THE VISIBLE AND HIDDEN DIMENSIONS OF LONDON’S HOMELESSNESS
A BLACK, ASIAN AND MINORITY ETHNIC ACCOUNT

Addressing the Gaps in Service Provision, Policy and Practice

Race On The Agenda, 2007
Thanks are due to all the paid and volunteer staff at ROTA for their contribution to this publication and the two year research project that led to its development.

The authors would also like to thank Off the Streets And Into Work (OSW), in particular Linda Butcher, for having the idea of setting up the Tackling Multiple Disadvantage (TMD) London Project and prioritising race as an issue from the start, and Carole Coulon. Many thanks also go to the other partnership organisations on TMD; the organisations from the homeless and BAME sectors who gave us invaluable information; Maddy Hill from the Greater London Authority; EQUAL for the funding; and Simon Kane for the cover photograph and help with design.

We would also like to express our gratitude to the homeless individuals who participated in the research from the beginning. Sharing your time, knowledge and experience with us made this report possible - Thank you.

November 2007
MESSAGE FROM THE MAYOR OF LONDON

“London is one of the most vibrant, dynamic and multicultural cities in the world, and this diversity is essential to its prosperity. However, the city is also divided between extremes of wealth and poverty, and poor housing and homelessness hits London's Black, Asian and minority ethnic (BAME) communities disproportionately hard.

I am pleased to support ROTA's conference and the launch of its report which has sought to build on the knowledge we have of homelessness amongst London's BAME communities, in particular the issues and barriers they may face in accessing the capital's homelessness and other support services.

Through my Housing Strategy I want to tackle homelessness and overcrowding in the capital and see more appropriate housing-related support services being developed and maintained. I'm sure that ROTA's report will help contribute to the development of responsive and sensitive services that will meet the challenges of homelessness as experienced by London's BAME communities”.

Ken Livingstone, Mayor of London

November 2007
Homelessness is a reality not just for individuals from Black, Asian and minority ethnic (BAME) groups, but indeed for everyone. This is reflected in the increasing numbers of homeless people. In England, an estimated 1,180 sleep rough every day, out of which an estimated 600 are in London, one of the three most important city-players on the global economic stage.

Like all social failures, homelessness tends to hit those who are already disadvantaged, marginalised or vulnerable. In London, over fifty per cent of homeless people come from BAME groups, while more than half experience multiple disadvantages such as being disabled, having a mental health problem, or being drug or alcohol users.

ROTA’s project aims to tackle the persistent inequalities and failures in the provision of services to homeless BAME individuals as well as shed light on the subtle, but yet important, dimensions of homelessness. Through evidence-based recommendations, best practice examples, the production of a film, a toolkit and a directory, ROTA hopes that this project proves useful to local, regional, national and international stakeholders.

Managing this project has been an eye opening experience. It illustrated the significance of partnership working, the consistent failures to protect those who are most vulnerable in our society, but more importantly it brought evidence of the difference we can make by ensuring that homeless peoples’ voices are heard. By involving, respecting and including homeless people in decision-making, policies and practices become more evidence-based and real.

Dr. Theo Gavrielides, Head of Policy, ROTA

November 2007
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EXECUTIVE SUMMARY

ROTA is a social policy think-tank that has been active since 1986. ROTA works with London’s BAME communities towards achieving social justice by the elimination of discrimination and promotion of human rights, diversity and equality of opportunity. ROTA achieves these aims by informing London's strategic decision-makers about the issues affecting the BAME voluntary and community sector (VCS) and the communities it serves and by making government policy more accessible to London’s BAME organisations.

This report presents the findings of a two year project that aimed to collect new evidence on the service provision to Black, Asian and Minority Ethnic (BAME) homeless individuals in London. Through original fieldwork, desk research, events and meetings with stakeholders, the project looked at existing gaps and put forward recommendations on how to address them. The project was funded by Equal and was carried out by ROTA as part of the London Tackling Multiple Disadvantage (TMD) Partnership.

Linking BAME and Mainstream homeless organisations: The project illustrates that there is considerable scope for further development of partnerships between BAME groups and the homeless sector; support exists for this from within the sectors themselves. Responses from surveyed organisations reveal that they wish to link up on the areas of awareness raising, information, referrals and service provision. BAME organisations that worked with mainly non-homeless individuals stated that they would like to be able to access more information on the needs of homeless individuals and services available in the mainstream. Mainstream organisations were keen to find out what services the BAME sector offered and whether referrals were possible for BAME clients with particular vulnerabilities such as alcohol use. It was noted however, that where mainstream homelessness agencies were taking most of their referrals from Local Authorities through Supporting People arrangements, they were restricted in setting up referral links with BAME organisations.

Diversity: The BAME homeless are not homogenous and this research shows that issues for differing nationalities and also BAME people who are also refugees, from Traveller and Gypsy communities, and/or women, for example need to be recognised. BAME women face discrimination on grounds of race but also their gender, including from men within their own communities. The situation for refugee women fleeing domestic violence is particularly difficult where they have no recourse to public funds. An understanding of this diversity and a nuanced approach is therefore appropriate in order to provide suitable services. As an example, based on current evidence, a high proportion of older ex-homeless people of Irish origin have become institutionalised in hostels and need support.

Individualised Homeless Services that are compatible with human rights standards: Research with people using services and with providers from both the mainstream and BAME sectors suggests that there is a need for both provision based on peoples’ homelessness status and their race. African, Caribbean, Gypsy and

1 ROTA uses the term BAME to refer to all groups who are discriminated against on the grounds of their race, culture, colour, nationality or religious practice. This definition includes but is not exclusive to those people of African, Asian, Caribbean, Irish, Jewish, Roma and South East Asian decent.
Traveller cultures are areas of particular concern noted in this report. Human rights principles such as dignity, respect and equality were considered to be key standards for service provision which would impact on delivery to everyone, including all these communities and new arrivals.

Hidden Homeless: Homeless people are not only those who sleep rough, but also those who have spent time staying in overcrowded conditions with friends or relatives. Overcrowding can also have severe consequences in terms of mental and physical health outcomes that make it harder for those in the situation to gain appropriate accommodation and employment. Although our fieldwork found that the group of homeless individuals interviewed for ROTA’s work were not hidden homeless, (partly due to the way we advertised for interviewees), our desk research indicated that BAME homeless individuals are more likely to be living in overcrowded accommodation and may be missed in statistics, as well as the design and delivery of services.

Gaps in Mainstream Homeless Services: The research participants described their experiences of mainstream provision as both good and bad. Many of the African and African-Caribbean male research participants described a poor relationship between themselves and the frontline staff in homelessness organisations, reporting that staff stereotyped them as aggressive. It was noted that as in other areas of employment, few senior members of staff were from BAME backgrounds.

Gaps in BAME Services: In terms of specialist BAME agencies, only three of the sixteen homeless research participants had accessed BAME VCS organisations working with the homeless. The majority had not known that these services existed, but felt that such organisations would make a difference to their situation. One of the points raised by BAME organisations is that of the historic and continued under resourcing of the BAME VCS which prevents it delivering in the way it would wish to.

Service user involvement: The need to involve homeless individuals was a key tenet of the broader Equal TMD project that this research is linked to. The good practice examples described in this document show how this has both helped improve key services for the homeless, and has empowered many to take more initiative to improve their own circumstances. ROTA’s project illustrates that service users can also influence policy relating to service delivery in order to make it more appropriate.

Influencing policy: London’s governance is complicated. There are European, national, regional and local bodies that produce policies, initiatives and services that impact on London’s BAME homeless individuals. Future research and work to engage with policy makers will need to take into account the findings of this report. Everyone will need to work to ensure that initiatives such as the Mayor’s Housing Strategy and Supporting People are aware of and supportive of the needs of all.

Key Recommendations

1. Developing Partnerships:

   i) The need and desire for BAME and mainstream organisations working with BAME homeless individuals to work in closer partnership can be partly supported by this project’s work. ROTA’s toolkit (Annex II), best practice examples (Annex I), film and directory of organisations (Annex V) can help with the initial development of such partnerships.
ii) There also needs to be support to allow equitable partnerships to develop allowing full engagement of the usually much smaller BAME organisations.

iii) What could complement ROTA’s work is a pan-London network that could act as a broker between BAME and mainstream homeless organisations. The network should help ensure that the directory is accessible and kept up to date; encourage the partnership working and increase awareness of services among clients. It could also continue development work with the Federation of Black Housing Associations to raise awareness of BAME homeless agencies and related groups.

2. Diversity and mobility of BAME homelessness:

i) The BAME homeless constitute a very mobile group. A particular community (e.g. people from Eritrea or Sri Lanka) may be highly represented in the homelessness population within a particular area, but this may not be the case in a neighbouring borough. Moreover, as newer communities arrive, BAME individuals who may be considered as highly represented in homelessness numbers may cease to be so within short periods of time. Therefore, there needs to be an acknowledgement of the significance of locality and the provision of support to organisations working at the neighbourhood level.

Further examples of groups with specific needs within the broader BAME category include:

ii) **Refugee and Asylum Seekers (RAS) and Migrants**: While this report did not have a remit to cover specific issues relating to RAS communities, London’s RAS and Migrant communities are a key component of the broader make-up of London’s BAME community. It is important that mainstream and specialist initiatives take into account their needs and link them to the Mayor’s Strategy on Refugee Integration currently being developed, specifically its proposals on housing.

iii) **Gypsies and Travellers**: Gypsies and Travellers face particular discrimination in terms of housing provision and have specific needs. Specialist Gypsy and Traveller organisations should be supported to carry out work with the statutory sector in regard to issues such as the provision of better facilities; more affordable electricity and heating, and assistance in the repair of caravans.

iv) **Irish Homeless**: As noted, a high proportion of older hostel residents of Irish origin have become institutionalised. Permanent housing schemes are therefore needed which provide continuing support. There is also a role for specialist provision, for those living in poor conditions in the private rented sector. This might include befriending schemes drawing on Irish volunteers.

v) The research also suggests a lack of London-wide or borough data on Irish Travellers and ex-offenders. Data collection and further research on the special needs of these groups is recommended.

vi) **Women**: Service provision for BAME homeless women must be highly specialised and well-orchestrated to prevent them falling between the gaps. Outreach, advice and support should be provided, particularly in terms of domestic violence and refugee women. This should recognise that female
counsellors from their own community may be best placed to meet the need and that refuge places are essential.

3. **Ethnic monitoring and evaluation:**

i) Mainstream VCS and statutory organisations need to monitor the outcomes of their services in terms of race and nationality. Monitoring followed by evaluation allows the development of services to meet identified needs and gaps in provision. Where a public authority is involved, this recommendation should be linked with their statutory obligation under the Race Relations (Amendment) Act.

ii) Organisations should consider using as broad a range of categories as possible so as to understand the true diversity of the BAME groups in London they are serving and how their services impact on users. Irish people, for example are often categorised under the ‘White’ and their specific issues can go unnoticed.

iii) Internal processes should also be monitored to ensure staff throughout an organisation’s structure, reflect London’s population and the clients it serves.

4. **Accessible advice:** Information on housing, education, health and employment needs to be made available in accessible formats in non-discriminatory ways. This will include using trained staff and specialist BAME organisations that understand the issues; email briefings and bulletins; BAME media and networking. Information may need to be available in a variety of community languages, or translation and interpretation services made available for those both literate and unable to read. A recent response by ROTA to the consultation on the Mayor’s Health Inequality Strategy stated that advocacy (even more so that translation or interpretation services) allowed people to help shape as well as obtain public services².

5. **Cultural sensitivity and human rights training:** To ensure the needs of all BAME homeless individuals are met, cultural and human rights training for staff in both mainstream and statutory services is needed. The new Equality and Human Rights Commission should work with public service providers that have a role in addressing homelessness and unemployment to encourage such training. This recommendation should be linked with the annual audits carried out by the existing regulators and commissioners such as the Audit Commission, the Healthcare Commission and the Commission for Social Care Inspection.

6. **Hidden homelessness:** All those working to develop and provide services need to take into account that BAME homeless individuals are more likely to be ‘hidden homeless’ rather than ‘street homeless’ and ensure their needs are reflected in the work.

7. **Outreach work:** BAME organisations need to engage in more outreach to ensure that BAME homeless individuals are aware of the support they can provide. This will need to be properly resourced to be effective.

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² Gavrielides, T., Developing the Mayor’s Health Inequality Strategy for London, (ROTA, November 2007).
8. **Homelessness Training**: Targeted information and training for BAME organisations on the needs of homeless individuals and services available in the mainstream homelessness and statutory sectors is critical to developing effective referral networks.

9. **Funding**: BAME organisations need information on and access to funding in the homelessness sector in order to engage more fully in providing services directly and for partnership working.

10. **Combining housing, training and employment initiatives**: A holistic approach to training, employment and housing would enable more homeless BAME individuals to tackle the discrimination they face in all these areas and succeed in maintaining a home and job in the longer term. For instance, as money is being spent on housing estates and neighbourhoods to meet the Decent Homes Standard, it is hoped that this spending will be broadened to support the creation of local jobs, community-owned businesses, and increase the skills base of local people. Access to new jobs and capacity building for local tenant groups are a part of one such initiative called ‘added value’ and ‘housing plus’. It is essential that BAME homeless individuals are empowered to get involved in such initiatives.

11. **Volunteering**: The critical role volunteering can play not just as a route to employment opportunities, but in building self-esteem for individuals, should be raised and more widely promoted as an option for homeless people. Linking homelessness agencies with volunteering brokerage agencies would ensure greater access to voluntary work for BAME homeless people, who may wish to volunteer within the BAME communities.

12. **Improving health**:

   i) The particular mental and physical health needs of BAME homeless individuals need to be addressed in service provision. The effective promotion of equality policies within the health services sector is critical to combating discriminatory procedures and assessments, particularly with regard to the treatment of homeless BAME individuals.

   ii) As ROTA noted in its recent response to the consultation, the Mayor’s Health Inequality Strategy, currently in development, provides a unique opportunity to tackle this persistent inequality affecting one of the most vulnerable groups in London.

13. **Service user Involvement**: It is imperative that all homelessness work - frontline delivery, service planning and policy design has the involvement of homeless and ex-homeless BAME individuals to ensure their needs and aspirations are being met.

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4 Simmonds, D., ‘*Getting Jobs*’, p. 87-88.

5 Simmonds, D., ‘*Getting Jobs*’, p. 87-88.

6 Gavrielides, T., ‘Developing the Mayor’s Health Inequality Strategy’.
INTRODUCTION

London is one of the most diverse, multicultural, multilingual and multifaith cities in the world. The unique demographics of London make its economy distinct, extremely dynamic, creative, culturally inspiring and commercially successful. London is a key player on the global economic stage with its only rivals being Tokyo and New York. However, for many Londoners, the capital is a home without a home.

Homelessness is a reality and a problem for both the individual involved but also for the community as a whole. It tends to hit individuals who are already vulnerable or who are being excluded or discriminated against by the ‘Welfare state’. It is not often that homelessness is put in the context of inequality, while it is easy for the media, politicians and to some extent for all of us to point the finger of blame rather than raise the mirror of responsibility.

Admittedly, over the last ten years there have been some good studies on homelessness, while a number of organisations now exist to tackle the matter both at the frontline but also as a policy and awareness issue. Neither this report nor ROTA claims to have this expertise. On the contrary, our starting point is a different one. As an equality policy organisation with expertise in tackling issues affecting BAME communities in London our interest in homelessness can be summarised in four words: London – BAME – Policy – Inequality. In other words, what can be done in terms of policy and practices to help address the causes that lead to homelessness for London’s BAME communities (such as inequality, bad practice, discrimination and misinformation)?

The 2003 Mid Year Estimates (MYE) showed that out of the 7,387,900 people living in London, at least 3 million belong to BAME groups. It is estimated that over the next ten years BAME communities will account for 80% of the increase in London’s working age population. There is evidence to suggest that BAME communities are disproportionately represented among the homeless population. This should not come as a surprise since issues of poverty, deprivation, social exclusion and inequalities are social problems faced by a number of BAME people.

Between April and June 2007, in England 75% of households accepted as homeless were from households classified as White British, and 20% from a BAME group (even though nationally BAME groups account for around 8% of the population). Therefore, BAME people are around three times more likely to experience homelessness than their White British counterparts.

In London, data collected by Local Authorities on homeless people show that over 50% of the capital’s homeless are non-white. The disparity between London and
national statistics on the ethnic origin of homeless people, (between April and June 07, London had the highest percentage of homeless acceptances from Black, Asian and ‘Other’ BAME groups across all the English regions\(^\text{11}\)), partly reflects London’s BAME refugee population. London will remain the centre of ever-growing BAME housing issues. Therefore, BAME homelessness is a key policy concern that affects all Londoners.

At the same time, homelessness as a policy issue is not a straightforward one. It was not until 1991 that the first comprehensive survey on homeless people was carried out\(^\text{12}\). Previously, there were no reliable statistics of the number of people sleeping rough in London or nationally. In May 2000, a street count held on one night found 436 people sleeping rough in ten inner London boroughs; about a hundred more slept elsewhere in London, while an estimated 1,180 sleep rough in England each night\(^\text{13}\).

However, homeless is not just the person who sleeps rough but also anyone who relies on service providers to provide her or him with accommodation and who would otherwise sleep rough. Until recently, the latter category was often missed in policy making. It is important that future policies, legislation and practice do not lose sight of this hidden dimension of homelessness. This is particularly true for homeless people from BAME communities as there is evidence that there are larger numbers relying on friends or relatives to keep a roof over the head in overcrowded conditions rather than street homeless; or even to suggest that some will hide their homelessness because of the shame they feel in finding themselves homeless.

ROTA’s project was one part of the work of a cross-sectoral Equal Development Partnership (DP) to address the Theme of ‘Employability: facilitating access and return to the labour market for disadvantaged people’. The ‘Tackling Multiple Disadvantage in London by Improving Employability’ programme targeted individuals who were homeless, at risk of homelessness or resettled in temporary accommodation. London is a city with current and projected skills shortages. However, there is less incentive for those on benefits to work than anywhere else in the country, and mainstream measures have had the least impact in the city. The Equal DP found innovative and individual solutions that empowered individuals to make informed choices, and test routes out of inactivity and worklessness.

Under this programme, the Equal DP set up the strand overseen by ROTA to look specifically at the links between BAME organisations and mainstream homelessness provision in providing support to homeless BAME individuals wishing to enter or return to the labour market.

Over recent decades, there has been legislation to tackle homelessness, including the Housing Act 1985 and the Homelessness Act 2002. However, persistent problems of provision and inequality remain and BAME homelessness has not been perceived as a separate issue. In fact, there is a dearth of work on BAME homelessness particularly its extent, causes, impact and possible solutions.

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\(^{11}\) ‘Statutory Homelessness: Second Quarter Statistics 2007’.


\(^{13}\) St Mungo’s, Homelessness Fact Sheet, http://www.mungos.org/facts/demo.html [accessed 22 Oct 2007].
As the Mayor of London is having two new strategies on housing and health inequalities prepared, this report is produced to provide new data and evidence-based recommendations that could help address BAME homelessness. Throughout the study, a number of principles were applied:

- The findings presented and the recommendations put forward are evidence-based, not arbitrary. Rigorous methodologies were applied both for the desk research part of the study and the fieldwork.

- Service user empowerment and participation was paramount in helping us understand in detail the grey and not so grey areas of BAME homeless.

- Homelessness was not examined as an isolated phenomenon but as a social problem that is often caused by inequality and exclusion.

- Homelessness is not a single dimensional phenomenon. As the world of equalities moves to a new area where the six equality strands (race, disability, sexual orientation, gender, religion / belief and age) merge, it was important to examine BAME homelessness as an issue of multiple disadvantage. BAME homeless people may also be disabled, or gay or young/older. The issue of BAME homelessness and gender was specifically examined.

- Finally, the project was successfully completed due to its strong partnership arrangements. As we lack the homelessness expertise, we often had to rely on our TMD and other partners to help us deliver the work. More importantly, this work from its inception was proposed to forge better partnership arrangements that we believe could benefit BAME homeless people. This refers not only to organisations providing direct services to them (mainstream and BAME organisation), but also policy makers and homeless people, statutory organisations, the VCS, and wider society.
Phase 1: Scoping Exercise and Desk research

The project started with a scoping exercise that was commissioned from Research as Evidence and was completed in April 2005. It involved interviews with BAME and mainstream homeless organisations as well as desk research. The findings illustrated that there is considerable scope for partnership development between the BAME and Homeless sectors, and that there is considerable support for this from within the sectors themselves. The report is available from ROTA’s website14.

Subsequently, detailed desk research was commissioned from Independent Academic Research Studies (IARS) to examine the policy and legislative context in which the project and its findings should be placed, as well as prepare the fieldwork. In addition to a detailed literature review this study combined fieldwork analysis with interviews with BAME and homeless organisations. The report was made available in March 2007 and can be downloaded for free from ROTA’s website15.

Phase 2: Fieldwork

During Phase 2 of the project we carried out fieldwork with:

- BAME homeless individuals
- BAME organisations
- Mainstream homeless organisations

To this end, we employed four qualitative methodologies (interviews, focus groups, questionnaires and a tracking study). The six month longitudinal tracking study involved monthly follow-up phone interviews with BAME homeless individuals. This helped us to map their experience of using homeless services to provide routes into education, training or employment. Table 1 provides a detailed account of the methodologies used during Phase 2 and the sample groups that were involved.

Fieldwork with BAME homeless individuals

The broad aims of the research with BAME homeless individuals was to discover barriers to homeless services and other support services, their needs and the effect of individual’s ethnicity on their situation.

The first challenge of the fieldwork was accessing BAME homeless individuals. A flier was produced and circulated at homeless agencies promoting the research project

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and inviting individuals to become participants. Questionnaires and interviews took place at ROTA’s offices. An incentive payment was provided and travel expenses covered. Due to the fragile economic situation of many research participants, particularly those sleeping rough, the incentive payment was a significant factor in encouraging individuals to take part in the research. The vast majority of individuals kept their appointment to take a questionnaire at ROTA’s offices.

### Table 1: Research Methodology and Sample Groups for Phase 2

<table>
<thead>
<tr>
<th>Research Method</th>
<th>Sample Group</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face-to-face interviews</td>
<td>16 BAME homeless individuals</td>
<td>N/A</td>
</tr>
<tr>
<td>Focus groups (x3)</td>
<td>21 BAME homeless individuals</td>
<td>N/A</td>
</tr>
<tr>
<td>Tracking study/observation (mentoring and support)</td>
<td>16 BAME homeless individuals</td>
<td>6 months</td>
</tr>
<tr>
<td>Telephone interviews and questionnaires</td>
<td>29 BAME organisations</td>
<td>N/A</td>
</tr>
<tr>
<td>Telephone interviews and questionnaires</td>
<td>59 Mainstream homeless organisations</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Strict quota sampling along the lines of gender and ethnic group was not easy since many clients were highly mobile and three potential clients were unable to join the sample group as we did not have new contact details for them. More importantly, in terms of self-selection some groups were more likely to volunteer than others. This perhaps reflects the composition of client groups in the homeless agencies we were able to access as part of our sampling frame. The proportion of Black British men of African and African-Caribbean heritage in the sample is relatively high. However, this group revealed that race and gender had a much more significant impact on their use of and access to services than participants from other groups. They, therefore, provide valuable evidence on the comparative effect of individual’s ethnic background on their homeless situation. However, the sampling technique was not entirely self-selective and the research team made efforts to counter bias in the sample by boosting participants from underrepresented groups and restricting those who were overrepresented in the sample. Participants defined their own ethnicity but the final sample covers, African, African-Caribbean, Asian, European and Irish BAME communities; residing in hostels, supported housing, living with friends and family and sleeping rough in London. A more detailed breakdown can be found in Annex III.

The discussion guide for the interviews was suited to collecting demographics and factual information. Open-ended questions were included to record participants’ experiences and opinions. Many research participants wrote concise responses to open questions or left these sections blank. This can perhaps be attributed to confidence around writing skills and/or interviewee fatigue. However, the research team was able to collect much fuller responses by offering the opportunity to talk
through the responses and record the details. In addition, interviewers were able to ask further questions when responses were ambiguous or unclear.\(^\text{16}\)

During the next stage of fieldwork, research participants were invited to take part in focus groups. Only a small number of individuals were unable to participate, when contact was lost as individual’s circumstances changed and they moved into new accommodation or sought opportunities in other parts of the country. The most mobile section of the sample were rough sleepers. The research team sought to counter the effect of respondent drop-out by ensuring that the data collected from in-depth interviews was as comprehensive as possible.

The themes and questions for the focus groups were informed by the questionnaire and interviews. Since there is relatively little research on the experiences of BAME homeless individuals, the research team felt that participants might reveal themes and findings which the research team had not anticipated. The placement of the focus groups after the questionnaire and interviews made it possible to incorporate these. The purpose of the group sessions was to expand on and contextualise findings from the first stage. One methodological challenge of focus groups is the potential for more confident and articulate participants to dominate the discussions and other quieter individuals to be sidelined. This mix of personalities was evident in our focus groups; in particular one individual sleeping rough was suffering from depression and gave subdued responses. This was addressed by hiring an experienced group moderator who was able to gather responses from all attendees and elicit additional data from participants who gave brief responses.

The research team found that focus groups were an ideal forum for establishing whether findings from interviews with individuals could be generalised to a wider audience. For example, a few African and African-Caribbean men reported that they were or had experienced stereotyping from frontline staff at mainstream homeless organisations. When this issue was highlighted in the focus groups, the other African and African-Caribbean men confirmed the experience.

To conclude, a multiple methods approach to the research appeared to have been effective in gaining good quality data. The questionnaires were best suited to demographic information. Face-to-face interviews were an ideal means for gaining information of a sensitive nature and eliciting data from individuals who were more reticent in group settings. Finally, focus groups allowed us to contextualise and test findings across research participants.

**Fieldwork with BAME and mainstream homeless organisations**

The aims of the research with organisations were to measure existing links between mainstream homeless and BAME agencies in London, record the types of links wanted by organisations and provide some information on the range of methods used for developing links.

Definition of organisations used for the survey:

\(^\text{16}\) After the data collection stage, survey responses from closed questions were input into SPSS and analysed. Qualitative responses were transcribed and the data was analysed using thematic coding.
‘Mainstream organisations’ are open to clients from all ethnic backgrounds. ‘BAME organisations’ specifically target BAME individuals.

‘Mainstream homeless organisations’ in our sample offer homeless services as their primary function. ‘BAME organisations’ surveyed accept and provide services for homeless clients, but the main client base is non-homeless individuals. The proportion of homeless clients in BAME organisations from our survey was, on average, less than 10%, although in a significant number over 20% of the clients were homeless.

The most common proportion of BAME clients in the mainstream homeless organisations surveyed was 25-50%, whereas clients in the vast majority of BAME organisations from the survey were all from BAME groups.

The sampling frame of organisations in London was established by accessing the Homeless UK database published by the Resource Information Service. This provides information on over 8,000 services that can help homeless individuals. Telephone numbers and e-mail addresses (where available) of 506 mainstream homeless organisations and 255 BAME organisations advertising services for homeless individuals were input into excel spreadsheets. Efforts were made to ensure the list was as comprehensive as possible. Since the size of the sampling frame was relatively modest, the research team decided to contact all organisations during the fieldwork stage rather than randomly selecting a percentage.

A questionnaire was chosen as the data collection instrument. Most of the questions were pre-coded; however open questions were included to measure methods for developing links. The research team piloted the questionnaire using postal, e-mail and telephone contact. Telephone administration generated the highest number of responses followed by e-mail and then post. Therefore, the research team decided to contact sample members over the phone. In total, surveys were completed with 59 mainstream homeless organisations and 29 BAME organisations.

There were a number of limitations to securing higher response rates. The main difficulty was that managers were often not available at the time of calling; reasons included individuals being busy with work, in meetings or on leave. In these instances an appointment was arranged for a call-back. In general, it was more difficult to complete surveys with managers of smaller organisations due to limited staff numbers. Managers were often busy dealing with clients rather than at their desk. Furthermore, these organisations would often have just one manager and, therefore, there was less choice of potential respondents to carry out the survey.

Since, on average, BAME organisations are smaller than mainstream homeless organisations, completing surveys with these agencies is more challenging. Another aspect of conducting this fieldwork with the BAME organisations was the high frequency of telephone calls not being answered; although we cannot conclude with certainty that this was due to low staff numbers, it is a distinct possibility. Finally, the research team noted that invalid numbers were far higher amongst BAME organisations in the sampling frame than mainstream homeless organisations. Our study revealed that funding was a major concern amongst BAME organisations and the pattern of invalid numbers may suggest company closures.

Nevertheless, the fieldwork with organisations managed to generate survey data from a varied cross section of mainstream homeless and BAME organisations. Data collected from mainstream homeless agencies included large national organisations, agencies specialising in accommodation provision; employment, training and
education; housing advice; general advice and support; general health; mental health, and drugs and alcohol. Furthermore, data was collected from BAME organisations open to all BAME groups and agencies catering specifically to African and African-Caribbean, Asian, Muslim, Irish and Latin-American individuals. Once fieldwork was completed, quantitative data was inputted into SPSS and qualitative responses were transcribed and categorised.

Research Ethics, Clients’ Participation and Empowerment

At all stages of the fieldwork, participants were informed about ROTA, the aims of the research and how the findings would be presented and used. Candidates therefore had sufficient information to base their decisions on whether to become involved in the project. The research team was particularly careful in following ethical codes of conduct when collecting data from homeless individuals due to the sensitive nature of much of the information provided and the hardships suffered whilst being homeless. Participants were aware that they were entitled to withdraw from the research process at any stage and could refuse to answer any questions which made them feel uncomfortable. When data was collected at ROTA offices, the interview area was closed off in order to provide a relaxing environment and minimise anxiety. In one case where the data provided by a young woman was particularly sensitive, the interview was administered in a private office by a female interviewer.

Measures were taken to ensure that participants could not be identified if they wished to remain anonymous. Quotes appearing in the final research report and interim reports have had names removed and just include a description of the individual's self defined ethnicity and age. However, a consent form was used when the focus groups and three case interviews were filmed. Participants were also fully informed about who would see the final film, how the DVDs would be stored and measures taken to protect identities and keep personal details hidden.

Funding requirements of the project required that, in addition to collecting data from individuals, the research team should take steps to ‘empower’ participants. This is also part of ROTA's ethos towards its work on all its projects. The research team kept in contact with clients throughout and after the fieldwork stage. Information was provided on educational, training and employment opportunities that could help clients to pursue vocational ambitions and contribute to personal growth. Several individuals applied for and enrolled on university courses through access years. Other's undertook work experience at a nursery; a course training individuals to become support workers at homeless organisations, and a vocational support and mentoring programme from a BAME organisation. A few research participants, who had been involved in previous consultations at homeless organisations, felt that their voices were not being fully heard since the data was collected in a ‘tick box’ fashion. The ROTA research team attempted to ensure that participants had some control in fully describing issues that were important to them by collecting data using open questions under broad themes and giving individuals the opportunity to bring up other topics not covered by the interviewer’s line of questioning.
To better understand ROTA’s project, it is important to give a bit more detail of the framework within which it was placed. As mentioned, ROTA’s project was funded and supported by Equal, which is a European Social Fund (ESF) Community Initiative, providing funds to projects which test and promote new means of combating discrimination and inequalities in the labour market.

Equal operates across identified thematic fields which embrace the four pillars of the European Employment Strategy and support for asylum seekers. Equal funds activities implemented by strategic partnerships called Development Partnerships (DPs). Each DP addresses one thematic field. The focus is on producing evidence of successful outcomes that can influence future policy and practice, and bring effective change.

To this end, a DP was developed specifically for London and ROTA’s project sat within this partnership. The London Equal partnership was called ‘Tackling Multiple Disadvantage in London by Improving Employability’ (TMD) programme and it was run through a cross-sector partnership led by the charity Off the Streets and Into Work (OSW)\(^\text{17}\). The other core partners include Cardboard Citizens, Connection at St Martin’s, Depaul Trust, Greater London Authority, Groundswell UK, ProspectUs, St Mungo’s and Thames Reach.

The TMD programme specifically targeted individuals facing multiple disadvantage in the labour market who were homeless, at risk of homelessness, in temporary accommodation, or had been recently resettled. Running until the end of 2007, it tested routes out of inactivity and worklessness. It provided innovative and individual options, in a city with current and projected skills shortages, but where there is less incentive for those on benefits to work than anywhere else in the country, and where mainstream measures have had the least impact.

ROTA is a keen advocate of partnership work and this project is only one example of the way we have worked since our inception. In addition to the TMD partners, ROTA has worked with other organisations to deliver this project namely, Research as Evidence and Independent Academic Research Studies.

\(^{17}\) OSW is a registered charity that tackles homelessness by supporting individual’s to access education, training, volunteering and employment. [http://www.osw.org.uk/](http://www.osw.org.uk/)
REVIEWING AND ANALYSING THE LITERATURE

The project started with a scoping exercise and detailed desk research including a literature review. This explored the key issues surrounding BAME homelessness with particular emphasis on London. The review findings are summarised in this chapter which examines the nature of BAME homelessness including the main barriers to accessing support and key policies, programmes and good practice initiatives that exist to alleviate homelessness among this group. The detailed findings are included in two separate reports which can be accessed from ROTA’s website18.

BAME homelessness: Definitions and context

ROTA uses the term BAME to refer to all groups who are discriminated against on the grounds of their race, culture, colour, nationality or religious practice.

The definition of ‘homelessness’ ranges from the basic lack of roof or shelter to sharing with another household, to living in accommodation deemed unfit for human habitation19. A study carried out in Scotland20 further highlights this contested nature of ‘homelessness’, illustrating how perceptions of homelessness may differ across communities and cultures. Homelessness is however, typically associated with large metropolitan cities.

Susceptibility to homelessness stems from factors unevenly scattered across age, gender, and race/ethnicity groups. BAME households in particular are significantly overrepresented among homeless applicants. In the UK BAME people are around 3 times more likely to experience homelessness than their White British counterparts21.

The uniqueness of BAME homelessness

BAME groups, including the homeless are set to continue to grow in the UK. There has been a trend towards increasing diversity within the immigrant community in terms of gender, age, country of origin, and educational background, and this is also predicted to continue.

In London, data collected by Local Authorities on homeless people show that over 50% of the capital’s homeless are non-white22. The disparity between London and national statistics on the ethnic origin of homeless people between April and June 2007, London had the highest percentage of homeless acceptances from Black, Asian and ‘Other’ BAME groups across all the English regions23 partly reflects the larger BAME refugee population that London has as well as other differences. London will remain the centre of ever-growing housing problems for BAME individuals.

21 ‘Tackling Homelessness amongst Ethnic Minority Households’.
22 Mitchell, F., ‘Living in Limbo’.
Some unusual situations or circumstances of BAME homeless groups have been overlooked for a variety of reasons. These are considered below:

1. BAME over-representation in homeless population

There are worrying trends showing that members from BAME communities experience disproportionately high levels of homelessness, as represented by households accepted as homeless by Local Authority. The vast majority of homeless people are not categorised as homeless because they “are not literally sleeping on the street but living with relatives and friends or in temporary accommodation”\textsuperscript{24}.

BAME homelessness is relatively more likely to result from “household formation”, or having to leave the home of a friend or relative\textsuperscript{25}. This is a well documented finding across BAME homelessness studies\textsuperscript{26}. Given that they are less likely to be on the streets instead residing with friends or relatives, research finds that they are less visible to community sector staff\textsuperscript{27}.

2. Perceived vulnerability and discrimination

The Homelessness Act 1997 stated it would aim to combat all forms of homelessness yet a bias remained and was reflected in both policy and subsequent interpretations. Homeless people are judged based on a “rationing system,” where they are placed in categories of perceived vulnerability. Such “priority” categories may be interpreted as a discriminatory approach since they have not expanded to include single\textsuperscript{28} and many BAME homeless individuals. Since many statutory BAME homeless spend episodes staying with their relatives, they might not be appropriately prioritised for housing assistance. This lack of priority extends to policy, research, service, and resource allocation\textsuperscript{29}. While BAME applicants are less likely to be judged ‘intentionally homeless’ than their White British counterparts, they are more likely to be assessed as ‘non-priority’ homeless, and there are indications of fewer housing alternatives available for members of the BAME community\textsuperscript{30}. Yet, Crisis argues these single and BAME homeless are often amongst the most vulnerable of society and carry significant costs to society\textsuperscript{31} with highly significant numbers, in the hundreds of thousands\textsuperscript{32}, and therefore cannot be overlooked.

3. Social and Economic disadvantage

The ‘Housing and Minority Black Communities: Review of the Evidence Base, Research Report’ highlights strengths and gaps in the evidence base regarding race factors affecting housing. Individuals of African and African-Caribbean origin are least...

\textsuperscript{25} Netto, G., ‘Black and Minority Ethnic Communities and Homelessness in Scotland’.
\textsuperscript{26} Minority Ethnic Homelessness in London: Findings from a Rapid Review (NHS Executive, November 1999).
\textsuperscript{27} Kenny, D. and Field, S., Black People: Pushing Back the Boundaries II (Greater London Authority, June 2003), p. 38.
\textsuperscript{28} Includes single people or couples with no dependent children.
\textsuperscript{30} Netto, G., ‘Black and Minority Ethnic Communities and Homelessness’.
likely to be owner-occupiers (39% compared with 71% for White British), and have lower average weekly incomes of head of household and partner (£355 compared with £488)\textsuperscript{33}. They are more likely than white people to experience overcrowding, live in poor conditions, be dissatisfied with their home, and to want to move\textsuperscript{34}. Members of BAME groups were four times more likely to see racial harassment as a serious problem in their area than White British people. After over five decades of settlement, the report states that Britain’s ‘Black minority’ remains ‘segregated’ and disproportionately concentrated in the poorest urban, usually inner-city locations\textsuperscript{35}.

4. Health inequalities

Homeless people have high morbidity and mortality rates. 2006 data from a St Mungo’s survey into the health of 601 homeless people showed a much lower mean age at death than for the general population of 42 years of age, and a death rate of 25 times that of the general population in rough sleepers aged between 45 and 62. Evidence from all homeless support organisations describes very high rates of substance abuse, mental and physical ill health among homeless people\textsuperscript{36}. Common infectious disease issues among the homeless include Hepatitis A and B. Over 50% of homeless people could be classified as socially vulnerable, socially excluded or having poor social skills\textsuperscript{37}.

The ‘Three Borough Primary Healthcare Team’ (Lambeth, Southwark and Lewisham) reports a large hostel where the majority of residents needed constant monitoring by staff for various health conditions. Another broader survey by St Mungo’s among 1,491 homeless people highlights the complexity of the issues faced by homeless people; only 17% self-reported that they were free of mental health, substance use or physical health issues. In contrast with these high healthcare needs, evidence suggests that stigma and discrimination prevents many homeless people from seeking appropriate care.

Research commissioned by the King’s Fund looking at health and homelessness in London\textsuperscript{38} found that as homeless people from BAME groups are more likely to be sharing unwillingly with friends or relations in overcrowded or poor accommodation, they often fall into the group of homeless people about which least is known. The review reported that overcrowded conditions often lead to increased risk of contracting infectious disease because of cold, damp and unsanitary conditions and low incomes can limit the use of heating systems or result in poor diets. Homelessness is also linked to an increased risk of mental health problems as people are often subject to massive stress because of the factors that made them homeless (e.g. escaping violence or abuse, or the loss of a family home due to mortgage arrears) or because of the experience of homelessness itself (such as parents confined to one small room with young children for prolonged periods).

\textsuperscript{34} Harrison, M., ‘Housing and Minority Black Communities’, p. 6-7
\textsuperscript{35} Harrison, M., ‘Housing and Minority Black Communities’, p. 7
\textsuperscript{36} 61C Westminster PCT
\textsuperscript{37} CLG, Special Advisor to Dept. Dr Angela Jones.
The review found that homeless families in London are likely to experience health problems associated with cramped conditions. Homeless children in temporary accommodation were reported as showing behavioural disturbance, depression, disturbed sleep, bed-wetting, toilet training problems and violent mood swings.

**Main barriers to accessing homeless support**

One of the most comprehensive assessments of the obstacles that the BAME homeless face when seeking provisions was produced by the Scottish Executive. A summary of the Executive’s report and the report “No Home, No Job: Moving on from Transitional Spaces” clarifies most of the common barriers facing the BAME homeless in Scotland in particular, and in the UK at large.

- Lack of appropriate temporary and permanent accommodation
- Lack of accommodation in areas which were perceived to be safe
- Inaffordability of mortgages and accommodation in the private rented sector
- Difficulties in getting adequate employment opportunities
- Difficulties in obtaining information due to language differences, literacy issues, and lack of familiarity with the system
- Lack of sensitivity by housing officers to their vulnerability to racial harassment
- Difficulty in getting specialised legal advice
- Difficulty in getting complaints addressed
- Difficulty in dealing with “minorities within minorities”; e.g., the difference between male and female behaviour within one minority community can be substantial
- BAME-targeted service providers often offered less comprehensive services (e.g., could not help with family mediation and rent deposit schemes)

A range of connected ‘supply or service-based’ factors can either bolster or mitigate the chances of becoming homeless. These factors are considered below.

1. **Economic and Structural barriers**

For those living in poverty, one of the factors increasing their chances of becoming homeless include the reduced affordability of private sector flats or homes and reductions in the building of new social housing. There are fewer social renters moving out of their homes, so fewer homes have been available for letting in the social sector. Some of these barriers are compounded for BAME individuals.

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For instance, the Scottish Executive found that refugees often face barriers in accessing housing due to complex policies and legislation around refugee status. Whilst struggling to find low-cost accommodation, many refugees fail to obtain temporary housing and become dependent on relatives or friends. Refugees new to London often have an extended period before they can find decent accommodation.

2. Short fall in social rented sector housing

Both housing subsidies and those paid directly to the needy have declined in recent years. ‘The situation in London appears to be particularly acute, where the pool of housing in the social rented sector is shrinking as more tenants exercise their right to buy, the population continues to expand, and market prices exclude many low-income households.’

The Housing, Planning, Local Government and the Regions Committee report begins by stating that it is an obligation of the government to ensure the availability of ‘a decent home at an affordable cost to members of the populace’. Yet it then states that over the last 15 years, the number of homes built has declined while a rise in the population and number of households has grown. The number of excess homes over households has fallen and data shows that in London, there are actually 3.5% more households than homes. Those living in overcrowded conditions have been increasing in number as well, primarily as a result of a shortage of social rented housing. House prices have increased faster than income and at the same time, the number of new affordable housing completed fell by almost half. Without a regular income, it is becoming increasingly difficult to afford decent, stable accommodation.

3. Refuge and shelter provision - domestic violence

Women escaping domestic abuse also face a lack of adequate housing and refuge spaces. When fleeing a violent home, some women faced full shelters that could not house them. Tragically, immigration legislation has made it even harder for some women from migrant groups to access the services that they need.

4. Accommodation in unsafe areas

Social housing that exists or is newly constructed and temporary housing is often in unsafe areas with widespread problems of prostitution and drug dealing. It was reported that some homeless individuals and families in custody of particular flats were persuaded by drug dealers and prostitutes to let them use the premises for...
criminal acts and, in return, the tenants would be given free drugs. Situations such as these indicate that the homeless individual or family has sometimes ended up in a worse situation than prior to their receipt of public services.

5. Refugee status and English as an Additional Language (EAL)

Transition to employment can present complications since those without a physical address typically cannot find employment. When attempting to acquire social services and potential employment available to people, the BAME refugee community faces enhanced difficulties because of their refugee status.46 Most new migrants are expected to be workers filling particular skill shortages in the UK. However, many immigrants are likely to fare worse economically because they have non-transferable qualifications or have weak English language skills.

Research has found that amongst refugees, the termination of National Asylum Support Service accommodation if granted leave to remain was the biggest cause of homelessness. Other issues affecting refugees were racial discrimination and harassment; difficulty communicating in English; lack of knowledge of services; unrecognised physical, mental and emotional needs; and social isolation and insecurity.47

6. Benefit receipt - transition to employment

Transitional periods towards employment can be difficult for individuals to negotiate. Taking a job might not be worthwhile for many homeless because of the financial penalties incurred when taking on work and giving up benefit claims. For example, earnings are usually paid in arrears and the most disadvantaged cannot wait before in-work benefits become established. The recently homeless often have no savings to cushion them, and can be hit by problems such as finding rent or paying work start-up costs for example, clothing and transportation.48

7. Lack of ‘holistic’ services to aid multiple or complex needs

Homeless individuals with multiple needs have even been deemed as ‘invisible’ with inconsistent assessments sometimes confusing the issues challenging someone. The development of a common assessment process would have advantages both to the individual BAME homeless person and to local agencies.49

Homeless individuals with any special needs find themselves in an ‘unemployable’ category in many cases. Off the Streets and Into Work reported that whereas 67.6% of OSW clients with no needs other than homelessness achieved job outcomes, only 18.5% of clients with one additional need or disability could find work. Needs include language barriers, cultural obstacles and the experience of discrimination. This rate fell further to 11.3% for clients with two or more special needs.

At the time of writing, the Economic and Social Research Council is proposing a new research programme (co-ordinated by Homeless Link) looking at homelessness and social exclusion\(^{50}\) – specifically ‘multiple exclusion homelessness’\(^{51}\). A consultation funded by Communities and Local Government and the Housing Corporation recently reported on cross-cutting themes identified for this including: mapping the relationship between homelessness and other aspects of acute social exclusion; evaluating what works; and, identifying the causes of multiple exclusion homelessness including the impact of poverty. The programme proposes to include analysis of key diversity dimensions like the specific impact/experience of women; ex-service personnel; asylum seekers/refugees; care leavers; prison leavers; people with disabilities; and lesbian, gay, bisexual and transgender groups.

8. Language and literacy as a barrier to accessing services

Language and literacy issues repeatedly crop up as a fundamental obstacle for the BAME people in obtaining public services. Without being able to read guidelines in one’s own language if literate, or have them explained by an interpreter if unable to read, knowledge of how to utilise the system remains inaccessible. The old adage that self-help is the best help cannot be employed when the BAME homeless individuals do not know how to approach the system due to a language barrier. A recent response by ROTA to the consultation on the Mayor’s Health Inequality Strategy stated that advocacy (even more so that translation or interpretation services) allowed people to help shape as well as obtain public services\(^{52}\).

9. Indirect discrimination from support services

Organisations providing housing and homelessness services are often inadvertently discriminatory in their treatment of service users. For instance, when public officials cannot differentiate between Indians and Pakistanis or between female assertiveness in south-eastern Asian versus White British culture, a misreading of cues and meanings can occur. Cultural miscommunication and misunderstanding can also account for the difficulty in getting specialised legal advice and in getting complaints addressed. Gypsies and Travellers for example also suffer overt discrimination due to social services’ perceptions of their transient status\(^{53}\). Similarly, the lack of culturally sensitive sheltered housing and even residential care for Irish people in London has been consistently highlighted. The evidence suggests that this latter group may well become a major focus for future accommodation and service development\(^{54}\).

10. The impact of homelessness and temporary accommodation on children’s life chances – inter-generational transmission of disadvantage

Homelessness certainly damages the prospects of homeless children. Research has shown that they are deeply affected by their temporary housing status. It plays a role


\(^{51}\) Taken to mean a complex of multiple needs with a focus on the individual.

\(^{52}\) Gavrielides, T., ‘Developing the Mayor’s Health Inequality Strategy’.


in an ability to keep school places, maintain attendance, and do well at school as ‘the trauma of becoming homeless and the stresses associated with living in temporary accommodation affect children’s mental and emotional wellbeing’55. This is particularly true for children and young people who belong to a BAME group who for instance, have been unable to access Sure Start programmes56. The difficulty of obtaining proper care for homeless children is important. It has been shown that young people who experience institutional care are significantly more at risk of social exclusion; are much more likely to leave school without qualifications, end up in prison, or homeless.

11. The impact of physical and mental health problems in accessing support

As mentioned at the beginning of this chapter and evidenced by work of the King’s Fund57 the overall health condition of the homeless community is an area of concern. Homeless people face high levels of stress, insecurity, and inconvenience, which can have an impact on other conditions and leave the individual’s natural immunities weakened. Health problems have an effect on someone’s ability to achieve ‘upward mobility’ in terms of gaining employment or permanent housing. The unsanitary conditions resulting from a homeless lifestyle can cause ailments such as eczema, or asthma. Homeless people often face multiple health needs including ‘psychiatric conditions, ongoing substance abuse issues, and learning disabilities’58. Homeless individuals often find their health problems are under-diagnosed and therefore untreated.

An individual lacking the capacity to work and maintain a consistent status of employment because of a health related problem (e.g. bad back, terminal illness, alcoholism,) is more likely to remain homelessness. The majority of Crisis’ estimated numbers of 310,000 – 380,000 of single homeless people in the U.K. have some type of health problem59. Physical and mental health problems were commonly reported for people ‘not taking part in work, training or education’60. The strong link between mental health problems and unemployment indicates that homeless people would benefit from more connections with friends and family to rely on for support in times of difficulty.

In our report61 partly based on a consultation event that ROTA held in collaboration with the GLA, to inform the Mayor’s Health Inequality Strategy, contributors noted that there was an overrepresentation of BAME people, especially from the African and African-Caribbean communities within the mental health system. Concern was expressed that BAME communities are more likely to be pathologised; receive drug rather than talking therapies, and may also be over-medicated. BAME communities, however, fail to access the community, primary care and mental health promotion services that could break the cycle.

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57 For more information visit http://www.kingsfund.org.uk/
58 Croft-White, C., ‘Hidden Homelessness’.
60 Mitchell, F., ‘Living in Limbo’, p. 33
61 Gavrielides, T., ‘Developing the Mayor’s Health Inequality Strategy’.
Tackling homelessness has been a policy priority in Britain for almost seven decades. Starting with the National Assistance Act of 1948 (which first required Local Authorities to assist homeless people by providing temporary accommodation to those most in need)\(^{62}\). The United Kingdom has not relinquished resolving homelessness to the present day. Although helping the homeless has in general eclipsed helping the BAME homeless in particular. This section summarises the most current national and London based programmes, policies and initiatives relevant to supporting the homeless (and BAME homeless in particular). Policies and programmes described here are mostly taken from the TMD Project’s literature review with a few recent additions. The list is not exhaustive and while many initiatives have been evaluated, this report does not attempt to provide an assessment of their success to date.

**Housing and Homelessness**

**Ethnic Minority Innovation Fund (EMIF):** In September 2005, the Office of the Deputy Prime Minister published Tackling Homelessness Amongst Ethnic Minority Households: A Development Guide. The Guide aims to assist Local Authorities and their partner agencies in developing inclusive, evidence-based and cost-effective homelessness services for their local BAME populations. It seeks to provide:

- A better understanding of the causes of BAME homelessness
- Tools to profile local BAME communities
- Tools to map the needs of BAME households who are or may become homeless
- Strategies to develop appropriate and accessible homelessness services for all BAME groups
- Approaches for meeting legal duties on race equality

To support uptake of the Development Guide, a £3 million Ethnic Minorities Innovation Fund (EMIF) was launched in September 2005. The Fund has provided grants to projects across the country over 2006-2008. The aim of the fund is to identify new and effective approaches to tackling and preventing homelessness-related issues faced by BAME groups in England, and to support the delivery of good practice. Projects aim to deliver:

- Reduced levels of homelessness amongst BAME people
- A reduction in the level of repeat homelessness amongst BAME people
- A reduction in the number of BAME people in temporary accommodation

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The provision of inclusive and effective homelessness services

The Housing Act 1985: The legal definition of homelessness was expanded when the Housing and Planning Act of 1986 was published. Under this Act, the homeless are no longer defined as the roofless, as the government includes many living in substandard housing or squatting as homeless.

The Homelessness Act 2002: Forced Local Authorities to provide permanent housing assistance to homeless people in priority need and to publish a homelessness reduction strategy.\(^{63}\)

EMIF Funded project: St Pancras Refugee Centre - Housing Advocacy and Tenancy Support (Holy Cross Centre Trust - HCCT)

This is a partnership project between the VCS and statutory sectors to meet refugees' housing and support needs. The work includes improving access to and maintenance of tenancies; working with the Criminal Justice System to assist refugees released from prison to access and sustain housing, and assisting refugees leaving National Asylum Support Services accommodation to access adequate secure housing and planned resettlement programmes. There is also a link to refugee communities and statutory services providing an outreach service for those who are isolated. It has taken a holistic approach to addressing needs through direct engagement with refugee communities.

The Communities Plan (February 2003): Needs in relation to reforms of housing and planning, were covered in this plan. In relation to London it aimed to:

- Address housing shortage including accelerating the ‘growth areas’ of Thames Gateway and the London-Stansted-Cambridge corridor
- Provide affordable housing (£5 billion was allocated nationally for the provision of affordable housing up to 2006)
- Tackle homelessness including ensuring the ending of use of bed and breakfast hostels for homeless families by March 2004.\(^{64}\)

The 1998 Rough Sleepers Initiative (RSI): Was designed to reduce the number of rough sleepers by two thirds by 2002 – it achieved its goals in 2001. The RSI operated in central London from 1990 until 1999 and was extended to 36 other areas in England from 1997. The Rough Sleepers Unit in London focused on developing policies that would get the homeless off the streets and cater to those most in need first whilst readying the homeless for employment.\(^{65}\)

The Homelessness and Housing Support Directorate's 2002 Bed and Breakfast (B&B) programme: A result of the RSI, this programme helped remove families with children from temporary accommodation in B&Bs. Almost every Local Authority in England had complied by March of 2004 with a 99.3% decline in bed and breakfast

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65 ‘Breaking the Cycle: Taking Stock of Progress’.
66 ‘Breaking the Cycle: Taking Stock of Progress’.
use for homeless families with children since 2002. Despite these progressive statistics, the number of people in temporary accommodation remains high at 130,000 households as of 2002/03. These programmes culminated in a national Homelessness Directorate to guide their implementation and offer policy advice.

**EMIF Funded project : Tower Hamlets Youth Homelessness Prevention Project (Revolving Doors Agency)**

This project is VCS led and provides a Link Worker Scheme at Holloway Prison offering practical and emotional support to BAME women with mental health and multiple needs both in prison and post release. The scheme engages with clients to support them to link into the range of services they require to facilitate a reduction of re-offending and prevent homelessness. An advisory group supports the practical efforts of the team to engage with clients by identifying and addressing challenges to effective inter-agency practice. This is a project that particularly addresses people who have mental health and multiple needs.

**The Supporting People Programme (SSP):** £1.8 billion has been spent to deliver housing-related support services for more than a million people. More Than a Roof: A Report into Tackling Homelessness, outlined how funds have been spent to address homelessness. Approximately £260 million was granted to Local Authorities and VCS agencies between 2002-2006 to implement homelessness prevention strategies.

**The Homelessness and Housing Support Directorate, CLG:** The Directorate was allocated a revenue budget of £60 million for both 2004-05 and 2005-06. Funding was tied to how local communities could minimise rough sleeping, how much the use of emergency accommodation was curtailed, and how well Local Authorities provided for the homeless. Communities receiving grants of over £50,000 had to reduce repeat homelessness and the associated main causes. Innovative solutions to providing homes for the needy have led to creative programming.

**The Homelessness Innovation Fund (HIF):** More than £2 million has been granted to innovative schemes to develop new ways of tackling homelessness more effectively. Nineteen projects (announced in November 2005) across England have been awarded funding to develop new ways of preventing homelessness and reducing the number of households living in temporary accommodation. London based projects included the following case studies:

**Shelter ‘Homelessness to Home’ Service**

This provides comprehensive help with a variety of issues faced by homeless people. Support is offered in finding accommodation and moving into a new home. Assistance is also offered on financial issues including benefit claims. Help is also offered in accessing other public services and in finding appropriate social and emotional support.

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68 ‘More than a Roof’
West London Private Sector Homelessness Solutions

This sub-regional project involving West London Local Authorities, intends to make better use of homes in the private rented sector and to bring empty houses back into use. Primarily focused on housing homeless people or those at risk of homelessness, the project aims to build a more focused relationship with private sector landlords across west London, with available properties being advertised on a single website.

Merton and Sutton Private Sector Landlords Forum

Funding £200,000

This project utilises the private rented sector to reduce households in temporary accommodation and, more widely, to reduce the stigma of homelessness. The group aimed to set up a private sector shop to advertise private sector renting opportunities - by providing a shop front similar to an estate agent the hope is to attract landlords with decent homes to rent on a long term basis.

The Mayor’s Housing Strategy (London): Following devolution of responsibility for the housing strategy to the Mayor of London the first draft was published on 18 September 2007. Key aims include providing more affordable homes and more family homes, helping people on low to middle incomes into home ownership and increasing housing choice and mobility. Following consultation this strategy is expected to become statutory in 2008. It comprises:

- Policies to increase housing supply to better meet Londoners’ needs and improve the quality of London’s homes
- A Strategic Housing Investment Plan
- A delivery plan

Other Mayoral Housing and Homelessness Initiatives: The Mayor of London is also planning to support a range of new homeless initiatives across London:

- ‘Capital Moves’ aims to deliver London wide choice based lettings and mobility for Londoners wanting to access affordable housing across the capital. This is a joint initiative between the Greater London Authority, London Councils, the London Housing Federation, the Housing Corporation and London’s social landlords, part-funded by the Department for Communities and Local Government.

- The ‘London Accessible Housing Register’ is part of Capital Moves. It intends to provide high quality, standardised information about accessible housing, signpost advice, support and advocacy for disabled people looking for housing. It also looks at partnership work with landlords to develop best practice. It aims to enable disabled people to participate in choice based


70 Greater London Authority website: [http://www.london.gov.uk/mayor/housing/new-initiatives.jsp](http://www.london.gov.uk/mayor/housing/new-initiatives.jsp) [accessed 19 October 2007].
lettings and mobility schemes on a more equitable basis with their non-disabled counterparts as well as increase access to housing opportunities in the private sector.

- ‘Working Future’\(^{71}\) was a pilot project and part of the TMD project as was this report. Developed by a partnership including the Greater London Authority, East Homes and the London boroughs of Newham, Redbridge and Waltham Forest it seeks to tackle worklessness among families in long-term temporary accommodation.

- A web-based system ‘Setting the Standard’ is being set up to disseminate information on the use and standards of bed and breakfast hotels and other private sector shared accommodation used as temporary accommodation for homeless households in London.

**NOTIFY**

This joint Greater London Authority / London Councils initiative will provide a London wide web-based system to improve homeless households’ access to health, education and social services\(^{72}\).

**The PHASE Project (Preventing Homelessness and Securing Employment) (Hackney, Southwark, Lambeth and Westminster)**

By working with Local Authorities and housing groups this project seeks to create a template of best practice to be used across the UK. They aim to create an assessment and support package for people at risk of entering temporary accommodation, or those already homeless. The package gets people into settled accommodation and explores employment options open to them.

**Places of Change**\(^{73}\): Aims to encourage homelessness services, particularly hostels, to focus on moving service users forward, including improving their access to meaningful occupation and training and employment opportunities. Making hostels ‘Places of Change’ is one of the central aims of Homeless Link’s regional development work, funded by the Department of Communities and Local Government.

**Hostels Capital Improvement Programme (HCIP)**\(^{74}\). The HCIP initiative was jointly developed by the Chartered Institute of Housing, Homeless Link and Broadway to encourage effective leadership and joint working among service managers. As part of the programme Homeless Link supports and administers £450,000 grants scheme to help services working with homeless people provide positive activities.

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\(^{71}\) See: [http://www.workingfuture.org.uk](http://www.workingfuture.org.uk)

\(^{72}\) See: [http://www.notifylondon.gov.uk](http://www.notifylondon.gov.uk)


Choice Based Lettings (CBL)\textsuperscript{75}: Applicants for social housing (and tenants who want to transfer) are able to apply for vacancies more easily under this initiative. Vacancies are advertised widely in the neighbourhood via such avenues as the local newspaper or on a website. This approach, developed in the Netherlands, was piloted in the UK between 2001 and 2003. Positive feedback resulted in the Government requesting all Local Authorities to introduce a scheme by 2010.

The proposals fit with the Government's objective of introducing more customer choice into public services and creating more sustainable communities. In addition, schemes can be developed to give applicants more mobility. This may involve giving applicants more information on options for moving to other parts of the country, or considering options such as private rented accommodation or home ownership.

Gypsy and Traveller accommodation policy\textsuperscript{76}: Measures in the Housing Act 2004 required Local Authorities to include Gypsies and Travellers in the Accommodation Needs Assessment process, and to have a strategy in place which sets out how any identified needs will be met as part of their wider housing strategies. This came into force on 2 January 2007 and Ministers expect all Local Housing Authorities to have completed an assessment by the end of 2007.

Employment and Training

New Deal Programme: New Deal has aimed to create a sustainable level of employment by assisting people to gain and remain in employment. Programmes encompass different target groups and have changed over time. In particular, there are four main New Deal Programmes:

- New Deal 25 Plus (ND25plus) for all jobseekers claiming Jobseeker's Allowance
- New Deal for Lone Parents (NDLP)
- New Deal 50 Plus (ND50plus) for people aged 50 or above
- New Deal for People with disabilities (NDDP)

ND25plus provides shorts courses in basic and soft skills. NDLP permits in-work training grants. NDYP aims to give participants with the chance to gain skills on the job or to engage in fulltime education and training for up to 12 months\textsuperscript{77}.

The ‘Business Action on Homelessness’ programme\textsuperscript{78}: This programme links up statutory and VCS agencies with the corporate sector and provides training and work placements that improve the skills and employability of homeless people. Homeless people are trained through a three-tier programme to prepare them for work:

\begin{itemize}
  \item [75] \url{http://www.communities.gov.uk/housing/housingmanagementcare/choicebasedlettings/} [accessed 21 October 2007].
  \item [76] \url{http://www.communities.gov.uk/housing/housingmanagementcare/gypsiesandtravellers/gypsytraveller/} [accessed 23 October 2007]
  \item [77] Hasluck, C., 'The Impact of Government Policy on the Social Exclusion of Working Age People'.
  \item [78] Hasluck, C., 'The Impact of Government Policy on the Social Exclusion of Working Age People'.
\end{itemize}
• Ready to Go: a two-day business training programme that is concerned with confidence building to prepare people for work

• Ready for Work: providing two-week placements, with the option of extending placements – the aim of which is to build confidence, develop new and existing skills and provide a reference on completion of the placement

• Ready for Jobs: a job bank of vacancies that companies have opened up to ‘job ready’ homeless people in London.

The Ethnic Minority Employment Task Force: Formed in response to the recommendations of the Prime Minister’s Strategy Unit’s report on ethnic minorities in the labour market that BAME groups will account for 50% of the growth of the working age population over the next 10 years, the Taskforce80 is the key mechanism for ensuring that departments work together, and delivers the first coherent cross-Government BAME employment strategy. It brings together key departments including the Cabinet Office, with representatives from the Commission for Racial Equality (now part of the Equality and Human Rights Commission), the Trades Union Congress, the Greater London Authority and the Confederation of British Industry.

The Deprived Area Fund (DAF): National implementation of DAF took place in January 2007. The purpose of the fund is primarily to add value to current mainstream services offered by Jobcentre Plus and to build on the most effective elements of previous community based initiatives such as Action Teams for Jobs, and Ethnic Minority Outreach which ceased operation in September 2006. DAF will align with Local Area Agreement’s and aims to rationalise the number of programmes delivered to avoid duplication of effort and target resources on more effectively addressing the needs of people living in Disadvantaged Area Wards and Disadvantaged (BAME) Group Wards. The same proportion of the BAME population will be covered by DAF as under Action Teams and Ethnic Minority Outreach and there is the potential for more provision in high BAME areas81.

Other government programmes: There are too many initiatives intended to train those in need of work, to detail in this report but others include Adult Basic Skills (Skills for Life), Work Based Learning for Adults, and Employer Training Pilots82. Many of these will have an impact on BAME homeless individuals.

Education, Literacy and Numeracy

Skills for Life Strategy: The publication of ‘A Fresh Start - improving literacy and numeracy’83, known as the Moser Report, which stated that up to 7 million adults in England have difficulties with literacy and numeracy led to the development of the

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80 More information about the work of the Taskforce can be found at: http://www.emetaskforce.gov.uk/
82 Johnson, E., ‘Jobcentre Plus Welfare to Work Change Programme’
83 Department for Education and Employment (DfEE, 1999).
strategy\textsuperscript{84} launched in England in March 2001. The government invested £1.6 billion from 2003-2006 with the target of helping 1.5 million adults improve their skills by 2007. Linked to Skills for Life are some more specific programmes designed to improve adult literacy levels among those most at risk as well as those living in disadvantaged areas. These are some examples:

**Step in to Learning programme**

This programme trains staff in the early years and childcare workforce to help them identify parents and carers with literacy, language and/or numeracy skills needs and to encourage them to improve these skills for the benefit of both themselves and their child.

**Link Up Project**

This project recruits volunteers to help support adults with their language, literacy and numeracy skills in 21 of the most deprived communities in England. Jointly funded by the Skills for Life Strategy Unit and the Active Community Unit, it is delivered by the Basic Skills Agency.

**PLUS Programme for literacy and numeracy**

Literacy and Numeracy issues for young people in the youth justice system are addressed by the Youth Justice Board's Plus Programme.

**Skills for Families**

A joint initiative of the Department for Children, Schools and Families (DCSF) and the Learning and Skills Council and delivered by the Basic Skills Agency; this aims to further develop effective strategic approaches around family literacy, language and numeracy.

**Learndirect**\textsuperscript{85}. This initiative aims to overcome non-involvement in learning by providing an alternative for those who might be inhibited by or prevented from using a conventional learning environment. Learners can take part as and when they wish to, can work at their own pace and do not have to take exams unless they wish too. A survey of learndirect (January 2002) found that it was the first learning that 60% of respondents had undertaken in the past three years, and 24% would not have taken part in any learning if learndirect had not existed.

**‘Outside In’ Curriculum, the Foyer Federation**\textsuperscript{86}: The ‘curriculum’ replaces traditional reading, writing and arithmetic with four alternative ‘Rs’: reflectiveness, resilience, resourcefulness and reciprocity. Aimed at people aged 16 and above, it is based on the principle of transformational learning. Young people are supported to develop a knowledge of what is worth learning, what she or he is good at learning and who to turn to for help, as well as how to tackle confusion and identify the best


\textsuperscript{86}The Literacy Trust: http://www.literacytrust.org.uk/Database/housing.html [accessed 23 October 2007]
learning tools. The curriculum has four phases: regaining equilibrium, starting to move forward, making sustained progress and preparing to move on. Each phase has three sets of units focusing on subjects including keeping safe and healthy, coping with others and contributing to the community.

**Quaker Homeless Action Initiative, (QHA - London)**\(^{87}\): The aim of the QHA mobile library\(^{88}\) is to treat its borrowers as ordinary members of the reading public. A mobile library, visits five homelessness day centres in London. Readers only require a name to sign up to use it. It has now been replicated elsewhere in the UK. Costs are generally limited to running the van as books are donated by the bookshop Waterstones, publishing houses and individuals, and the staff are volunteers. Awarding borrowing rights to homeless people who are highly mobile could have resulted in less books being returned but volunteers report that this has not happened.

**Health and wellbeing**

The GLA Act gave the Mayor of London new duties to promote a reduction in health inequalities and prepare a statutory health inequalities strategy, in addition to his existing duty to promote health. The health inequalities strategy, will provide an overarching framework, directly addressing those factors that have the greatest impact in London. It will also identify how other Mayoral strategies can contribute to the reduction of health inequalities.

According to the evidence collected for the Draft Strategy, aspects of housing, which seemed to have most impact on self reported health, are:

- Mobility issues especially ability to climb stairs
- Ability to access bathing and toilet facilities
- Community safety issues (crime and policing)
- Environmental issues such as noise and traffic

In the report there is an analysis of a health and housing programme in Stepney (East London), looked at the impact of a housing and regeneration programme on key health indicators such as stress, sick days and GP/hospital visits\(^{89}\). The study showed a clear link between poor housing conditions such as damp, cold, and vermin infestation, and high numbers of residents reporting coughs, colds, aches and frequent GP and hospital visits.

This strategy will seek to work with other health programmes and strategies to have a significant impact on well-being.

**Progress2Work’ (p2w)**: Policy makers have included homeless drug users in their employment agenda. Jobcentre Plus offers a programme called p2w to help

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\(^{87}\) Idem.

\(^{88}\) [http://www.qha.org.uk](http://www.qha.org.uk).

\(^{89}\) Peter Ambrose in Commentary on written submissions to a Greater London Authority 'Call for Evidence' on health inequalities (Greater London Authority, August 2007) [http://www.london.gov.uk/mayor/health/docs/hes_rhi_commentary.pdf](http://www.london.gov.uk/mayor/health/docs/hes_rhi_commentary.pdf) [accessed 23 October 2007]
recovering drug users into work. Through joint planning, treatment, employment of case workers, use of mainstream programmes like the New Deal, help with job placement and continuing support for the first 13 weeks of employment, recovering drug users can be supported to make the transition into work 90.

Health Action Zones (HAZ): The purpose of a HAZ is to catalyze partnership working between all those contributing to the health of their local population. They were set up to target areas of disadvantage, recognizing the impact of social deprivation on health and the need to tackle root causes of ill health. The first pilots were introduced in 1998 across England.

Some HAZs had a programme focus on the wider determinants of health; poverty, unemployment, housing issues as well as lifestyle factors such as diet, drugs and alcohol misuse91. Each HAZ received annual core funding of £165,000. A policy evaluation of the HAZ initiative was undertaken92, and recommended that it continue to be funded until 2008, when the schemes role would be reconsidered in light of reviews of public administration and Investing for Health.

Health Inclusion Project (Homeless Link)93: The project aims to increase equality in access to healthcare for homeless people. It will engage strategically with the homeless sector and health bodies and will broker relationships between the VCS and statutory sector. It will identify and promote innovation and good practice in primary and mental health, and substance misuse in a range of homeless service settings, as well as ensuring agencies understand the latest policy and feed into its development. It also aims to increase awareness of homeless people’s issues within the health sector to ensure more equal access. The project links closely with the Homelessness Directorate (Communities and Local Government) on the homelessness agenda.

National Social Inclusion Programme (NSIP)94: The Social Exclusion Unit published its report ‘Mental Health and Social Exclusion’ in June 2004. The report was primarily directed at improving the lives of people with mental health problems by reducing or eliminating barriers to employment and wider social participation, but applies across services and client groups including the homeless. The National Institute for Mental Health (England) is co-ordinating the overall delivery of the Mental Health and Social Exclusion report. The NSIP team has cross-government representation as well as VCS, service user, mental health professionals, and cross programme membership. One of the key project areas is housing and has led to, amongst other achievements, the publication of ‘Improving the Effectiveness of Rent Arrears Management: Good Practice Guidance’ (Communities and Local Government, 2005) which aims to support social landlords, Local Authorities and housing practitioners in managing rent arrears and developing good practice95.

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95 http://www.socialinclusion.org.uk/work_areas/index.php?subid=14
Family support

Sure Start Programme\(^\text{96}\): This programme provides a range of support for children, families and communities through the integration of early education, childcare, health and family support. Its aims include tackling child poverty and social exclusion; increasing the availability of childcare for all children; improving health and emotional development for young children, and supporting parents at home and at work.

Sure start is helping to provide accessible services to support homeless families by working closely with health sector personnel and hostels to provide much needed services, for example, midwife visits for homeless young mothers-to-be; health visitors accompanying parents and carers to Sure Start's drop-in groups; and 'respite care' service providing parents space and opportunity to 'sort things out' without having to deal with the rest of the family in a confined space. It is a particularly invaluable service to immigrant and refugee families where effective support is dependant on successful joint working. Sure Start Centres register a family, and family support workers together with health visitors, midwives and social workers, can tailor the support to meet each family's priority needs.

Sure Start Local Programmes aimed to improve services provided to children and their families in the local areas. SSLPs were situated in areas identified as having high levels of deprivation. Services within a SSLP area are universally available therefore limiting any stigma from individuals being targeted.

Children Centres\(^\text{97}\): In March 2003, the Government announced plans to rebrand Early Excellence Centres, as well as Sure Start projects that offered childcare and Neighbourhood Nurseries, as Children's Centres. The programme is part of the Government's strategy for raising standards and integrating services for young children and families in England. It seeks to develop, demonstrate and disseminate models of excellence in the delivery of centre-based integrated multi-agency services. Specifically, by integrating care, education, family support and health services, children's centres aim to better meet the needs of families in the 20% most disadvantaged wards in England and improve both children's life chances and their parents' access to work and training. In July 2004, an extra £100 million was allocated to increase the number of children's centres from a planned 1,700 to 2,500 in the 30% most deprived communities. The government envisage that by 2010 there should be one in every community.

\(^{96}\) See Sure Start website: http://www.surestart.gov.uk
Sure Start: St Ann’s – helping homeless refugee families (Nottingham case study)

Layla, 20, arrived in England from Somalia with her husband, who had leave to remain in England. After a few weeks her husband left her, and as no rent was paid, she and her two young children became homeless. Heavily pregnant, the only other person she knew in the UK was her sister in Nottingham, so she moved there and into a hostel.

A housing support worker put her in touch with a local health visitor for support and help. A referral was made to Sure Start St Ann’s, and a family support worker visited within the week. The midwife came to check the pregnancy’s progress and has continued to support Layla since the birth of her twins. Layla’s children now attend a Sure Start-run nursery, whose £2 charge per session is met from a contingency fund health visitors can use for needy families. Benefits have been organised and applications made for rehousing beginning the process resettlement.

Social Inclusion and Communities:

Housing advice for ex-offenders: The Office of the Deputy Prime Minister recommended that all prisons offer housing advice to inmates and guaranteed the maintenance of housing benefit for some prisoners. It also guarantees limited housing to some former prisoners.

Special Grants Programme (SPG): Until 2004/05 the Special Grants Programme provided funding for innovative work by VCS organisations exploring diverse ways of involving people in improving communities, and delivering on issues highlighted in ‘Living Places: Cleaner, Safer, Greener, the Sustainable Communities Plan’ and the Urban White Paper. The scope of the programme is under review and subsequently no new bids were invited for 2006/07. SGP has allocated £2.25 million per year to date to support innovative work by the VCS. Case studies include the following:

SGP: Streetwise Opera (Nottingham, Newcastle and Brighton)

Working with 300 homeless and ex-homeless people this project runs workshops leading to the staging of professional operas in each community. The project aims to raise self-esteem leading onto the motivation to improve lives through education and employment. It tackles social exclusion in these communities by integrating these participants into society and also aims to improve the public’s attitude towards homeless people.

99 ‘Housing, Planning, Local Government and the Regions Committee, Homelessness: Third Report’
Race Relations (Amendment) Act 2000: This important piece of legislation promotes good relations between different racial groups in British society. The Act, along with other baseline research published in the Tenants Compacts of 2000, revealed the general absence of younger people and BAME community members in creating local housing policy. BAME tenants, including those who were homeless, remain a focus for the general improvement of low-income housing.\(^{102}\)

New Deal for Communities (NDC)\(^{103}\): Launched in 1999 by Office of the Deputy Prime Minister (now Communities and Local Government), the programme intended to give local communities a much greater influence in the way funds were used to achieve neighbourhood renewal. Unlike previous regeneration programmes the money was given directly to identified neighbourhoods for them to manage via their New Deal for Community Partnership Board supposed to be made up of diverse local representatives.

Community Legal Advice Centres and Networks (CLACs and CLANs): This is supposed to offer a new approach to delivering publicly-funded civil legal and advice services. Community Legal Advice Centres (CLACs), developed by Communities and Local Government and Legal Services Commission, have recently been piloted to test the best ways of delivering and commissioning integrated legal advice services following a consultation last year.\(^{105}\) The Centres seek to bring together civil legal aid funding with social welfare services provided by the Council to provide help for people in greatest need and provide more coordinated and cost-effective services to tackle the common causes of local problems. Users should be able to get legal help and representation for a range of social welfare and family problems at the same time. Research shows that people commonly have several related problems but they often

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\(^{101}\) For more information, see: [http://www.emptyhomes.com/](http://www.emptyhomes.com/)

\(^{102}\) Hasluck, C., 'The Impact of Government Policy on the Social Exclusion of Working Age People'.

\(^{103}\) [http://www.neighbourhood.gov.uk/page.asp?id=617](http://www.neighbourhood.gov.uk/page.asp?id=617) [accessed 22 October 2007]


have to seek advice from different places\textsuperscript{106}. There is however grave concern in London that cuts to advice service provision from the VCS will not be cost effective in the longer term as they will lead to people getting less help then they need.

\textsuperscript{106} Moorhead, R. and Robinson, M. (2006) A Trouble Shared: Legal Problems Clusters in Solicitors’ and Advice Agencies, Cardiff Law School, Cardiff University and Matrix Research and Consultancy, DCA research series 8/06. See executive summary:
SCOPE FOR FUTURE WORK

Preventing further BAME homelessness

There is much that can be done to prevent further homelessness within Britain’s BAME communities, specifically those in London. For example, the Scottish Executive\textsuperscript{107} has outlined measures that agencies could undertake that are applicable to the situation in our city. Such measures include:

- Increased availability and quality of advice to people from BAME communities
- Increased provision of appropriate accommodation
- Ethnic monitoring and review of service use
- Greater provision of outreach services, such as health services
- Greater support for Refugees/Gypsies/Travellers/Women in accessing Local Authority services

The report notes that the extent to which services effectively meet the needs of BAME homeless people is one indicator of whether such services provide appropriate care for all communities. It also observes that BAME agencies provide ‘specialist provisions’ understanding the needs of communities they serve. This includes offering advice and information to explain the available services such as welfare benefits; translation services; support in finding accommodation; access to health services and employment; counselling; advocacy, and drop in sessions. The first two were shown to be the most popular services with BAME communities in Scotland.

Their in-depth review of agencies revealed that BAME organisations were perceived to be better at providing appropriate services for people from BAME communities due to their ability to recognise and respond to cultural and religious needs, such as dietary requirements. This was partly because these organisations were more likely to: employ more staff from BAME communities than other mainstream agencies; monitor the extent to which their services were used by BAME users; involve service users in decision-making processes in the organisation, and engage in multi-agency work involving a BAME component.

The Scottish Executive also outlined the most comprehensive strategy to date to ensure best practices specifically meet BAME homeless needs. They believe the crucial first step is for Local Authorities to engage in accurate problem assessment with BAME communities directly. They state:

- Information about homelessness services, housing options and rights should be accessible to the homeless in BAME community languages

• Homeless agencies must maintain constant awareness of the ‘hidden homeless’ and the subtle power of racial discrimination

• Self-monitoring should be in place with regular data reviews to help Local Authorities and agencies to revise and ‘tailor’ their services for the benefit of the BAME homeless

• Staff must be trained to communicate effectively at all stages of the allocation process

• The inclusion of BAME women should be made a priority for Local Authorities, rather than just dealing with the men in a family

• Local Authorities must consider how to offer real choices to the BAME homeless so that they are not settled in a few high deprivation areas

ROTA would also suggest that National Government could support Local Authorities in more concrete ways. For example, the Home Office should reform immigration legislation relating to the two year rule and access to public funds so that the BAME homeless are not intentionally excluded from accessing much needed public assistance.

Finding employment is a key route to escaping homelessness. Many homeless people claimed that they found jobs through word of mouth or with the assistance of VCS agencies. The report ‘No Home, No Job’\textsuperscript{108} confirms however, that to sustain employment opportunities there is a need to secure suitable accommodation; to ensure lower travel costs to and from work; to close the gap between benefits and wages, and to ensure people possess basic items like suitable work clothing.

Volunteering has also empowered many homeless people to find jobs and to develop confidence because they were able to build up their repertoire of skills before applying for paid work. As part of the broader TMD partnership the Homeless People and Volunteering project’s Report\textsuperscript{109} indicated that many pursued volunteer work not just because it increased their employability and self-confidence, but also widened their social circle.

**Forging stronger relationships between mainstream homeless organisations and BAME groups**

There is considerable scope for the development of partnerships between BAME groups and the homeless sector; support exists for this from within the sectors themselves.\textsuperscript{110} Responses from surveyed organisations reveal that homeless agencies generally have a wider range of partnerships than BAME organisations; half said that they were limited by their small size and limited resources. Research conducted by the Office of the Deputy Prime Minister (now Communities and Local  

\textsuperscript{108} Singh, P., No Home, No Job: Moving on from Transitional Spaces (Off the Streets and Into Work, 2005).


\textsuperscript{110} Tanner, S., ‘Linking Services for BME Homeless Individuals’.
Government on involving BAME Housing Associations in stock transfer and community development revealed the critical need for BAME and mainstream organisation partnership arrangements. Such partnership arrangements need to take account of the size, expertise, commitment, and leadership of partnered organisations to enable the most effective cooperation. Good practice examples of partnership working across the EU for tackling both general homelessness (and BAME homelessness specifically) are included throughout this section. Many show the need for working with service users.

In England and Wales, no specific studies have examined the links between the BAME and homeless sectors so there is a dearth of information. It appears that homeless agencies link with other homeless agencies and are less likely to report formal links with BAME (in contrast to BAME organisations who report more formal links with homeless agencies). Indeed, Scottish studies show that many BAME organisations work with homeless individuals within their own communities and have limited links with large agencies helping homeless clients. The lack of work examining these links might inhibit partnership working.

**Good Practice example 1: ‘Associació RAUXA’ (Spain)**

This project attempts to alleviate chronic homelessness by offering systematic treatment for addicts. RAUXA reaches out to the homeless on the streets and provides them with both temporary and permanent accommodation throughout an extensive addiction treatment and employment rehabilitation process.

**Good Practice example 2: ‘Centrum voor Dienstverlening’ (Netherlands)**

‘Client boards’ of homeless people sit alongside homeless agency officials in making decisions about how homeless services should be administered in this example of good practice. The Dutch government will not endorse homelessness policies without service users’ input.

There have been tangible efforts to link BAME and mainstream homeless organisations within England though. For example, the London Housing Strategy 2004 tasked the Greater London Authority and Shelter with developing a London Housing Advice Strategy to include a range of VCS partners alongside statutory and legal partners. The development process involved a mapping of housing advice services in London and a broad consultation including BAME organisations on the provision of housing advice. Gaps in provision for BAME individuals and BAME organisation information deficits were identified. Consequently, Shelter is working on a

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111 Hann, C. and Bowes, E., Black and Minority Ethnic Housing Associations and Their Involvement in Local Authority Stock Transfers (Office of the Deputy Prime Minister, June 2004).
113 Harrison, M., ‘Housing and Minority Black Communities’.
114 Netto, G., ‘Black and Minority Ethnic Communities and Homelessness in Scotland’.
project to improve access to advice for BAME groups and is also developing multi-platform services to focus on (BAME) young people.

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<th>Good Practice example 3: ‘Council for Socially Marginalised People’ (Denmark)</th>
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<td>The Council includes a formerly homeless person; a person who has suffered from mental illness; mental and physical health workers; and, service provider representatives. They prepare an annual report on the issues for the most marginalised groups in society and present proposals for improvements. It raises long-term awareness of needs as well as promoting a reasonable living standard, and participation in social and labour market activities.</td>
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<th>Good Practice example 4: ‘The Federal Service Users Initiative’ (Germany)</th>
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<td>This initiative has existed as an independent organisation for ten years and was formed by homeless people and represents the concerns of the homeless to the German federal government. Although the Initiative almost collapsed due to internal problems, it has managed to reformulate itself with professional help and now offers feedback on social policies in Germany and promotes increased communication between homelessness organisations and newspapers.</td>
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Based on the EU good practice examples described here, it is evident that participation of the homeless themselves is virtually written into law in many European countries. Direct participation has both helped improve key services for the homeless, and has empowered many homeless to take more initiative to improve their own circumstances, as they see that effort can lead to meaningful improvements.

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<th>Good Practice example 5: ‘Groundswell UK and Heartcare Ireland’</th>
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<td>By engaging people with experiences of homelessness to conduct research with homeless people, Groundswell provides skills development to the researchers, research based on empathy and understanding, and interviewees who felt they were able to get the views heard.</td>
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<tr>
<td>The Irish ‘HEART Project’ uses peer researchers to assess the effectiveness of homelessness services and the need for reform.</td>
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Simon Tanner in his research for ROTA’s project\textsuperscript{116} presents a plan for improving communication between BAME and homeless organisations, arguing for the creation of referral networks across urban areas like London so that individual organisations can easily follow a cross-sector referral protocol. A Partnership Development Brokerage could manage such cross-sector communication. The Brokerage should also continue development work with the Federation of Black Housing Associations to raise awareness of BAME homeless agencies and related groups. Such extensive links should enable services to better utilise available accommodations and to create more carefully orchestrated and comprehensive service provision.

\textsuperscript{116} Tanner, S., ‘Linking Services for BME Homeless Individuals’.
Increasing awareness of BAME homelessness and diversity

Various sources of education, information and advice are outlined below, which raise awareness of homelessness. The needs and diversity of BAME homeless individuals will need to be recognised if they are to be successful in delivering to all communities.

**The National Homelessness Advice Service (NHAS)**\(^{117}\): This is a partnership between Shelter and Citizens Advice funded by Communities and Local Government and launched in March 2007. The aim is to alleviate housing problems and prevent homelessness by providing timely and effective advice, and ensuring good practice is developed by Local Authorities. The service is offered to Citizens Advice Bureaux and 200 other frontline VCS agencies across England. NHAS aims to deliver a coherent, cost-effective national service with clear accountability.

NHAS\(^{118}\) has also committed to meet with every Local Housing Authority annually to gain a clear understanding of homelessness and prevention issues in the local area, promote good practice, seek to find solutions where problems have been identified and promote the adoption of local protocols between authorities and local agencies.

**The Public Legal Education Strategy Task Force (PLEAS)**\(^{119}\): As part of the Education, Information and Advice Strategy that involves all government departments and in line with the ‘Directgov’\(^{120}\) aim of developing better ways of working across government. PLEAS aims to develop a strategy to improve the coordination and delivery of public legal education, helping people to understand their rights and responsibilities. A key priority within the strategy is to help the most vulnerable people by making information more accessible. It provides general information and advice to service users on homelessness and evictions. The website is accessible for those who are visually impaired, and information is provided in English and Welsh.

**London Councils**: Bids were recently invited for £1,790,000 of funding per year for four years, by London Councils, to provide services to promote legal advice and services for BAME communities. The aim is to improve access to and the quality of advice for BAME, refugee and migrant communities, in the fields of welfare rights, housing, immigration and asylum, health, education, and employment\(^{121}\).

**Homeless London**: funded by Communities and Local Government and the Greater London Authority, this website was set up specifically to provide an online resource for people who are homeless in London. Amongst other services it provides information and advice\(^{122}\).

**Community Legal Service Direct (CLS Direct)**\(^{123}\): funded by Communities and Local Government and Legal Services Commission, the CLS Direct initiative provides an online resource and helpline offering advice and information in several languages.

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118 Online advice can be obtained at: [http://www.nhas.org.uk/](http://www.nhas.org.uk/)
120 See Directgov website: [http://www.direct.gov.uk/en/HomeAndCommunity/Keepingyourhome
evictionsandhomelessness/LosingYourHome/index.htm](http://www.direct.gov.uk/en/HomeAndCommunity/Keepingyourhome
evictionsandhomelessness/LosingYourHome/index.htm)
123 For further information go to [http://www.clsdirect.org.uk/index.jsp](http://www.clsdirect.org.uk/index.jsp)
in relation to a range of problems including housing, debt, education, employment and benefits support.

**Transport for London - Valuing People through Fairness and Inclusion Programme**: A course designed to give non-operational staff an insight into social identity issues such as faith, gender, disability, sexual orientation, and age that in the workplace has been set up by Transport for London. Although does not deal specifically with the BAME homeless, TFL runs a continuing campaign aimed at recruiting more BAME drivers to become licensed taxi and private hire drivers, some of whom are homeless.
ROTA INTERVIEWS WITH BAME HOMELESS INDIVIDUALS

In this chapter the findings of the interviews with the 16 homeless individuals who were involved in the research are reported. Some analysis is given, but a lot of the section is in the words of the interviewees themselves.

Causes of homelessness

Research participants reported several reasons for why they initially became homeless. The most common contributor given by approximately half the respondents was relationship breakdown. The majority of cases involved disputes with partners although family problems also played a role for several individuals.

The second most widely reported issue given by five of the sixteen research participants was drug use problems. Other influences included coming out of prison, crime, lack of available work and depression.

Most individuals provided multiple causes for becoming homeless which were often linked. Two cases were given where the trauma of relationship breakdown led to depression and drug use which in turn made finding work, and subsequently, permanent accommodation more challenging.

Some research participants described how they were evicted from the family household.

Filipino woman, aged 18

“I fell pregnant at the age of 16. My parents, who are devoted Catholics, did not support my decisions so therefore they decided I was to leave so as to learn from my mistakes as well as to gain responsibilities.”

Indian man, aged 35

“I got married to one girl who is a different religion to me and my family stopped being supportive because of difference in religion.”

In both cases, research participants described religion as being a fundamental factor.

Use of mainstream homeless and BAME organisations

At the time of the fieldwork, six participants were sleeping rough, (with a number of these accessing day centres); five were in hostels; three in supported housing; one was living temporarily with family and friends, and one individual was at a cold weather shelter. Thirteen out of the sixteen research participants had used or were using a mainstream homeless organisation. In contrast, only three out of the sixteen research participants had used the services of a BAME organisation.

Many research participants stated that they were not accessing BAME organisations offering homeless services because they did not know that such organisations existed. However, several survey participants stated that they would like more information on BAME organisations.
Since the vast majority of individuals surveyed had not used BAME organisations, there was little evidence collected on the quality of these services. Therefore, the following sections deal exclusively with research participant’s experiences of mainstream homeless organisations.

On average, research participants were moderately satisfied with the level of service in mainstream homeless organisations they had used, giving them a mean rating of 3 out of 5. Four survey participants gave examples of exemplary service in terms of the welcoming nature of staff, one to one support and the general quality of services provided.

<table>
<thead>
<tr>
<th>African man, aged 39</th>
</tr>
</thead>
<tbody>
<tr>
<td>“It is well run, welcoming and provides a diverse range of services that homeless individuals can partake in.”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Filipino woman, aged 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>“At this present time, I am in a great hostel for young people. It is temporary but there are support workers that help me to move on to more permanent accommodation.”</td>
</tr>
</tbody>
</table>

However, when participants were asked to list both good and bad experiences at mainstream homeless organisations they overwhelmingly chose the opportunity to report aspects of service which were less than satisfactory. Survey participants were most vocal about customer service delivery.

Many African and African-Caribbean men described poor relationships with frontline staff in many homeless organisations, stating they not care for their needs, held stereotyped perceptions of Black men and misinterpreted their behaviour and body language as ‘aggressive’ which often led to confrontation.

<table>
<thead>
<tr>
<th>Caribbean man, aged 45</th>
</tr>
</thead>
<tbody>
<tr>
<td>“In some respects it’s a culture thing: if you have two Black West Indian guys and they’re talking about a subject, I talk a lot with my arms and we’re very animated. So looking at the outside it could be deemed as an aggressive action that we’re doing but we’re not, we’re just talking.”</td>
</tr>
</tbody>
</table>

Several of the African and African-Caribbean men stated the behaviour described as aggressive, threatening and intimidating by frontline staff was none of those things but part of the ‘animated’ African and African-Caribbean male culture.

<table>
<thead>
<tr>
<th>African man, aged 39</th>
</tr>
</thead>
<tbody>
<tr>
<td>“The way Black people’s characters are, when we talk we use big hand gestures and we have big intonations in our voices and people feel threatened by that and we’re not threatening we just have a different way of expressing ourselves.”</td>
</tr>
</tbody>
</table>
One research participant described an unwillingness to engage in services provided by the accommodation providers due to strained relationships with frontline staff.

Several research participants reported that many frontline staff in homeless organisations were not making the effort to engage with them on a number of levels. The most significant concern was that staff did not empathize with their situation or care about them or their needs.

One solution to confrontational relationships between staff and Black service users, suggested by research participants, was cultural awareness raising so that frontline staff could learn about how to ‘deal with’ BAME clients and gain knowledge about their needs.

One man noted that the issue of tension between clients and staff not only reflected confrontation between White staff and Black clients. He reported instances in hostels where tension and stereotyped preconceptions occurred between African staff and African-Caribbean clients and vice versa.

Many of African and African-Caribbean men described a sense of anxiety over their future accommodation status. They expressed a concern that they would be evicted and that would mean starting again with a hostel place and an average of two years wait before accessing permanent accommodation. An important source of anger was that clients felt that warnings by staff were often unjustified and they could be evicted arbitrarily. A number of the African and African-Caribbean men reported being evicted from hostels following disputes with frontline staff. The most dramatic outcome of eviction was rough sleeping.

“People who work in a caring environment that just don’t care about me.”

“These people are ignorant to my needs and don’t want to make the effort to understand my needs.”

One research participant described an unwillingness to engage in services provided by the accommodation providers due to strained relationships with frontline staff.

“Black British man, aged 36-45

“In there, I’ve noticed it straight away. Any discussion and my voice might raise and when my voice raises, straight away: ‘You’re too intimidating’. It hasn’t been a problem before, why is it a problem in the centre?”

“(There is a) lack of understanding from service provider’s staff on how to deal with a BAME person without stereotyping the person with ‘you’re intimidating’ or ‘you’re aggressive’.”

“A lot of people won’t get involved in services because they feel they are being stereotyped that you’re gonna be too aggressive.”

“A Black British man, age 39

“People who work in a caring environment that just don’t care about me.”

“These people are ignorant to my needs and don’t want to make the effort to understand my needs.”

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“Black British man, aged 36-45

“Well, I am a veteran of this hostel game and am tired of the whole thing. I am slightly anxious as I do not wish to have to start all over again from scratch should I get evicted from my hostel for reasons not of my cause.”
Access to Information and Advice

The findings show that BAME homeless individuals had experienced difficulty accessing advice and support. Most significantly, the majority (11 research participants) had experienced difficulty accessing help and advice on training and just under half (7 participants) had found difficulties gaining help with employment. Moreover, over half of the individuals’ surveyed (9 people) had experienced difficulty accessing help and advice on benefits. Several research participants reported barriers to accessing hostel places due to difficulties providing evidence for benefit claims with some of these clients still sleeping rough.

A number of research participants reported that they had received inconsistent and incomplete information and advice from frontline staff. One complaint was that different members of staff would provide contradictory advice to clients. Another criticism was that certain staff could not answer queries fully, requiring clients to see several staff members before they could obtain complete information.

Accommodation

Most research participants had experienced problems with accommodation either at the centre they were using or from previous situations.

Many individuals were experiencing, or had experienced, difficulty accessing hostel places which had led to rough sleeping. These individuals reported serious mental and physical health problems and a pessimistic view as a result of living on the streets.

Other research participants described a number of barriers to gaining hostel places. One man reported how the effect of rough sleeping on the individual could provide multiple barriers to accessing hostel accommodation. He described how drugs were used as an escape from the hardships of living on the street. The need of buying food and drugs led to stealing and prison. The criminal record from a short prison sentence
left him ineligible to access hostels. Bail hostels were reported as counterproductive since they were an environment where drug taking was prevalent.

**Black British man, aged 39**

“It’s a vicious circle cause, okay, you’re homeless, you’re on the streets and obviously you might fall into drugs and drug use. You get caught (for stealing) and go to prison... If you’re in prison for under twelve months the government is not obligated to house you so therefore its straight back out onto the streets again.’

‘After a while they call you a persistent offender and they give you a big heavy sentence and they end up putting you in a bail hostel anyway. And at the bail hostel you find people using or criminal life so you end up in that rut again.”

Several research participants had experienced night shelters or hostels with poor and dangerous living environments; mainly due to the behaviour and actions of other service users at the centre. These problems included violence, drug use and poor hygiene. One woman was sexually assaulted at a night shelter causing her to view temporary homeless accommodation as ‘threatening’ and ‘dangerous’.

**Black British woman, aged 42**

“No structure or order, violent individuals. Hygiene: blankets were not cleaned, people ending up with illness, vomiting and stomach bugs. Needed to isolate an area due to this.”

**Mixed White/African woman, aged 46-55**

“I experienced more problems around sexual assault and rapes when I was homeless than when I was not homeless. I go to the night shelter and staff and homeless men ask you for sex.”

The majority of research participants in hostels reported a strong desire to access permanent accommodation. Key reasons given were that to live independently and have more privacy. Most individuals in hostels were frustrated with the long waiting time to access permanent accommodation

**Employment and Training**

All individuals surveyed stated that they were interested in securing employment. However, they reported barriers to achieving this such as difficulty accessing help and advice. In addition, many African and African-Caribbean individuals agreed that their ethnicity had influenced their job situation with one African-Caribbean man reporting that potential employers perceived black men as ‘work shy’ and ‘drug users’.

The majority of research participants stated that they were interested in educational training. However, the majority (11 participants) agreed that they had experienced difficulties accessing information and advice on training.
ROTA FOCUS GROUPS WITH BAME HOMELESS INDIVIDUALS

As with the previous chapter this section centres on the views of the homeless individuals involved with ROTA’s project and again it is based on the words of those who attended the focus groups, with some commentary to bring out some common themes.

Causes of homelessness

As with the individual interviews the focus groups reported relationship breakdown as the most common contributor to homelessness. For example, three teenage female research participants were forced to leave home due to deteriorating relationships with their parents.

Other common factors reported were drugs, crime, lack of work, depression and often individuals described the onset of homelessness as a series of connected events.

Jamaican man, aged 34

“For me and my situation, it was basically depression. Lost a job, lost family life and that’s where depression kicks in.”

Hidden Homelessness

Although the desk research for this project gave evidence that more BAME homeless people were living in overcrowded conditions with friends or family and therefore described as hidden homeless our respondents were not. The majority of focus group participants had in fact hidden their homelessness from people around them including family and friends.

Jamaican man, aged 34

“It’s embarrassing. People look down on you when you’re homeless. I’ve kept it hidden from lots of people. Mostly relatives, also when I was working I kept it from my employers as well.”

A number of African and African-Caribbean men were particularly vocal about the shame attached to being homeless felt by their parents. One man compared the shame associated with telling his parents he was homeless to ‘the time the police came to the house looking for me’.

Use of BAME & mainstream homeless organisations

The vast majority of focus group participants had not heard of or used BAME organisations for support. Many attributed their lack of knowledge of BAME organisations to the lack of promotion of these services.

Black British man, aged 39

“Even in the hostels there’s no fliers or information, or in the day centres.”
The majority of research participants felt that accessing BAME organisations was important as such services would be well placed to understand the needs and experiences of BAME individuals. Many individuals felt that they would be able to relate better to someone from their own background due to shared experiences. Men from African and African-Caribbean backgrounds were particularly vocal about this issue feeling it might counteract the discrimination they were facing from staff in mainstream homeless organisations.

Filipino woman, aged 18

“If there was an organisation that was mainly aimed at ethnic minorities it would make them feel more comfortable... because where you have people of your own race having the same situation as you, you can either understand them better or you can relate to them more.”

Across the three focus groups, participants provided examples of exemplary support and help at homeless organisations. Individuals particularly valued client-centred services, good one to one support, services covering a wide array of needs and sympathetic staff.

Mixed/Asian woman, aged 19

“We have once a month key working sessions. They go over any emotional support if I need to talk about anything. They are also trying to help me financially... They also help me with ideas and information on courses and other information. They are very, very good and helpful.”

However, most focus group participants were also able to report negative experiences of homeless organisations they had used. The most common source of dissatisfaction centred on issues of customer service and relationships between staff and clients.

Asian woman, aged 18

“Just a bit of customer service, every company should have that really, that’s just standard. That’s the expectations from customers, but you don’t get that in the homeless service.”

As reported in the previous chapter men of African and African-Caribbean heritage reported that they were being stereotyped and victimised by frontline staff in many mainstream homeless organisations as ‘aggressive’, ‘threatening’ and ‘lazy’. This led to frustration and anger from the service users and at times confrontations with staff.

Two Black British men, aged 39

“I feel that they’ve already painted a picture of us from when we first went into the hostel as being predominantly Black – you’re going to be aggressive, you won’t engage, you’re probably lazy…”

“...you’ve got drug issues, been in prison, that sort of stuff.”

Research participants were clear to point out that the issue of staff stereotyping clients was not exclusively a phenomenon between White staff and Black clients but occurred between individuals from different BAME groups. One individual described tensions
between African and African-Caribbean individuals in the community being evident between staff and clients in homeless accommodation. He felt that African staff at an accommodation provider he had used viewed African-Caribbean’s as ‘lazy’ and did not take their attempts to improve their situation seriously.

Mixed Caribbean / White man, aged 19

“The hostel that I’m in now: most of the staff are Black people but they’re still looking at you in the wrong way. They’re looking at you like; ‘He’s from probation, he must have a criminal record’, they see my friends covered in baseball caps and automatically: ‘well, you must be carrying a gun.’”

Many focus group attendees stated that shared experiences and backgrounds were important factors in enabling staff to relate to clients, regardless of the ethnic group of the individual. One individual went on to described how he would like to be treated by staff in homeless organisations.

Nigerian man, aged 39

“The problem is not just with white staff but people from different backgrounds, when you get an impasse they retreat to their fixed opinions and stereotypes of you.”

“It’s that appreciation of don’t judge an individual by some preconception… It’s about respecting the individual, seeing people as an individual and not as some homogenous group.”

Empathy and understanding the needs of BAME homeless individuals

Many African and African-Caribbean men reported that staff in homeless organisations were not able to relate to them since they lacked understanding of the experiences and needs of BAME homeless individuals. They suggested that staff awareness of BAME homeless issues would improve services and might help to lessen stereotyped ideas of them.

Research participants from all ethnic backgrounds reported examples of staff in mainstream homeless organisations who were generally unwelcoming and unresponsive to meeting the day to day concerns and needs of the clients and lacked empathy for the difficult and distressing circumstances and situations homeless clients had experienced. One incidence involved a young Asian woman being told by a homeless service provider that she should: ‘just have a child and be done with it to get a roof over my head’.

Filipino woman, aged 18

“It would helpful if they could act more useful, or seem more useful and helpful and happier, and if the atmosphere was more of a happy atmosphere the homeless people would relate more to the staff.”
Mixed/Black man, aged 19

“I was speaking to one of them and said ‘I haven’t got any food’ and they said ‘Why don’t you go back to your mum?’ and I was thinking to myself – my mum put me in care, obviously I can’t go back to my mum... There was no sensitivity there.”

The most direct problem stemming from poor relationships between staff and clients discovered in the fieldwork was eviction from hostels. These cases mostly involved African and African-Caribbean men who felt that staff stereotyped and responded to them as ‘trouble makers’.

Another indication of poor working relationships between staff and clients was unwillingness on the part of service users to approach staff for help and engage in services provided at the homeless organisation. One man described an ‘us and them’ attitude between staff and clients and a young woman uncomfortable about divulging personal details about her pregnancy missed out on help she needed.

Nigerian man, aged 39

“Due to the ‘them and us’ attitude, when it comes to them wanting us to engage in services we think ‘forget about it’! It makes you suspicious to opening yourself up.”

Filipino woman, aged 18

“It’s a personal thing telling them about your background and what’s been going on so it would be much more appropriate if they could be more welcoming. . . it makes you feel a little bit intimidated, threatened maybe, and it holds you back from telling the staff a whole load of things that should be said. It was difficult for me to tell them I was pregnant, I was 16, it wasn’t a nice thing.”

Accommodation

The most significant consequence of being unable to or waiting to access hostel accommodation was sleeping on the streets. One Lithuanian focus group attendee was sleeping on the streets since she was not eligible for access to state benefits to pay for a hostel place. Her poor English language ability made it difficult for her to access employment opportunities to help her pay rent on alternative accommodation.

A number of attendees described bureaucracy as a key barrier in gaining prompt access to hostel places. In particular, individuals were frustrated with the difficulty of providing evidence to support benefit claims for hostel accommodation or, supplying evidence to Local Authorities to gain eligibility for access to accommodation. A typical complaint was the length of waiting incurred whilst their eligibility for hostel accommodation was being assessed.
Mixed / Asian woman, aged 19

“The local homeless unit didn’t help me because I didn’t have a letter from my landlord explaining that I was evicted. My landlord was living in Scotland at the time and we were in very bad circumstances. I explained this and they said that there was nothing they could do for me.”

Many focus group attendees reported issues with the living environment in hostels. They described a poor atmosphere in hostels due to poor relationships between clients and staff. Black African and African-Caribbean men reported a breakdown in communication with staff in certain hostels.

A number of individuals, mainly women, strongly felt that they had been placed in hostels with an inappropriate mix of clients. One research participant, who entered a hostel at the age of 16, felt that the was not appropriate accommodation and that the Local Authority had a duty to care for her and other young people and protect them from exposure to drug dealers, drug users and ex-convicts. In particular, these individuals were concerned that they could have been tempted into adopting drug use and other illegal activities.

Filipino woman, aged 18

“There were drug dealers and drug users as well, all sorts of drugs like crack cocaine… that could have led me astray, I could have gone down the wrong path if I wasn’t smart enough, but luckily I was smart enough not to.”

African / Portuguese woman, aged 21

“The hostel I was in; there were alcoholics, prostitutes, young people and everyone together. Like, don’t you think that all these people are going to end up smoking (drugs) because information gets passed so quickly.”

A few participants felt that the state of repair of their hostel accommodation was unsatisfactory. Individuals explained that they would constantly remind staff about problems with their accommodation and, even then, they would have to wait an unreasonably long time to have repairs implemented.

Black British woman, aged 19

“I complain to them all the time and they say they’re going to put it in the book but even my bathroom we haven’t got any window. We haven’t got a light in there… Even our boilers have gone down… We complained about that for weeks before they even gave us temporary heaters.”

Employment, Education and Training

Research participants were divided into two groups when asked about their main priority for the future. On average, the group that cited their main priority as securing a job consisted of individuals who were already in temporary accommodation or supported housing. Many who reported securing accommodation as their main priority (and employment as their second priority) were sleeping rough.
Research participants had attended a variety of courses and vocational training programmes/placements. Almost all had either volunteered at a homeless organisation in the past or were currently a volunteer. A number had also been, or were currently, on a work placement. One individual was on a homeless organisation training programme.

Those who had volunteered at homeless organisations or were currently volunteering described the value of the placements in terms of helping people who are in the same situation to them or to what they had been in. They also described volunteering as a means of ‘giving back’ to the community.

Black British man, aged 40

“I work for a homeless place in Stratford handing out food… I’m now working for somewhere that I used to use and it makes me feel better about myself, I’m giving something back to the community.”

In terms of employment, research participants described ‘jobs’ as a means of financially supporting themselves. However, when individuals spoke of longer term career aims they expressed a desire to work in skilled and satisfying positions related to their interests. One was on the way to realising his ambition to become a support worker at a homeless organisation by gaining a place on a training programme run by his hostel.

Black British man, aged 36-45

“They want to train former residents to become staff, so I’m on that programme…I enjoy helping people so I just want to develop to my full potential on that”.

Two other research participants were pursuing careers in the caring profession by applying for educational programmes with day release on the job training.

Two research participants had degrees from their home countries, although one of these had had to retake his degree in England since his qualification was not accepted by employers. However, the majority of focus group attendees had either GCSE level qualifications or no qualifications. Low levels of qualifications were seen as a barrier to employment, and several people were aiming to overcome these restrictions. One individual was able to take a degree in accounting and finance by entering through an access year. Other research participants were applying for university places with access years from information provided by ROTA.

Client involvement in shaping policy

The majority of focus group participants reported that they would value an opportunity to contribute to shaping policy and expressed an enthusiasm to become involved, especially in hostels. Focus groups and discussion groups were identified as good ways for them to participate and influence policy. Participants said that they had enjoyed the experience of taking part in the focus groups and would like to do it again. A few research participants had taken part in client participation opportunities with service providers. However, these individuals reported concerns about ‘tick box’ style consultation in homeless organisations which did not fully capture their needs and concerns.
The graph shows that over one third of London mainstream homeless organisations surveyed in the fieldwork had between 26 - 50% of clients who were from BAME groups with another third of organisations having over 50% of BAME clients.

**Links between BAME and mainstream homeless organisations**

1. **Main sources of referrals**

BAME and mainstream homeless organisations reported several referral sources. Local Authorities were the most common source of referrals for mainstream homeless organisations, followed by homeless agencies and then self referrals. BAME organisations reported self referral as the most common source of referrals closely followed by Local Authorities.

Local Authorities were reported as the main source of referrals in over half of mainstream homeless organisations surveyed, but only in one fifth of BAME organisations. One consequence for BAME organisations without Local Authority referral links is the inability to access Supporting People funding. Funding was a prime concern for BAME organisations surveyed in the fieldwork.

2. **Referral links with BAME organisations**

BAME organisation managers made much more use of homeless organisations as referral sources than vice versa, with 19% of their responses including hostels and day centres, housing associations and other homeless agencies.
Table 2: Main Sources of Referrals for BAME Organisations in Survey

<table>
<thead>
<tr>
<th>Sources of referrals</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self referral</td>
<td>22 (25%)</td>
</tr>
<tr>
<td>Local Authority</td>
<td>20 (22%)</td>
</tr>
<tr>
<td>Other</td>
<td>10 (11%)</td>
</tr>
<tr>
<td>Housing Association</td>
<td>8 (9%)</td>
</tr>
<tr>
<td>Outreach</td>
<td>7 (8%)</td>
</tr>
<tr>
<td>BAME organisation</td>
<td>6 (7%)</td>
</tr>
<tr>
<td>Hostels &amp; Day Centres</td>
<td>5 (6%)</td>
</tr>
<tr>
<td>Employment service/Jobcentre plus</td>
<td>5 (6%)</td>
</tr>
<tr>
<td>Other homeless agency</td>
<td>4 (4%)</td>
</tr>
<tr>
<td>Mainstream training provider</td>
<td>2 (2%)</td>
</tr>
</tbody>
</table>

In contrast, mainstream homeless organisations took significantly fewer referrals from BAME organisations. When mainstream homeless organisation managers were asked about the sources of clients referred to them, only 7% of the total responses included BAME organisations.

Table 3: Main Sources of Referrals for Mainstream Homeless Organisations in Survey

<table>
<thead>
<tr>
<th>Sources of referrals</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Authority</td>
<td>39 (25%)</td>
</tr>
<tr>
<td>Other homeless agency</td>
<td>24 (15%)</td>
</tr>
<tr>
<td>Self referral</td>
<td>23 (15%)</td>
</tr>
<tr>
<td>Outreach</td>
<td>20 (13%)</td>
</tr>
<tr>
<td>Hostels &amp; Day Centres</td>
<td>19 (12%)</td>
</tr>
<tr>
<td>BAME organisations</td>
<td>11 (7%)</td>
</tr>
<tr>
<td>Housing Association</td>
<td>7 (5%)</td>
</tr>
<tr>
<td>Other</td>
<td>6 (4%)</td>
</tr>
<tr>
<td>Employment service/Jobcentre plus</td>
<td>4 (3%)</td>
</tr>
<tr>
<td>Mainstream training provider</td>
<td>2 (1%)</td>
</tr>
</tbody>
</table>
3. Demand for links between BAME and mainstream homeless organisations

Despite the existing modest level of referral links between BAME and mainstream homeless organisations, both agencies were overwhelmingly enthusiastic about increasing partnership building between the two parties.

84% of mainstream homeless organisations surveyed agreed that they would like links with more BAME organisations.

96% of BAME organisations surveyed agreed that they would like links with more BAME organisations. The types of partnership arrangements wanted by organisation managers in the fieldwork can be broadly divided into awareness raising, information and service provision/referral links.

4. Awareness Raising Links

The majority (68%) of mainstream homeless organisation managers agreed or strongly agreed that their organisation knew a lot about BAME homeless issues. Only 12% of organisations reported that they did not know a lot about the issues. Less (48%) of BAME organisations reported to know a lot about BAME homeless issues and a significant number (34%) reported to not know a lot about them. The findings perhaps reflect the fact that most BAME organisations surveyed in the research were not specialist homeless agencies and catered to a client base which was weighted towards non-homeless individuals.

A common theme amongst managers from BAME organisations was the need for information on general and BAME homelessness. In particular, managers wanted to know about the issues, research and policy. Many welcomed information sharing links with mainstream homeless organisations and Local Authorities to bridge gaps.

The fieldwork also revealed a need from many mainstream homeless organisations for guidance on BAME homeless individual’s needs. On average, managers rated their satisfaction of the organisation’s awareness of BAME homeless individuals needs as between 3 and 4 out of 5 (where 1 is poor and 5 is excellent). However, almost all interviewees thought that having BAME awareness was important for their business.
Many BAME and mainstream homeless organisations suggested that they could offer each other training to raise awareness of the needs and issues for BAME homeless individuals. Over half of mainstream homeless organisations stated that they would like to receive training on BAME homeless individuals; moreover many BAME organisation managers reported their enthusiasm for training on homelessness.

**Figure 3: BAME Organisations’ Awareness of BAME Homelessness Issues**

<table>
<thead>
<tr>
<th>My Organisation Already Knows a Lot about BAME Homelessness Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
</tr>
<tr>
<td>No. of Organisations</td>
</tr>
</tbody>
</table>

5. Information Links

Both BAME and mainstream homeless organisation managers surveyed were enthusiastic about gaining information on each others agencies as a means of initiating the first stages of partnership working.

**Figure 4: Mainstream Homeless Organisations Wishing to Link with BAME Organisations**

<table>
<thead>
<tr>
<th>My Organisation Would Like More Information about BAME Organisations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
</tr>
<tr>
<td>No. of Organisations</td>
</tr>
</tbody>
</table>
6. Contact information

BAME and mainstream homeless organisation managers were enthusiastic about getting into contact with each other as a precursor to initiating partnership building. Most mainstream homeless organisations reported that they would like a directory of BAME organisations. Likewise, many managers from BAME organisations wanted to receive a directory of homeless organisations.

7. Information on services

Many managers of mainstream homeless organisations reported that, in addition to contact information on BAME organisations, they wanted to know about the services provided. In general, mainstream homeless organisations were more vocal about finding out about what specific services BAME organisations offered than vice versa. This perhaps reflects a knowledge gap of what a BAME organisation does and can do. Mainstream homeless organisation managers were keen to establish information sharing links; wanting to know how BAME services could benefit their own clients.

8. Funding information

Funding was reported as a significant issue for many BAME organisations. Managers suggested that mainstream homeless organisations could aid BAME organisations by providing information on funding sources. One method of achieving this aim, suggested by one BAME organisation manager, was a forum on sources of funding and methods for attracting funding.

9. Service provision/referral links for vulnerable clients

Many mainstream homeless organisations were interested in accessing BAME services catering to a particular vulnerable BAME client group including teens and young people, ex-military personnel, individuals with alcohol problems, migrants and clients with language difficulties. These partnerships were often described in terms of referral links.

In addition, fieldwork with BAME homeless individuals revealed some believed there were poor relationships between African and African-Caribbean men and frontline staff in many mainstream homeless organisations, resulting in confrontations and
eviction. One research participant suggested that BAME organisations would be well placed to represent BAME individuals and provide an arbitrator role by intervening in disputes.

10. Developing links

Some mainstream homeless organisations reported that they were restricted in setting up referral links with BAME organisations since they had to take a high proportion of Local Authority clients under Supporting People arrangements.

Several BAME organisation managers reported difficulties with funding. Indeed, funding was the most prominent theme when managers where asked about what additional support they would like. Lack of funding was described as acting as a barrier to partnership building due to the high costs of some forms of networking, for example, attending conferences.

A number of BAME organisation managers suggested partnership funding between mainstream homeless and BAME organisations as one way of increasing the probability of successfully attracting funding.

Almost all survey participants welcomed a directory of organisations, with contact details, as a first stage in initiating contact with external agencies. Managers proposed several awareness raising methods to find out about services provided by other organisations including web-based information, presentations and visits. Newsletters and conferences were cited as suitable methods for gaining awareness on the needs and issues for BAME homeless individuals.

Managers of many smaller BAME organisations described barriers in networking through attending outside events since limited staff numbers made it difficult to free managers from the office. Therefore, BAME organisations were more likely to mention communicating through electronic means than face to face encounters. One form of low cost networking for smaller organisations cited by one respondent was e-mail forums.
CRITICAL ANALYSIS AND RECOMMENDATIONS

Critical Reflections

There is much that can be done to improve the delivery of services to meet the needs and aspirations of BAME homeless individuals in London. This report (also see Annex I) outlines many examples of good practice in developing policy and providing practical support.

However there is a need for a more consistent approach to provision that will enable more BAME homeless people to gain successful outcomes in terms of housing and employment. BAME homelessness is not just an issue for BAME communities and the sector that was set up to serve them. It is also an issue for mainstream homeless organisations, whether frontline or infrastructure, decision makers and policy makers as well as individuals.

Diversity and multiple identities / disadvantage: The BAME homeless are not homogenous and this research shows that issues for BAME people who are also refugees, from Traveller and Gypsy communities, and / or women, for example need to be recognised. The situation for refugee women fleeing domestic violence is particularly difficult where they have no recourse to public funds. Information written in community languages can be helpful, but as literacy may be an issue outreach and interpreters may also be needed. Differing cultural needs and aspirations are described throughout this report. A nuanced approach is needed to see the issues in full. For instance, as highlighted in a recent review of evidence on the housing needs of Irish people in London, while lower income Irish people of all ages are likely to encounter housing problems (in common with other low-income Londoners), the special needs of Irish people are increasingly likely to be concentrated among middle-aged and older Irish people who have lived and worked in London for many years. Many would prefer and would benefit from schemes which provide culturally sensitive support as well as of acknowledgement of nationality as a factor that can define both the demand levels and as well as the appropriateness of homelessness services.

Individualised Homeless Services based on the human rights principles of dignity, fairness, respect and equality: ROTA’s research with people using services and with providers from both the mainstream and BAME sectors alongside the desk research suggests that there is a need for both provision based around peoples homelessness and their race and nationality. Homeless individuals spoke about the significance of providing them with a service that treats them ‘as individuals’, ‘as human beings’. Service provision that is not compatible with the dignity and respect an individual holds is not a service at all. Again, these standards should not be contingent upon someone’s nationality, race or background; where a public authority is concerned existing provisions (e.g. Race Relations Act, Human Rights Act) should be engaged to protect those in need particularly those who find it difficult to speak up for themselves and are most vulnerable.

Linking BAME with Mainstream homeless organisations: ROTA’s project illustrates that there is considerable scope for further development of partnerships

between BAME groups and the homeless sector; support exists for this from within the sectors themselves. Responses from surveyed organisations reveal that they wish to link up on the areas of awareness raising, information, referrals and service provision. In particular, BAME organisations that worked with mainly non-homeless individuals stated they would like to be able to access more information on the needs of homeless individuals and services available in the mainstream. Mainstream organisations were keen to find out what services the BAME sector offered and whether referrals were possible for BAME clients with particular vulnerabilities such as alcohol use. It was noted that the need for mainstream homelessness agencies to take referrals from Local Authorities through Supporting People arrangements meant they were restricted in setting up referral links with BAME organisations. Both sectors felt a directory of organisations would be useful and so ROTA has produced one.

The success of a holistic approach to services in both the BAME sector and the mainstream is evident throughout this work. Many BAME homeless individuals have multiple needs and face discrimination in a variety of areas. Approaching the key issues of employment, health and housing without seeing the links will lead to further exclusion of those most in need of help.

**BAME Services**: In terms of specialist BAME agencies, only three of the research participants had accessed BAME VCS organisations working with the homeless. The majority had not known that such services existed but felt that these organisations would make a difference to their situation. The work carried out in Scotland, and elsewhere noted that BAME agencies were perceived to be better at providing appropriate services for people from BAME communities due to their ability for instance, to recognise and respond to cultural issues, such as dietary needs, religious and gender preferences, and the increased level of staff from BAME communities who were able to empathise with the service users situation.

One African-Caribbean respondent described receiving unfavourable treatment from some African frontline staff. More detailed work would need to be done to see how wide this phenomena is as it would impact on whether single community rather than broader BAME services would be felt to be most appropriate and if so under what circumstances.

One of the points raised by BAME organisations is that of the historic and continued under resourcing of the BAME VCS which prevents it delivering in the way it would wish to.

**Mainstream Homeless Services**: The research participants described their experiences of mainstream provision as both good and bad. Many of the African and African-Caribbean male research participants described a poor relationship between themselves and the frontline staff in homelessness organisations, reporting that staff stereotyped them as aggressive. It was also noted that as in other areas of employment, few senior members of staff were from BAME backgrounds.

**Hidden Homeless**: This report has highlighted the difference between White British and BAME experiences of homelessness. Many of the latter would be perceived as hidden homeless as they spent time staying in overcrowded conditions with friends or

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125 See ‘Preventing further BAME Homelessness’, p. 40.
relatives rather than sleeping on the streets. Overcrowding can also have severe consequences in terms of mental and physical health outcomes\textsuperscript{126} that make it harder for those in the situation to gain appropriate accommodation and employment. By not acknowledging the vulnerability of the hidden homelessness, BAME individuals are not being seen as vulnerable or a priority in terms of research, policy, services and resource allocation.

**Service user involvement:** The need to involve homeless individuals was a key tenet of the broader Equal TMD project that this research was linked to. The good practice examples described in this document show how this has both helped improve key services for the homeless, and has empowered many to take more initiative to improve their own circumstances. It is important to make an effort to understand the cultures of service users to ensure they feel empowered to engage. ROTA’s project illustrates that users can also influence policy relating to service delivery in order to make it more appropriate.

**Influencing policy:** London’s governance is complicated. As this report details, there are European, national, regional and local bodies that produce policies, initiatives and services that impact on London’s BAME homeless individuals. Future research and work to engage with policy makers will need to take into account the findings of this report. Everyone will need to work to ensure that Supporting People, the Mayor’s housing and health inequality strategies, and other such initiatives are aware of and supportive of the needs of all.

**Key Recommendations**

1. **Developing Partnerships:**

   i) The need and desire for BAME and mainstream organisations working with BAME homeless individuals to work in closer partnership can be partly supported by this projects work. ROTA’s toolkit (Annex II), best practice examples (Annex I), film and directory of organisations (Annex V) can help with the initial development of such partnerships.

   ii) There also needs to be support to allow equitable partnerships to develop allowing full engagement of the usually much smaller BAME organisations.

   iii) What could complement ROTA’s work is a pan-London network that could act as a broker between BAME and mainstream homeless organisations. The network should help ensure that the directory is accessible and kept up to date; encourage partnership working and increase awareness of services among clients. It could also continue development work with the Federation of Black Housing Associations to raise awareness of BAME homeless agencies and related groups.

2. **Diversity and mobility of BAME homelessness:**

   i) The BAME homeless constitute a very mobile group. A particular community (e.g. people from Eritrea or Sri Lanka) may be highly represented in the

\textsuperscript{126} See ‘The Uniqueness of BAME Homeless’, p. 21; and, ‘Main Barriers to Homeless Support’, p. 25.
homelessness population within a particular area, but this may not be the case in a neighbouring borough. Moreover, as newer communities arrive, BAME individuals who may be considered as highly represented in homelessness numbers may cease to be so within short periods of time. Therefore, there needs to be an acknowledgement of the significance of locality and the provision of support to organisations working at the neighbourhood level.

Further examples of groups with specific needs within the broader BAME category include:

ii) **Refugee and Asylum Seekers (RAS) and Migrants**: While this report did not have a remit to cover specific issues relating to RAS communities, London’s RAS and Migrant communities are a key component of the broader make-up of London’s BAME community. It is important that mainstream and specialist initiatives take into account their needs and link them to the Mayor’s Strategy on Refugee Integration currently being developed, specifically its proposals on housing.

iii) **Gypsies and Travellers**: Gypsies and Travellers face particular discrimination in terms of housing provision and have specific needs. Specialist Gypsy and Traveller organisations should be supported to carry out work with the statutory sector in regard to issues such as the provision of better facilities; more affordable electricity and heating, and assistance in the repair of caravans.

iv) **Irish Homeless**: As noted, a high proportion of older hostel residents of Irish origin have become institutionalised. Permanent housing schemes are therefore needed which provide continuing support. There is also a role for specialist provision, for those living in poor conditions in the private rented sector. This might include befriending schemes drawing on Irish volunteers.

v) The research also suggests a lack of London-wide or borough data on Irish Travellers and ex-offenders. Data collection and further research on the special needs of these groups is recommended.

vi) **Women**: Service provision for BAME homeless women must be highly specialised and well-orchestrated to prevent them falling between the gaps. Outreach, advice and support should be provided, particularly in terms of domestic violence and refugee women. This should recognise that female counsellors from their own community may be best placed to meet the need and that refuge places are essential.

3. **Ethnic monitoring and evaluation**:

    i) Mainstream VCS and statutory organisations need to monitor the outcomes of their services in terms of race and nationality. Monitoring followed by evaluation allows the development of services to meet identified needs and gaps in provision. Where a public authority is involved, this recommendation should be linked with their statutory obligation under the Race Relations (Amendment) Act.
ii) Organisations should consider using as broad a range of categories as possible so as to understand the true diversity of the BAME groups in London they are serving and how their services impact on users. Irish people, for example are often categorised under the ‘White’ and their specific issues can go unnoticed.

iii) Internal processes should also be monitored to ensure staff throughout an organisations structure reflect London’s population and the clients it serves.

4. **Accessible advice**: Information on housing, education, health and employment needs to be made available in accessible formats in non-discriminatory ways. This will include using trained staff and specialist BAME organisations that understand the issues; email briefings and bulletins; BAME media and networking. Information may need to be available in a variety of community languages, or translation and interpretation services made available for those both literate and unable to read. A recent response by ROTA to the consultation on the Mayor’s Health Inequality Strategy stated that advocacy (even more so that translation or interpretation services) allowed people to help shape as well as obtain public services.\(^{127}\)

5. **Cultural sensitivity and human rights training**: To ensure the needs of all BAME homeless individuals are met, cultural and human rights training for staff in both mainstream and statutory services is needed. The new Equality and Human Rights Commission should work with public service providers that have a role in addressing homelessness and unemployment to encourage such training. This recommendation should be linked with the annual audits carried out by the existing regulators and commissioners such as the Audit Commission, the Healthcare Commission and the Commission for Social Care Inspection.

6. **Hidden homelessness**: All those working to develop and provide services need to take into account that BAME homeless individuals are more likely to be ‘hidden homeless’ rather than ‘street homeless’ and ensure their needs are reflected in the work.

7. **Outreach work**: BAME organisations need to engage in more outreach to ensure that BAME homeless individuals are aware of the support they can provide. This will need to be properly resourced to be effective.

8. **Homelessness Training**: Targeted information and training for BAME organisations on the needs of homeless individuals and services available in the mainstream homelessness and statutory sectors is critical to developing effective referral networks.

9. **Funding**: BAME organisations need information on and access to funding in the homelessness sector in order to engage more fully in providing services directly and working in partnership.

10. **Combining housing, training and employment initiatives**: A holistic approach to training, employment and housing would enable more homeless BAME

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\(^{127}\) Gavrielides, T., ‘Developing the Mayor’s Health Inequality Strategy’.  

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individuals to tackle the discrimination they face in all these areas and succeed in maintaining a home and job in the longer term. For instance, as money is being spent on housing estates and neighbourhoods to meet the Decent Homes Standard, it is hoped that this spending will be broadened to support the creation of local jobs, community-owned businesses, and increase the skills base of local people. Access to new jobs and capacity building for local tenant groups are a part of one such initiative called ‘added value’ and ‘housing plus.’ It is essential that BAME homeless individuals are empowered to get involved in such initiatives.

11. **Volunteering:** The critical role volunteering can play not just as a route to employment opportunities, but in building self-esteem for individuals, should be raised and more widely promoted as an option for homeless people. Linking homelessness agencies with volunteering brokerage agencies would ensure greater access to voluntary work for BAME homeless people, who may also wish to volunteer specifically within BAME communities.

12. **Improving health:**

i) The particular mental and physical health needs of BAME homeless individuals need to be addressed in service provision. The effective promotion of equality polices within the health services sector is critical to combating discriminatory procedures and assessments, particularly with regard to the treatment of homeless BAME individuals.

ii) As ROTA noted in its recent response to the consultation, the Mayor’s Health Inequality Strategy currently in development provides a unique opportunity to tackle this persistent inequality affecting one of the most vulnerable groups in London.

13. **Service user Involvement:** It is imperative that all homelessness work - frontline delivery, service planning and policy design has the involvement of homeless and ex-homeless BAME individuals to ensure their needs and aspirations are being met.

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131 Gavrielides, T., ‘Developing the Mayor’s Health Inequality Strategy’. 
ANNEX I: BEST PRACTICE EXAMPLES

The following best practice examples outline various types of partnership working:

- Referral links: provision of services to clients from other organisations
- Meeting the needs of clients from external organisations
- Referral links: referring in-house clients to other organisations
- Awareness raising links: gaining information on services offered by other organisations and guidance on best practice
- Partnership working on the development of policy programmes

Cardboard Citizens – Helping the Homeless through performing arts

Nigel Lavender, General Manager, described his organisation’s unique method for establishing links with homeless organisations and providing referral services to their clients. Cardboard Citizens is the UK’s only homeless people’s professional theatre company. The organisation engages with homeless individuals through staging productions performed by homeless and ex-homeless actors in hostels and day centres. The shows address issues facing many homeless individuals including drugs, mental health, alcohol abuse and how to get back into work. After the performance, trained mentoring actors talk to the audience and invite them to attend performing arts workshops run by Cardboard Citizens and arrange one-to-one follow up meetings. 40-50% of these clients are from BAME backgrounds. These workshops teach valuable soft skills essential for employment; communication, team work and leadership. In addition, individuals are offered referrals to partner services covering training and employment, voluntary placements, general health needs and addictions.

Although most homeless organisations will not have the ready resources and expertise to engage with homeless clients from other organisations through performing arts, the Cardboard Citizens model offers transferable principles.

- Clients are engaged in a relaxed, informal and non-threatening environment
- They are free to fully express their issues and concerns to mentors who can empathize with their needs through experience or at least have a clear understanding of the issues
- Clients are inspired by the workshops which in turn increases their motivation to remain on the programmes offered
- There is an emphasis on building confidence and learning the soft skills of effective communication, team work and leadership to prepare individuals for employment
- The organisation is proactive in establishing links with external agencies which can provide quality support services

Cashel Gormley, Project Assistant, described how Cardboard Citizens refers BAME clients to BAME organisations, methods for gaining awareness of potential partner agencies and gave examples of best practice for organisations accepting client
referrals. The first stage of engaging with clients is through an in-depth one to one meeting where individuals talk about their aims for the future and any issues they are experiencing. Based on this information, clients are able to be referred to the most appropriate agencies; most commonly these are employment and education services. Methods for gaining information on services offered by other organisations include open days and websites. Open days are a valuable source of information since visitors are able to personally experience how the services operate and their quality. Websites are a time effective method of gaining information but the quality of the site makes a difference. It is important that the website provides in-depth information on the services offered by the organisation otherwise it is not possible to gauge the value of the agency for the client. Finally, when considering which organisations to refer clients to, Cardboard Citizens looks for agencies which are easily accessible and welcoming. Favoured attributes include drop-in times and regular open day events. It is also beneficial if clients who may be feeling vulnerable or are visiting a service with mental health problems are able to access organisations with a welcoming, informal atmosphere.

Irish Centre Housing – Supporting homeless Irish people

Aiden O’ Kane, Housing Services Manager, described how his organisation uses information and awareness raising links to gain knowledge on best practice and gave an insight into how they meet the needs of BAME clients referred to them from other organisations. Best practice information was gathered from meetings with other homeless / BAME organisations and through internet resources. Guidance from agencies is most relevant when it is being supplied by organisations with a similar remit and of a comparable size and Irish Centre Housing has been proactive in seeking partnerships with such organisations. Regular scheduled meetings ensures that organisations are kept up to date with best practice developments, however close working partnerships also enable members to consult each other on an ‘ad-hoc’ basis when advice is needed on a specific topic. The internet and e-mail is also used. These resources can offer high quality information; BME Spark, Homeless Link and St Mungo’s were noted as exemplary suppliers of best practice. However, although information from web sites offers convenience there are occasions when the guidance is generic and not specific to the organisation’s clients. For this reason a dual approach to gaining best practice information using both electronic resources and meetings with like minded partners is advisable.

The first step in supporting clients is made through arranging a meeting and asking about their needs. In addition to a member of staff from Irish Centre Housing, a key worker from the organisation referring the client also attends the meeting. This ensures that information on the client’s needs, aims and pathway so far is as comprehensive as possible. This full briefing makes it easier to support clients in a more holistic manner and provide a better quality service. Thereafter, clients are engaged in one to one sessions which allow staff to assess their changing needs as they adapt to new circumstances. In terms of consultation with clients, formal research methods such as surveys, and informal discussions are employed. Structured research provides a means of gaining an overview of a theme or topic. However, a personal discussion-based approach is thought to be more effective since it is more informal and makes clients feel at ease therefore encouraging them to talk openly and in-depth about their concerns.
TMD Programme – Cross-sector partnership working to help the homeless

Bill Williams, Manager of Employment, Training and Education Services, highlighted lessons from the 'Tackling Multiple Disadvantage in London' (TMD) programme with regard to developing good partnership working for designing service delivery programmes. The TMD programme of which ROTA is also a part was run by a cross-sector partnership led by Off the Streets and Into Work (OSW) and involved mainstream homeless organisations including The Connection at St Martins’, Cardboard Citizens, the Greater London Authority and others. Each member had their own policy and research project and the collective evidence will inform solutions to accessing training and employment opportunities for homeless individuals with various disadvantages.

Round table discussions with partners offer the level of in-depth consultation required when debating large agenda issues. These discussions are the preferred option for the first stage in partnership working. Face to face contact is well suited to establishing relationships with co-partners. In terms of organisation, round table discussions allow the time and flexibility to analyse, probe and scrutinise topics when setting the agenda for the programme over the coming months. Once the agenda is set, regular meetings can be timetabled to highlight progress and carry on with programme development. Although face to face contact is the preferred option for ongoing consultation, it is acknowledged that meetings can take time and not all members will be available to attend each event. In these circumstances, e mails and bulletin boards provide a time effective and accessible means for busy individuals to keep up to date with progress and provide input into the programme.

Angolan Advice and Information Centre (AAIC) – Integrated service approach to helping BAME homeless individuals

The Angolan Advice and Information Centre is a VCS organisation, set up in December 1998 with the primarily role of providing support for the Angolan community in London and helping them integrate into society (but also offers services to non-Angolan Nationals seeking help). Based in North London, the centre offers a range of services including legal advice for immigration issues, housing support, general social welfare and health advice, and interpretation and translation services. AAIC’s experience of both Angolan and non-Angolan clients led the organisation to join the ‘Black and Ethnic Minority Network’ (BAN), a forum that provides the opportunity for BAME organisations with shared experiences and goals to interact and forge links.

The BAN network provides a forum to discuss and resolve recurring or common issues experienced by member organisations. To date the network has created a model process to deal with referrals and a directory with details of organisations and service providers within the network. This has provided invaluable signposts for directing clients to the right BAME organisation to cater for their specific needs. The AAIC has an active membership with Advice UK, East London Professional Association and the Haringey Training Network, which provides the necessary resources and support to help the organisation function.

Despite capacity limitations, AAIC aims to provide an integrated service which has proved beneficial for clients. For example, two young people approached the centre seeking housing advice having been asked to leave their youth hostel after turning 18. Both vaguely disclosed an interest in returning to education and received advice on various education routes from the support officer. Following several visits and discussions both clients decided to return to education. One is currently undertaking a
Hospitality and Management Course in Waltham Forest College whilst the other is in his third year at the London Metropolitan University, studying Fashion Design.

Latin America Women’s Rights Services (LAWRS) – Identification of multiple problems and active referral for older homeless women

Natalia Perez-Shephard, older people’s housing and development officer in LAWRS, details a model approach for creating partnerships with other BAME and mainstream organisations. LAWRS, a community based organisation, was established in 1983 to highlight the situation of Latin American women in the UK and provide them with support, advice and counselling. Their clients come from a range of backgrounds including migrant workers and their families, refugees, women who are survivors of atrocity, persecutions, torture, rape, domestic and state violence. Nearly all clients have experienced difficulties accessing services.

The provision of housing advice to older clients revealed a range of underlying problems such as physical and emotional abuse that required immediate attention. As a means of both highlighting and resolving these issues LAWRS in conjunction with the Latin American Golden Years Day Centre, the Latin American Elderly Project, and a host of other community based BAME organisations with similar goals and work, developed a steering group which now meets on a quarterly basis. This has provided a forum to engage mainstream services and housing providers for the elderly such as Age Concern, Help the Aged, the Association of Greater London Older Women, and the Women’s Perennial Housing Association, to consider their clients multiple needs and issues, and find ways to resolve them.

The steering group has enhanced partnership working and has improved working practises. For example, the group is organising a campaign around the restriction of public funds to help elderly victims of abuse on temporary leave to reside in the UK. LAWRS also works closely with the Women’s Pioneer Housing and can directly refer their elderly clients experiencing severe housing difficulties to the Association for consideration. The LAWRS model offers transferable principles in terms of:

- Establishing links with other BAME organisations undertaking similar work, which has provided a better geographical coverage
- The formation of the steering group has provided an arena to engage with mainstream service providers and for each representative to develop a better understanding of the others’ work
- Working in partnership with other organisations provides a more effective platform for advocating and lobbying policy change
Annex II: Toolkit

What a good homeless service would look like for BAME homeless individuals

- Dedicated officer, clear and updated fliers
- ROTA’s project can be used as a model for client empowerment and participation in policy making
- Extension of the Race Duty beyond public authorities (e.g. VCS and private sector)
- Corporate policy that is compatible with the Human Rights Act and the Race Relations Act
- Join up and consistent information and advice
- Cultural awareness (e.g. diet, celebrating religious festivals, shared facilities)
- Opportunities to influence homelessness policy. In depth consultation and feedback. No ticking box processes. Empowerment
- Combining housing and employment initiatives
- Ethnic monitoring and assessment
- Appropriate accommodation i.e. safe and suitable for individual clients. Improve health and standard of living
- Empathy, sensitivity, confidentiality and acknowledgment of their individuality

Restrictions & Limitations

- Funding & sustainability for VCS organisations
- Infrastructure support (e.g. IT, management, policy, networking, fundraising, finance)
- Access to finance and business support
- Lack of resources for individualised services
- Referrals and best practice guidance

A service that corresponds to BAME clients’ needs and wants

- Updated & accessible directory (ROTA’s Directory can be used as a starting point)
- Training to frontline staff and managers
- 1-2 day training to frontline staff
- “Added Value” and “Housing Plus” policy initiatives for local tenant groups combined with Mayor’s Housing Strategy and Decent Homes Standard. Encourage employment through volunteering
- Self-monitoring, guidance from Commissioners, Regulators, EHRC
- Implementation of the Empowering Communities, Improving Housing Guide.
## ANNEX III: SURVEY SAMPLE – INTERVIEWS WITH BAME HOMELESS INDIVIDUALS

### Clients’ Profiles (Questionnaires and Interviews)

<table>
<thead>
<tr>
<th>Client No.</th>
<th>Gender</th>
<th>Ethnic Group (self defined)</th>
<th>Age</th>
<th>Special Needs</th>
<th>Residence</th>
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<tr>
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<td>36-45</td>
<td>Mental Health</td>
<td>Hostel</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Drug Use</td>
<td></td>
</tr>
<tr>
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<td>Black British</td>
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<td>Hostel</td>
</tr>
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<td>Black British</td>
<td>36-45</td>
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<td>Friends and family</td>
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<td>Ex-Drug Use</td>
<td>Supported housing</td>
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<td>Supported housing</td>
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<td>Black British</td>
<td>36-45</td>
<td>Drug Use</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Alcohol Use</td>
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<td>Nigerian</td>
<td>36-45</td>
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<td>Physical Health</td>
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</tr>
<tr>
<td>Client 15</td>
<td>Male</td>
<td>Caribbean</td>
<td>42</td>
<td>Drugs Use</td>
<td>Sleeping rough</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Alcohol Use</td>
<td></td>
</tr>
<tr>
<td>Client 16</td>
<td>Female</td>
<td>Filipino</td>
<td>18</td>
<td>None</td>
<td>Hostel</td>
</tr>
</tbody>
</table>
## ANNEX IV: SURVEY SAMPLE – FOCUS GROUPS WITH BAME HOMELESS INDIVIDUALS

### Clients' Profiles (Focus Groups)

<table>
<thead>
<tr>
<th>Client No.</th>
<th>Gender</th>
<th>Ethnic Group(s)</th>
<th>Age</th>
<th>Special Needs</th>
<th>Residence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client 1</td>
<td>Male</td>
<td>Black British (self defined)</td>
<td>36-45</td>
<td>Drug use</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 2</td>
<td>Male</td>
<td>Black British</td>
<td>36-45</td>
<td>Ex-offender</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 3</td>
<td>Male</td>
<td>Black British</td>
<td>36-45</td>
<td>None</td>
<td>Supported housing</td>
</tr>
<tr>
<td>Client 4</td>
<td>Male</td>
<td>Black British</td>
<td>36-45</td>
<td>Drug use</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 5</td>
<td>Male</td>
<td>Black British</td>
<td>34</td>
<td>Mental health</td>
<td>Supported housing</td>
</tr>
<tr>
<td>Client 6</td>
<td>Female</td>
<td>Black British</td>
<td>18-25</td>
<td>None</td>
<td>Supported housing</td>
</tr>
<tr>
<td>Client 7</td>
<td>Female</td>
<td>Portuguese / African</td>
<td>28</td>
<td>None</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 8</td>
<td>Male</td>
<td>Eritrean</td>
<td>24</td>
<td>None</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 9</td>
<td>Female</td>
<td>Burundi</td>
<td>19</td>
<td>None</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 10</td>
<td>Male</td>
<td>Somali</td>
<td>45</td>
<td>None</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 11</td>
<td>Male</td>
<td>Jamaican</td>
<td>42</td>
<td>Drug Use Alcohol Use</td>
<td>Sleeping rough</td>
</tr>
<tr>
<td>Client 12</td>
<td>Female</td>
<td>Lithuanian</td>
<td>40</td>
<td>None</td>
<td>Sleeping rough</td>
</tr>
<tr>
<td>Client 13</td>
<td>Male</td>
<td>Caribbean</td>
<td>46</td>
<td>Mental Health</td>
<td>Sleeping rough</td>
</tr>
<tr>
<td>Client 14</td>
<td>Male</td>
<td>Mixed: Caribbean / White</td>
<td>19</td>
<td>Ex-offender</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 15</td>
<td>Female</td>
<td>Asian</td>
<td>19</td>
<td>None</td>
<td>Hostel</td>
</tr>
<tr>
<td>Client 16</td>
<td>Female</td>
<td>Filipino</td>
<td>18</td>
<td>None</td>
<td>Hostel</td>
</tr>
</tbody>
</table>
ANNEX V: DIRECTORY

As part of this project, ROTA has completed a directory of:

1. **Mainstream Homeless Organisations**: categorised by those providing support in the areas of:
   - Education, Employment and Training
   - Housing Advice
   - General Health
   - Mental Health
   - Alcohol and Drugs misuse

2. **BAME Voluntary and Community Sector Organisations**: broadly categorised by the main ethnic groups they support:
   - All BAME support organisations (including Infrastructure and Networks)
   - Black African and African-Caribbean support organisations
   - Asian support organisations
   - Muslim and Arabic support organisations
   - Eastern European and Irish support organisations
   - Latin American support organisations

To obtain a copy of the directory please visit [http://www.rota.org.uk](http://www.rota.org.uk)
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