or other logistical problems causes sustained and recurrent experience of rough sleeping. Deaths on the streets have occurred and there has been a sustained effort to improve service responses, but this relates to wider service coordination alongside ensuring existing services for people sleeping rough are in place and properly supported.

- There is clear evidence that Housing First can deliver a sustainable exit from homelessness for a majority of homeless people with high and complex needs. Housing First is a key element within an effective response to long-term homelessness and rough sleeping. The pilot service has recently been evaluated[157]. The international evidence base shows that close fidelity to the core philosophy of Housing First and avoiding 'dilution' of the model, is crucial to effectiveness[158]. Other models, which again are based on evidence-based practice, such as Critical Time

Gaetz (eds) *Exploring Effective Systems Responses to Homelessness* Toronto: Canadian Observatory on Homelessness.

[155] It has been estimated that up to 44% of the US homeless population is in employment (National Coalition for the Homeless, 2009) http://www.nationalhomeless.org/factsheets/employment.html

[156] Bretherton, J. and Pleace, N. (2008) *Residents' views of new forms of high-density affordable living* Coventry: Chartered Institute of Housing.

[157] Boyle, F and Palmer, J with Ahmed, S (2016) *The Efficiency and Effectiveness of the Housing First Support Service piloted by Depaul in Belfast, funded by Supporting People: An SROI evaluation.*

[158] Pleace, N. (2016) *Housing First Guide Europe* Brussels: FEANTSA http://housingfirstguide.eu

Intervention, may also be effective in reducing rough sleeping and long-term homelessness[159].

- With the planned introductions to Housing Benefit in relation to supported housing, which will eligible reduce rents to LHA (Local Housing Allowance) average levels as at 2019/20, the future financial viability of some single-site supported congregate and communal housing is uncertain[160]. Funding constraints may also be important in terms of meeting the capital costs of new single-site supported housing. This change to financing, combined with the evidence pointing in favour of floating support services, may need to result in changes to how rough sleeping is responded to in Northern Ireland, in the medium term. However, the need for emergency accommodation and for highly supportive housing needs to be recognised, Housing First and housing-led services are a key element within, but not the sole component of, an effective homelessness strategy[161].

Improving Services for Vulnerable Homeless People

The points raised in relation to rough sleeping and long-term homelessness also apply in respect of improving services for vulnerable homeless people. Here, the key concerns are as follows:

- Clearly, the development of Regional Forums, the Common Assessment Framework and the Common Access Point, within the context of the strategic shift towards a Housing Options model is a major step forward in enhancing services for vulnerable homeless people. The direction of travel towards enhanced interagency working to prevent and reduce homelessness is clear and while the process is not complete, the positive intent behind the design and delivery of the Strategy is evident.

- At present, there is evidence that interagency coordination is not always at the level required to deliver an effective response for all homeless people with support needs. This applies to both the prevention and reduction of homelessness. Core components of what should be packages of care are not always in place. It is important to note that while roll-out of the Housing Options approach is not yet complete, positive results from the Housing Solutions and Support Teams were being reported.

- The international evidence highlights the importance of using evidence-led policies and service models to ensure the needs of vulnerable homeless people and

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[159] Benjaminsen, L., 2013. Policy review up-date: Results from the Housing First based Danish homelessness strategy. *European Journal of Homelessness*, 7(2).

[160] http://researchbriefings.parliament.uk/ResearchBriefing/Summary/SN06080

[161] Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness *European Journal of Homelessness* 7.2, 21-41.

potentially homeless people are met. As noted in relation to rough sleeping, it is important that these services have fidelity to the principles and operational characteristics that made them effective, i.e. they are not 'watered down' to reduce expenditure. The wider points about the relative effectiveness and financial viability of congregate and communal single site supported housing also need to be considered here. Again, it is important to note that emergency accommodation and some forms of supported housing are required in a homelessness strategy, an entirely 'housing-led'/Housing First based strategy is unlikely to be viable[162].

The 38 Actions and the Reprioritisation

While the four core objectives for the Strategy and the wider goals for 2020 are clear, the position in relation to the 38 Actions is more mixed. The relationships between the Actions and the wider strategy was variable, while some of the Actions and the key goals identified for the re-prioritisation were specifically relatable to wider targets, the scope and extent of Actions could be variable. Some Actions related to following policy established prior to the Strategy, some were very specific, while others effectively called for strategic and systemic change. The level of strategic importance attached to different Actions was also not consistent. There were, in contrast to the very simple and direct set of goals set by successful strategies in Finland or the US, a large number of Actions.

The Actions and the key priorities established by the reprioritisation in 2014 were interdependent, with the successful delivery of many being linked to the successful roll-out of the Housing Options led element of the Strategy. Several were linked to the Common Assessment Framework and Central Access Point. There is clear progress towards a preventative framework and experimentation with the evidenced-based Housing First model, with progress in relation to the 38 Actions and the key aims of the reprioritisation being interlinked with the speed and success with which these changes have been implemented.

Many changes are on the horizon, ranging from Brexit to the welfare reforms, which will influence how the Strategy can be implemented. Preparing for these changes will be a key challenge for the next Strategy.

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[162] Ibid.

Recommendations

The next Homelessness Strategy was being developed through a consultative process as this evaluation report was being assembled. Some recommendations stem from the lessons learned from the current Strategy, both in terms of successes and limitations, others relate to experience with other successful homelessness strategies.

- The direction of travel, towards enhanced homelessness prevention and the further development of coordinated service responses and use of evidence-based service models should be viewed very positively. The goals of the *Homelessness Strategy for Northern Ireland 2012-2017* are supported by the results of the approaches to homelessness used in Wales, Scotland and England and by the international evidence.

- The Actions and Key Priorities, within a broader framework of objectives and a strategic plan to end rough sleeping and long-term homelessness by 2020, are more complex than those found in other successful homelessness strategies. Some of this is because goals are broken down into several components, i.e. many of the 38 Actions should be delivered as a Housing Options led approach is rolled out across Northern Ireland. Simpler and more specific targets, which might include the following sorts of specific outcomes, should be considered to give the next Strategy a clearer focus:

  - Reducing homelessness acceptances by a set percentage, which might be established by looking at the reductions achieved in Wales, Scotland and England.

  - Evidence of reductions in single homelessness due to prevention. Again, targets can be set in relation to the use of services, both in terms of the statutory system and in terms of services for single homeless people.

  - Evidence that rough sleeping, particularly long-term and recurrent rough sleeping and also long-term homelessness is being reduced.

  - Continual, shared, data collection to monitor service activity and outcomes, employing unique identifiers (to be processed within Data Protection laws) to allow monitoring of levels of long-term and recurrent homelessness and, with consent, the use of data to identify individuals who may require specific support services. Examples of systems include CHAIN in London[163], the Pathway Accommodation and Support System (PASS) in the Republic of

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[163] http://www.mungos.org/chain

Ireland[164] and the Danish surveys and administrative data collection from homelessness services[165].

   o Data collection on the extent of concealed and hidden homelessness. This might, for example, be conducted in cooperation with housing advice services. Gender, youth and family homelessness are specific concerns here. Once the extent can be more carefully estimated, goals can be set in relation to reducing hidden homelessness.

- Successful strategies in other contexts have had a clear leadership structure and placed considerable emphasis on interagency working. In the US, there is a dedicated structure involving all of Federal Government, in Finland, municipalities and service providers were asked to sign up to the strategies, creating a baseline of consent and minimum guarantees in working towards a shared goal. Establishing a single body with responsibility and sufficient authority for the implementation of the next Strategy may be beneficial[166]. Consultation and joint working with the homelessness sector is essential to this process.

- There has been clear progress since the 2014 Reprioritisation and during 2016, as the Housing Options has begun to be rolled out. Northern Ireland has, however, not introduced homelessness prevention at the same rates, or as yet with the same impacts, as have been achieved in England, Scotland and Wales. Ensuring momentum is important to building and maintaining a broad political consensus, i.e. there should be clear goals which are clearly timetabled. The importance of not over-complicating the next Strategy with multiple, interrelated targets and what are effectively sub-targets is, again, important to note.

- Change can seem threatening. As prevention becomes more widespread and the use of Housing First and other service models begins to take place, some existing services may come under pressure, in terms of changes to demand. Wider changes, specifically the welfare reforms and Brexit, may reduce spending on homelessness services, which combined with the introduction of new approaches, again Housing First is an example, may reduce or change the nature of funding for existing homelessness services. Working collaboratively towards new ways of preventing and reducing homelessness, bringing the homelessness sector fully on board, was crucial to success in Finland. Ultimately, effective delivery of a new homelessness strategy must be a collaborative and collective effort.

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[164] http://www.homelessdublin.ie/pass

[165] Benjaminsen, L. (2015) Homelessness in a Scandinavian welfare state: The risk of shelter use in the Danish adult population *Urban Studies*, DOI: 0042098015587818.

[166] This was also suggested by several respondents.

Appendix 1   : Progress towards the 38 Actions

Action number	Action summary	Progress (November 2016)
1	Collect and analyse data for all ETHOS homelessness categories	Completed
2	Measure the extent of hidden homelessness by 2012/13	Partially completed
3	Prevent repeat homelessness through multi-agency intervention	Completed
4	Produce a framework to provide holistic assessment	In progress
5	Provide a comprehensive housing and homelessness advice service	Completed
6	Provide pre-release housing advice to all prisoners	Completed
7	Enhance partnership working for young people leaving justice system	Completed
8	Introduce Tenancy Support Assessments	Completed
9	Develop peer support networks for NIHE tenants	Completed
10	Develop referral to floating support for vulnerable individuals in the PRS	Completed
11	Examine family mediation/intervention programmes	Completed
12	Enable homeless people to move on from temporary accommodation	In progress
13	Review temporary accommodation	Incomplete
14	Examine the Housing-Led Model (Housing First)	Completed
15	Reduce the average time in temporary accommodation to 40 weeks	Completed
16	Examine how welfare reform impacts on homelessness	Completed
17	Introduce a Private Rented Sector Access Scheme	Completed
18	Evaluate services/data sharing for alcohol addiction (rough sleepers)	Partially completed
19	Agree service changes for effective interventions (rough sleepers)	In progress
20	Consider a Housing-Led Model (rough sleepers)	Completed
21	Produce a new Belfast Rough Sleepers Strategy	Completed
22	Develop a mechanism for referral to addiction services (rough sleepers)	In progress
23	Continue to support the Domestic Violence Helpline	Completed

24	Support the MARAC process	Completed
25	Roll out the Sanctuary Scheme (domestic violence)	Completed
26	Review refuge provision (domestic violence)	Completed
27	Multi-agency contributions to sexual/violent offender release	Completed
28	Case management for sexual/violent offenders	Completed
29	Develop appropriate accommodation for high risk offenders	Completed
30	Assess the need for bespoke women offender accommodation	Completed
31	Assist the PBNI in the implementation of accommodation strategy	Completed
32	Identify the specific service needs of homeless BME groups	Completed
33	Produce Homeless Action Plans for rural communities	Completed
34	Measure the extent of rural homelessness	Completed
35	Relevant agencies to collaborate on youth homelessness	Completed
36	Review prevention programmes in respect of youth homelessness	Completed
37	Review existing joint working for young homeless people	Completed
38	Promote clear and flexible pathways to independence for young people	Completed