



London Boroughs of Tower Hamlets & Hackney & the City of London

No First Night Out - Help for Single Homeless People

Interim report

February 2016

Prepared by: Becky Rice & Lisa Reed

St Mungo's
Ending homelessness
Rebuilding lives

Foreword

No First Night Out – Help for Single Homeless People is a tri-borough 18 month project, working across Tower Hamlets, Hackney and The City of London, piloting new approaches to prevent individuals from rough sleeping for the first time (No First Night Out Service) and ensuring those already rough sleeping are able to access housing in the area where they have a local connection (Safe Connections).

The No First Night Out Service ultimately aims to reduce to zero the number of people found sleeping rough in the three boroughs who qualify to be taken to the No Second Night Out (NSNO) assessment hubs in London.

This research update undertaken on behalf of the project Steering Group by St. Mungo's presents the initial results of the first phase of this endeavour which is a preliminary study to capture the common presenting traits of this cohort and their journey to a first night out on the streets. The use to which the research will be put is described at the end of the report.

When it comes to entrenched rough sleepers in the UK, a significant body of knowledge exists. We know the traits of this cohort in detail. Likewise the statutory homeless – here there is primary legislation and case law delineating these households so they may benefit from the statutory safety net as the law requires. Who, then, is the person who will sleep rough for the first time tonight? Do we know? Could we describe him or her if we were asked?

The Pre-Rough Sleeper is an entirely new service user category. These individuals are in the phase of their housing crisis which precedes rough sleeping. By definition, the Pre-Rough Sleeper is someone in whose 'here and now' profile lies the propensity – the traits and risk triggers – which predispose him or her to sleep out tonight, whilst someone else, albeit who seemingly shares a similar profile, does not. Finding these predictive risk factors, working out what distinguishes the Pre-Rough Sleeper from others, is one of the central aims of this research.

We are very proud to be able to share these interim findings. This is a first attempt to collect, document and define the features of the Pre-Rough Sleeper. This is learning which we hope will be augmented over time both with further research as well as the results of our own tri-borough service pilot to prevent rough sleeping in the future and end street homelessness once and for all. The findings are intended for use by anyone working to prevent rough sleeping including local authorities, homelessness agencies, and relevant central government department.

We would like to take this opportunity to formally thank St Mungo's for their generous in-kind contribution to the NFNO/ Helping Single Homeless project in the form of part funding this research as well as our main funders, the Greater London Authority (GLA) and the Department for Communities and Local Government (DCLG). The three boroughs also contributed in-kind funding to the research.

We would also like to take this opportunity to formally and warmly express our gratitude and appreciation to the two researchers, Becky Rice and Lisa Reed, whose energy, professionalism, skill and commitment enabled this preliminary research to be completed and compiled to the exacting requirements of the steering group. We are also very grateful to people who took part in research interviews at a difficult time in their lives - without their input the project would not have been possible.

Several organisations and agencies were extremely helpful in facilitating the research and in this respect we thank the staff and management at No Second Night Out assessment hubs (St Mungo's), the CHAIN team (St Mungo's), Tower Hamlets Street Outreach Response Team (Thames Reach SORT), London Street Rescue (Thames Reach), City of London Outreach Team (St Mungo's), Thames Reach Greenhouse Centre, Providence Row Dellow Centre, Hopetown Hostel (Look Ahead), Booth House (Salvation Army) and the three Housing Options services.

The Tower Hamlets, Hackney and City of London NFNO/ Helping Single Homeless Steering Group

1 Introduction

No First Night Out – Help for Single Homeless People is a tri-borough project, working across Tower Hamlets, Hackney and The City of London, seeking new approaches to prevent individuals from rough sleeping for the first time.

This report provides an update on findings from research undertaken on behalf of the No First Night Out Steering Group by St Mungo's. It also outlines the next stages of the No First Night Out project, informed by the research.

This report is intended for use by anyone working to prevent rough sleeping including local authorities, homelessness agencies and relevant central government departments.

2 Methodology

Findings are based on interviews with staff, observations and file reviews at Housing Options services, analysis of relevant data from CHAIN¹ and Housing Options teams and in-depth interviews with 34 new rough sleepers (clients). 20 clients interviewed were from Tower Hamlets, 11 from Hackney and three from other areas who sought advice in one of the boroughs.² No new rough sleepers with a local connection to the City of London were identified during this period. Client interviews were undertaken between June and September 2015. Interviews were conducted at No Second Night Out assessment hubs, in temporary accommodation and at day centres. The research team identified people to interview through direct referrals from outreach team as well as by using a live report on CHAIN. The researchers were able to refer to clients' CHAIN records to assist with analysis – for example in developing the typology on page 7.

This interim report is a summary based on a detailed report provided to the Steering Group. A final project report will include an update on the progress and outcomes of the No First Night Out pilot project currently running in the tri-borough area.

¹ CHAIN is the GLA commissioned database, which is used by homelessness agencies across London to record their work with rough sleepers including each contact made on the streets and support needs. The system is managed by St Mungo's.
² Interviewing were undertaken with people from other East London boroughs when initially the local connection was not clear and / or the client had sought advice in the boroughs – there were two with a Local Connection to Newham and one to Waltham Forest

3 Context

3.1 Housing Options

In Tower Hamlets there is a dedicated Housing Options Single Team (HOST) who have access to a hostel pathway. There are also two HOST workers who operate from Probation Services. In Hackney a new pilot means that single homeless people with no tenure are assessed at the Greenhouse day centre where they can see a specialist worker from the Housing Advice Team. Both Tower Hamlets and Hackney teams see a high volume of clients and Officers work on many cases at any one time.

Very few single homeless people present at the City of London Housing Options Service and those who do generally do not have a local connection to the area. People are provided with prompt and detailed advice about the best routes out of homelessness when they present at the service.

3.2 No Second Night Out assessment hubs

Many of the new rough sleepers contacted in the tri borough area attend a No Second Night Out assessment hub. These are services run by St Mungo's, commissioned by the GLA, which outreach teams across London can refer clients to – often taking them directly along to the hubs from the point of contact on the streets. They provide shelter and a detailed assessment as quickly as possible resulting in a 'service offer'. This offer is the most appropriate option, as assessed by the service, to help them move out of homelessness. The offer is agreed in discussion with the borough that the person has a local connection with and might involved a period in temporary accommodation or a hostel or support to access the Private Rented Sector.

Not all new rough sleepers attend the NSNO assessment hubs, some are given a 'service offer' by the outreach team that contacted them on the streets. This is when the hubs are at capacity and cannot take new referrals, where it is felt that there is a better option for them locally or where they do not wish to attend. Anecdotally the proportion of new rough sleepers attending NSNO from the tri-borough area is reducing due to hubs being at capacity and unable to take new referrals more often. This is corroborated by recent data analysis undertaken by St Mungo's.³

The majority of those attending NSNO assessment Hubs from the area have a clear housing related outcome – 58% of those who attended from Hackney and 77% of those from Tower Hamlets. 'Securing an outcome' is usually 'accommodation' or 'reconnection and accommodation as opposed to negative outcomes which include 'leaving without a Single Service Offer'. Tower Hamlets have a protocol which means that people from the area are usually moved on from the assessment hubs very quickly (within a day or two) which may impact on outcomes. All the boroughs in the tri borough partnership have positive, close working relationships with NSNO.

³ Internal analysis of CHAIN data for GLA – extracted in September 2015

4 Housing Options - working with new rough sleepers

Housing Options Officers identified several challenges in working with those at risk of rough sleeping or currently rough sleeping for the first time:

- Managing expectations can be hard including explaining the concept of 'priority need' and that it is not always possible to provide accommodation to single people who are homeless.
"The majority of people presenting think that the council is going to house them. It's not as simple as that and you have to explain this to people - factors such as vulnerability." Housing Options Officer
- Limited supply of temporary or 'bed and breakfast' accommodation.
- Providing any accommodation for people under 35 (who have a lower level of Housing Benefit entitlement).
"I have not actually had anyone under 25 find a room, as it is such a difficult situation." Housing Options Officer
- A very challenging local market, including high rents and the fast pace of the market meaning that landlords require very quick decisions and payments.
- The high volume of people attending meaning that there is not time to offer enhanced support to those who have additional risk factors for rough sleeping (for example support needs or a history of homelessness).
- Burdensome administration (including referral forms for partner agencies cited as being over 25 pages long for some services).

Additional data was provided by the HOST team from their client monitoring system. Key findings from analysis of this data were:

- Those who go on to sleep rough are a small fraction of the overall number of presentations of single homeless people who present at Housing Options (for example, 2,171 presentations were made at HOST during 2014/15 compared to 246 new rough sleepers contacted by outreach teams in Tower Hamlets during this period).⁴
- The likelihood of presenting but not going on to sleep rough appears to be higher for the following groups: younger and older people, women and Bangladeshi people.
- 20% of presentations at HOST result in a placement in Supported Housing
- The support needs identified in the data mirror those from other sources of data i.e. drug use, mental health problems, and offending.

⁴ Data supplied by HOST (HOST figures) and CHAIN (new rough sleepers figure), CHAIN annual bulletin, Greater London 2014/15 published by the GLA

5 The flow of new rough sleepers

Flows of clients attending NSNO assessment hubs with a connection to one of the boroughs have been fairly steady over the last two years, ranging from 20-30 people each quarter across the three boroughs. They range from 12-21 for Tower Hamlets and 8-16 for Hackney. No clients attended with a City of London connection in the last two years.

Many new rough sleepers who do not have a local connection are contacted and verified in the tri-borough area. In particular in the City of London, many people who do not have a local connection, are assisted by the City of London outreach team.

A detailed analysis of new rough sleepers with a local connection to Tower Hamlets and Hackney was undertaken using data from two and a half years (2013/14, 2014/15 and the first six months of 2015/16). Some of the key findings were:

- In Tower Hamlets the vast majority of clients from the borough were men (89-91%), whereas for Hackney 20-35% of clients attending were women.
- The majority of those attending the NSNO assessment hubs from Tower Hamlets and Hackney were aged 26-45 but there were significant minorities of older and younger people (15% aged 18-25 in each area and 20% (Hackney) and 15% (Tower Hamlets) aged over 55 (these are 14/15 figures and age profile was subject to some variation over time)).
- The proportion of those attending NSNO assessment hubs from the boroughs with mental health needs is very high across the observation period – around seven in ten clients for both areas. High proportions had drug or alcohol support needs (around or over half with an alcohol support needs and between 40% and 67% for the most recent periods for drug support needs).⁵
- Over a third from both areas contacted in 2014/15 had been to prison at some point. The proportion of people who are care leavers varies but can be generalised at around one in ten clients.
- The most common 'Last Settled Base' recorded for people attending the assessment hubs from the two boroughs were the Private Rented Sector, hostels, Temporary Accommodation, Local Authority & Housing Association Housing. The option to record the status of the client in the accommodation (e.g. 'tenant' or 'informal arrangement') was not generally used. Information from HOST and interview data suggests that people are often staying with friends or family immediately before they sleep rough but that this is often not the 'last settled base', but rather a temporary solution to homelessness e.g. sofa surfing or staying short-term with relatives.

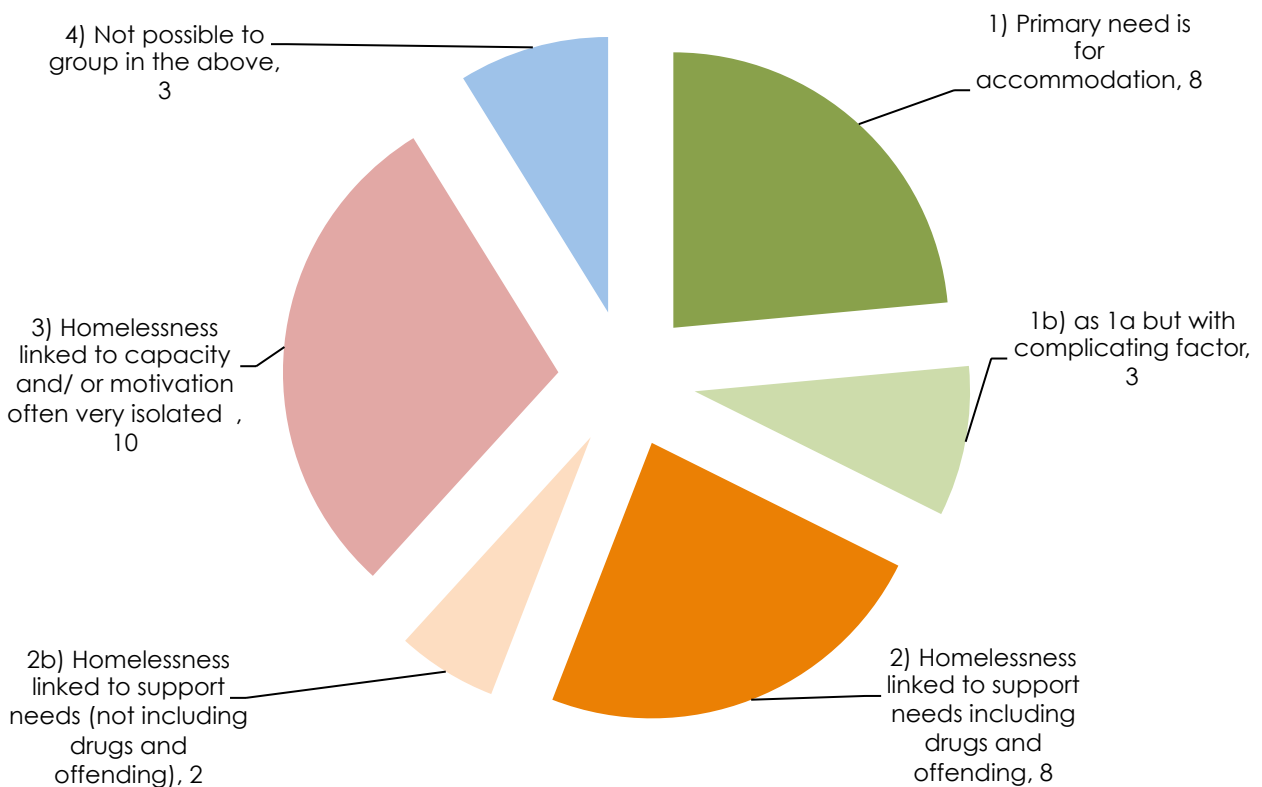
⁵ Support needs profile on CHAIN as assessed by an outreach worker or NSNO assessment worker.

6 A typology of new rough sleepers in Hackney and Tower Hamlets

Analysis was undertaken to look for patterns and useful groupings in the qualitative and quantitative data about interviewees to develop the broad typology of new rough sleepers in Hackney and Tower Hamlets. The development of the typology is based upon a review of interview and CHAIN data, including support needs profiles and risk assessments completed by NSNO.

The typology uses concepts of resilience, social networks, motivation and the capacity to seek and act on advice, as well as commonly used data relating to support needs and demographic profiles. Interviewees had been in extremely testing and distressing situations often over sustained periods and faced numerous challenges – assessments of lower levels of resilience, motivation and / or capacity refers to their response to these situations and does not imply a 'weakness' or deficit in the individual. Interviewees were often limited in their control over their housing situation by the distressing circumstances of their homelessness and related factors such as mental health problems, issues within the family home and lack of a stable, suitable home for a long period (or ever). See section 10 for further information on these areas.

Figure (a) Typology of new rough sleepers, an overview



Base: 34 interviewees

The below version of the typology provides more detail on the key characteristics of each group.

Figure (b) Typology of new rough sleepers in Tower Hamlets and Hackney (summary version)

	Description	No. & %	Key characteristics of group
1	Primary need is for accommodation	8 (24%)	<ul style="list-style-type: none"> • Several from refugee background • Low support needs – some low mental health support needs • Often one off/ unusual life event is major contributor to homelessness • Low or reduced social networks • Medium to high levels of resilience.
1b	As 1) but with complicating factor/s	3 (9%)	<ul style="list-style-type: none"> • Similar profile to 1 but with notably deteriorating mental health.
2	Homelessness is linked to support needs including drug use, offending, often combined with mental health	8 (24%)	<ul style="list-style-type: none"> • Often Bangladeshi men in 20s and 30s, others spread across ethnic groups but in the same age group. • Problematic drug use and offending prevalent • Long standing problems in the home • Generally never had own accommodation – periods in family home/ prison/ hidden homeless • Medium to low support networks, low levels of resilience, sense of shame, being ostracised.
2b	Homelessness is linked to mental health and family problems	2 (6%)	<ul style="list-style-type: none"> • Similar profile as to 2 but without drug use or offending. • Mental health problems and problems in the home • Victims of domestic abuse • Feelings of hopelessness and isolation.
3	Capacity and motivational issues, often more isolated groups	10 (29%)	<ul style="list-style-type: none"> • People in 40s/ 50s/ 60s often White or Black Caribbean • Range of support needs • Transient backgrounds, people who just about 'hang in there' until something happens and they then have nowhere to go. • Low levels of motivation and / or capacity due to a range of issues including mental health problems and learning disability.
4	Not possible to group in above	3 (9%)	<ul style="list-style-type: none"> • Not applicable

7 Tipping points

The final tipping point into rough sleeping was assessed for each interviewee. There were three main tipping points:

- When staying with friends or family in a 'hidden homeless' situation ends, for example because the hosts 'good will' has run out or the host has to leave the accommodation (14 cases). The period of 'hidden homelessness' lasted between a few nights and several years.

"I was staying with friends and family and on sofas, I take drugs though and they have kids. I was a carer for someone for four years (ended some time ago) and I used to stay there on his sofa quite a lot ...Then recently I would maybe do one night with mum one with dad. But I use and they are saying you can't stay here. I was putting myself on people they just don't want to be cruel and not let me stay. I knew I would end up on the streets."

Female, White British, 40s

- Having to leave the family home/ partner's house where they were staying long term (six cases). In some cases the client had resided very long term with the family, in others, living at home had been inter-dispersed with periods in prison or living elsewhere. Where people's tipping point was being asked to leave the family home, the cause of this was often linked to drug use causing tensions. In two cases the client was an ongoing victim of exploitation or abuse in the family home. Factors which compounded stress in households, were overcrowding and support needs of other members of the household.

"My mum has not got space and schizophrenia runs in the family, my eldest brother has it and my third eldest brother, and my younger sister – she (mum) has too many people to deal with. The oldest - he can't do anything for himself, he can't do his buttons. My sister is very bad OCD. I see her (mum) here and there, not often – its pressure for her with the way I am (i.e. his state of mind, depression and homelessness)."

Male, Asian Bangladeshi, 30s

- Being evicted or knowing the eviction was pending and moving straight to rough sleeping as a result. Five people left their home and slept rough straight away due to being evicted – this included people who were evicted from a long stay at a hostel. For one other person a temporary placement in a hostel ended and this was the final tipping point into rough sleeping. A further three interviewees left their own homes because an eviction was pending and went straight to sleep rough – in two cases sleeping in the stairwell of their former home. The most commonly cited cause of eviction was benefits sanctions (four cases) resulting in suspension of Housing Benefit following a JSA sanction.

"I got sanctioned and then left I thought I would build up arrears and end up owing them thousands of pounds. I needed help or reassurance, I found out later that (the hostel) maybe could have helped me with this."

Male, White British, 20s

8 Wider contributory factors

As well as looking specifically at the 'tipping points' from being accommodated or hidden homeless to actually rough sleeping a full analysis of each interviewees housing journey was undertaken to consider all contributing factors. Key themes were:

- Leaving prison was a key contributory factor for several respondents. The circumstances included situations where temporary accommodation was provided on release and homelessness followed up to a year later (for example when a one year placement in supported placement came to an end) and where no accommodation was provided on release (for example, the person moves straight into hidden homelessness such as squatting on release).
- Key themes in being asked to leave the family home were overcrowding and support needs within the accommodation (for Bangladeshi families in Tower Hamlets and for one family in Hackney), problems with the behaviour of the client including drug use and violence, and a build up of tension resulting in an argument. In two cases the client experienced domestic violence or exploitation from their families.
- In several cases experiencing domestic violence was a contributing factor to people's homelessness historically though not in the recent past.
- Two male clients were accused of domestic violence and this was a factor in their homelessness.
- In several cases people were asked to leave or felt they had to leave the home of a friend they had lived with medium to long term (i.e. not sofa surfing but settled) as opposed to the home of a family member.
- Eviction was commonly cited as part of the homelessness journey. In many cases people did not wait for formal eviction proceedings to come to their conclusion before leaving the accommodation. Key reasons for being evicted included:
 - Benefits sanctions and Housing Benefits payments stopping (notably this was often combined with another factor e.g. ASB)
 - A change of circumstances and income resulting in arrears and eviction
 - Being 'evicted' or asked to leave informal tenancies
 - Two clients were evicted from temporary accommodation projects after staying over a year.
- In at least three cases the imminent threat of violence from outside the family was a contributing factor to homelessness.
- Bereavement was a contributing factor for homelessness in at least six cases. In two cases the death of a family member (mother) and friend directly led to homelessness, in other cases it was a more complicated situation where bereavement was cited as a contributing factor.

9 Support networks

There were several themes in the level of support that people could access from social networks and why these networks did not translate to people avoiding the need to sleep rough:

- Several people felt that they had been let down by family and friends. In similar cases family and friends were able to help but this was done grudgingly and / or caused hassle and upset for the client.
- Several (especially younger) people said their friends and siblings live with their parents or have wives and children, and would be unable to assist or the client would not want to impose on their home.

- There was a theme of friends and family being willing and able to provide occasional money, food and company but not a place to stay. In some cases the client was welcomed into the home in a conditional way due to a previous misdemeanor (e.g. offending and drug use).
- In some cases people had lost contact with friends and family due to offending/ accusations of offending and drug use.
- There were a small number of people who were extremely isolated. These people were aged over 40 and had capacity or motivational or mental health issues which affected their ability to find and keep housing. One person said they had no family or friends at all and did not speak to people when he went to the library (his main daytime activity), and another referred to years living in a flat and speaking to no-one apart from occasionally drinkers at the park and for long periods only going out when absolutely necessary for food, causing him to get a vitamin d deficiency. Another client had made deliberate attempts to reduce his social circle to barely anyone as he had planned to commit suicide.
- Stigma and shame affected client's willingness to disclose homelessness and to see friends and associates while they were homeless.

10 Personal factors

There were several personal factors that were central to interviewee's homelessness and rough sleeping. There were often multiple and interrelated factors, for example, family problems, drug use, mental health problems and offending all feed into one another, creating negative cycles. The key factors identified are outlined below.

- Resilience - Many people interviewed had low levels of resilience; when faced with housing and other problems which led to rough sleeping they were unable to effectively seek help or support and/ or did not believe that their situation would be resolved. They often felt that their situation was hopeless or accepted their situation even though they found it very distressing and harmful. A lack of resilience was related to; mental health problems, long-term substance misuse, long term homelessness and learning disabilities.
- Motivation - Low levels of motivation often related to people feeling that their situation was hopeless or that they had tried things and they hadn't worked or depression meant that they did not feel inspired to take positive action e.g. at least two people who did not claim benefits despite having no income, because they had previously been sanctioned and this put them off.
- Capacity - This relates to people who were unable to address housing problems as they did not know or understand what to do or could not take the steps required to, for example, organise ID or appointments e.g. someone who was advised to attend a 'walk in' service but did not understand this concept or what to do next so did not take action, and someone who lived from discarded food from bins but did not seek any help when his benefits were stopped.
- Mental health - Many of those interviewed had depression, several had suicidal thoughts and self-harming histories. At least one person had a diagnosis of schizophrenia. There were clear signs that people's mental health deteriorated rapidly while they were rough sleeping and homeless. At least two people were hallucinating during interviews, and others described hallucinations, (without prompting), several others were visibly upset, several were exhausted having had very little sleep.
- Drug and alcohol problems - In just under half of cases drug or alcohol use was a factor in the interviewees homelessness. The most commonly used drug was heroin, with those who use heroin often scripted and using less or none at the time of the interview. A smaller number of interviewees had alcohol problems. At least two interviewees used crack.

11 Seeking help

11.1 Housing Options services

By far the most frequently mentioned places people sought assistance from were the two Housing Options services in Hackney Service Centre and Tower Hamlets HOST team at Albert Jacob House. Data provided by Tower Hamlets HOST and Hackney Housing Options team shows that half (16 of 31) of people presented at Housing Options in the month leading up to being contacted rough sleeping. In some cases their presentation will have directly led to their being contacted by outreach teams as Housing Options refer to StreetLink. In a fifth (six) of cases (largely in Tower Hamlets) the client had presented at Housing Options but this was 3 months or more before they were first seen rough sleeping. Four clients (three from Hackney and one from Tower Hamlets) didn't present at Housing Options until after they were seen rough sleeping. A small number of people had not attended Housing Options at all at the time of their interview.

Themes in feedback on this source of advice were:

- The most common responses to the interviewees presenting as homeless at Housing Options was either to be given a list of landlords and advised to seek PRS and / or being directed to the Greenhouse (Hackney) or the Dellow Centre (Tower Hamlets).
- Clients who tried to contact landlords from a list provided universally found that they would not have the required deposit or that accommodation was not available to them.
- Those who were currently rough sleeping or said they would be rough sleeping that night were referred to the Dellow Centre or the Greenhouse. In Hackney some people were informed about StreetLink directly by Housing Options.
- Many interviewees found attending Housing Options challenging, for example a recurring theme was feeling frustrated by the concept and the terminology of 'priority need'. Several felt that they were met with some skepticism, especially if clean and well presented, and people also felt that that their cases were processed quickly without a full understanding of their situation being elicited.
- Two clients found that having to see a specific housing options officer at the Probation Service delayed their access to advice.
- There was a perception amongst interviewees that they were unable to get assistance until they were sleeping rough.

"The Council say OK if you are on the street, outreach will find you, Whitechapel (Mission) say the same, Dellow say the same."
Male, Asian Bangladeshi, 30s

11.2 Other services

Interviewers probed thoroughly on where clients sought advice and assistance from about their housing situation. The key findings were:

- Generally people did not seek help from many agencies or a wider range of agencies. There is a common route in the two boroughs of attending Housing Options and then the main day centre working with the borough to address single homelessness.

- The most commonly cited places to seek help were the Greenhouse and Dellow Centre (often accessed via Housing Options) and also the Whitechapel Mission, which was often found via word of mouth recommendations.
- Places referred to by a small number (one or two) of clients were drug services, mental health services, GPs, Housing Associations / the council as a landlord, local advice agencies (Bethnal Green One Stop Shop, Bromey-by-Bow Centre, Toynbee Hall, a Law Centre) Probation Services and the police.
- In most cases the response of agencies was to route people to the Dellow Centre or the Greenhouse. People often said that other agencies could not provide housing advice as this was not their particular remit.
- There was a theme of people seeking advice in places that made sense to them but were unlikely to result in an outcome. The most common example of this was people visiting and ringing around hostels both inside their home borough and outside the borough.
- Generally when people were asked if they had requested any advice or help from doctors, the Job Centre, drug services and other services they said no. Sometimes people indicated that they thought telling a non-homelessness service about their housing situation would be pointless.

"I got a drugs counsellor, he is ok, very good, few times I have missed appointments and he has found me to give me my script. He said he couldn't really give me advice with being homeless as he is just a drugs counsellor, he said go to the Dellow...I'm on ESA, as part of my drugs programme I get a monthly sick note, I go to the Job Centre with that. [Did you ever ask them for advice about your housing?] (Laughs) No - they aren't interested in your housing problems!"
Female, White British, late 40s

- At least two interviewees had their JSA job search requirements reduced by the Job Centre due to their housing situation and found this very helpful.
- Many interviewees across both boroughs referred to using local libraries but nobody sought housing advice in the library.
- At least four people were encountered by the police before they were picked up by outreach. Most references to encountering the police while rough sleeping were positive, although the police did not always seem to be well informed about the best steps to take as a rough sleeper. There was one person who was 'moved on' and found this very unhelpful.

"When you become homeless you don't know who to turn to. I saw the police about four weeks ago – they gave me numbers and tried to help. They Googled places I could go. [Did they mention StreetLink?] I haven't heard of that – they didn't tell me about that."
Male, Black African, 30s

- Muslim men often reported that they used to go to mosque but did not at the current time. The mosque was not seen by this group as an avenue for advice about their situation for example, due to the shame of homelessness and drug use and fear that the mosque would try to mediate with parents with the aim of a return to the family home.
- In one case a young person did attend the mosque for as many hours as possible to avoid rough sleeping but did not tell anyone there he was homeless.

Overall there was a lot of praise for the Dellow Centre and the Greenhouse. Generally these services provided the route into working with outreach teams. They also, along with the Whitechapel Mission, provided essential showers, clothing and food for people and respite from being outside. Staff support with benefits and referrals was mentioned. Use of computers and 'care of' addresses were also frequently cited as having been provided.

"Well the Dellow have supported me all the way, they have given me shelter, food, for the first weeks I was there nine to five, they have given me advice and let me use computers. Whenever I go to sign on I go to the Dellow and update them on what going on and get my post."

Male, Asian Bangladeshi, 30s

12 Being found by outreach teams & attending NSNO assessment hubs

There was a lot of positive feedback about the experience of being located by Outreach workers having slept rough – a sense of relief was common.

"They (Streetlink) said it might be 72 hours, so when they (Outreach) woke me up at six the next morning, I was so relieved I broke down, I was scared out of my wits."

Male, White British, 50s

However, people found it very challenging and sometimes distressing trying to stay in one location so that the outreach team could locate them up following a StreetLink referral.

"The problem is that you have to be in a specific location, I was trying to get to NA (Narcotics Anonymous), but I couldn't do it as if StreetLink come out and you are not there they will not come out again. I was relieved to be found."

Male, Asian Other, 30s

People had mixed views about the No Second Night Out assessment hubs. Overall, comments were positive with people being relieved to be somewhere they felt safer than on the streets. Some reported difficulties with their stays at the assessment hubs, in particular people found it hard not knowing what was happening with their case and being far from their home area/ in an unfamiliar area.

13 Taking the findings forward

The research findings are being taken forward into the practice phase of the No First Night Out project. The conclusions of the research are very wide reaching and some will fall outside the remit of the specific NFNO project. These are still useful to highlight here for a range of audiences. Key messages and emerging areas to develop and explore best practice in are:

- ✓ Recognising that 'new' rough sleepers often have long and complex journeys resulting in homelessness, related to social networks, support needs, resilience and the absence of a settled and safe home.
- ✓ Ensuring a streamlined pathway to divert people from or move them out of rough sleeping, which does not require going back-and-forth between services.
- ✓ Creating a client friendly approach so that people feel less defensive and challenged, for example, considering a review of the terminology of 'non priority need'.
- ✓ Empowering staff to support rather than just advise clients where this is appropriate for example when people are unlikely to have the capacity or motivation to take steps independently.
- ✓ Considering options for helping more people move directly from Housing Options to accommodation if they are assessed to be rough sleeping already or imminently. Most of those who attend NSNO assessment hubs end up being accommodated in temporary accommodation paid for by the boroughs, but sleep outside first. Considering ways in which using the Screening Tool developed as part of the No First Night Out project could create a fair and systematic approach to this.
- ✓ Exploring further some of the groups identified in the typology of rough sleepers and considering ways to target advice and prevention to these groups for example young people and people who have been subject to benefits sanctions.
- ✓ Testing the typology in practice and developing this if it is a useful framework for understanding rough sleeping in the area.
- ✓ Having clear and explicit messages about what action services and individuals should take if someone is at risk of rough sleeping or rough sleeping currently. For example, is the right response to always refer to the local day centre and if so what is the expectation? Should services explain and promote StreetLink? How far should people be dissuaded or indeed encouraged to ensure they sleep somewhere they will be picked up by outreach?
- ✓ Establishing a programme of work which informs services in the statutory and voluntary sector about risk factors and vulnerable groups, and suggests the best course of action according to the stage someone is at in their housing journey. For example for social landlords when people fall into arrears or when eviction proceedings are started.
- ✓ Promoting the prevention opportunities which are sometimes missed as demonstrated in the research – for example when people leave prison, when they are subject to benefits sanctions, and when landlords start eviction procedures.
- ✓ Exploring prevention opportunities highlighted in the research, for example could other services and organisations take a role in helping clients to take quick action on arrears or to move out of the family home in a planned way before they reach a crisis point for example faith groups and drug and alcohol services? If not could they refer to the Housing Options service at an earlier stage in the homelessness journey if they were better trained in this area?

- ✓ Harnessing public awareness – in the same way that the public can refer to StreetLink maybe the community could play a part in highlighting people they think are very vulnerably housed or at risk of homelessness as they are seen to be struggling.
- ✓ Considering the role of places where people go but typically do not attempt to access housing advice including mosques, libraries, GPs, advice services (very few people used local advice services). Is it desirable for people to ask for housing advice in these places and if so what should the response be? Is it better for those without specialist knowledge to refer on, or should these services be equipped to make a very quick assessment of risk and communicate with Housing Options?
- ✓ Improving access to the Private Rented Sector where possible. This could include:
 - a. enabling quicker access to rent deposit payments
 - b. Regularly review list of landlords to ensure that people do not waste time calling those who will refuse the client group
 - c. Enabling staff to take a more proactive role in helping clients' access accommodation.
- ✓ Reviewing use of some temporary accommodation projects which elicited particularly poor feedback and or considering ways to provide access to advice for those placed there who find themselves struggling.
- ✓ Ensuring that some support is available to those who access temporary accommodation and they know how to access this – many have support needs which mean they are waiting for a hostel or supported housing place and may need interim support.
- ✓ Being aware of the impact of being accommodated far from the home area in temporary accommodation or NSNO assessment hubs and ensuring people understand where the things they need are (shops, services) and how they can get back to their home area when they need to (for example how much this costs).
- ✓ Highlighting to central Government the impact of benefits sanctions on vulnerable people. Several people interviewed lost their Housing Benefit when subject to JSA sanctions (this is likely to be because their Housing Benefit was suspended while their eligibility was checked).
- ✓ Influencing services across the board to reduce the burden of long referral forms – joint working to review and reduce requirements would benefit services and clients who tell their stories again and again.

14 Next steps for No First Night Out

The next stage in the methodology of the project is to begin to employ the prognostic learning gathered together in this update. The data and findings will be used to equip practitioners with the foreknowledge to begin to make informed evidence-based predictions of who might sleep out before they actually do and accordingly target rough sleeping prevention to purposeful effect.

These interim findings will form the basis for a fine-grade assessment tool. This will be used by dedicated specialist No First Night Out Housing Options Officers who will work across the tri-borough area with Housing Options departments as well as partner agencies to identify those at risk of a first night out who will then receive rapid, intensive homelessness prevention and housing options casework to prevent them rough sleeping.

The data and findings will also be used by the steering group to peer review internal service processes and practices which may be contributing to rough sleeping.

In tracking the journey from housing crisis to the street, the research sheds light on where preventative intervention might best be sited. This strand of the research provides pointers on where the cohort might be found by plotting what agencies and organisations they visit as they traverse their way to the street so as to position service interventions in these locations. The No First Night Out service will therefore operate an outreach presence in a variety of venues, e.g. Job Centre Plus, Probation, Citizen's Advice, local Libraries, and the mosque.

Further fine-tuning and adjustment to the approach will be undertaken after three months as new learning emerges from operationalising the new approach. This new learning will consequently be incorporated into a final report for publication.