

Housing First: The Next Steps

Practical lessons for Housing First and Housing First for Women

**Nicholas Pleace and
Joanne Bretherton**



Acknowledgements

This guide draws on the experience of Housing First projects supported by the [Henry Smith Charity](#) and the results of a Centre for Housing Policy (CHP) evaluation of those projects. The CHP evaluation coincided with the national lockdown restrictions resulting from COVID-19 (March-June 2020 and January-July 2021) and the local tiered lockdowns (September-November 2020). Throughout this period, the six Housing First services which participated in the evaluation remained in touch and supported the research despite having to deal with all the challenges of the pandemic. We are very grateful to everyone with experience of homelessness using these services and everyone working for them who supported the research. Our thanks go to the people using and working for the Action Homeless (Leicester), Bench Outreach (London), HARP (Southend), Housing First Gwynedd (Shelter Cymru) and Turning Tides (West Sussex) Housing First services. We also want to thank everyone using and working for the Stonepillow (West Sussex) Housing First service which joined the evaluation in 2022.

After all the delays to the original evaluation timetable stemming from the impacts of COVID, it would not have been possible to get everything back on track without the very able support of Dr Kit Colliver and Dr Cheyann Heap, currently working in Law and in Health Science at the University of York. We would also like to thank them for all their help with the research on which this guidance draws.

Nicholas Pleace and Joanne Bretherton
Centre for Housing Policy
School for Business and Society
University of York

August 2024

The research on which this guidance draws has been published as Bretherton, J.; Pleace, N. and Colliver, K. with Heap, C. (2024) *The Henry Smith Charity Housing First Strategic Grant: Research into the Effectiveness of Housing First Services* University of York: York.

Nicholas Pleace is Professor of Housing and Society and **Dr Joanne Bretherton** is a Senior Lecturer in Social Policy and Criminology at the University of York.

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GUIDANCE ON HOUSING FIRST

This guidance is not an introduction to Housing First. Guidance covering the nature of Housing First, the ethos of the approach, important factors in ensuring strategic success and effective commissioning, alongside helpful material that details key considerations in effective day-to-day operations and how to cost and also evaluate Housing First services is provided here. Examples of very useful and thorough guidance that explains every dimension of Housing First include:

- The ‘*seven principles*’ of Housing First as described by Homeless Link, the *Homeless Link Housing First programme* and their *Housing First Fidelity Assurance Framework*, alongside the earlier guidance on the *Principles of Housing First* are all useful resources. Housing First research supported by *Homeless Link* and on the implementation of Housing First at national level by *Crisis*¹, alongside the evaluation of the *Scottish Pathfinder Housing First programme*, also contains a lot of helpful material.
- The *Housing First Europe guidance* provides detail on the logic and ethos of Housing First and implementing Assertive Community Treatment (ACT), Intensive Case Management (ICM) and related approaches, while the wider *Housing First Europe Hub* also provides a wealth of discussion and experience on using Housing First.
- The *Canadian Housing First Toolkit* which stemmed from the successful pilot At Home/Chez Soi pilot programmes is useful for high fidelity ACT/ICM Housing First services.

The *Pathways Housing First Institute* in the US, continues to promote the original idea of Housing First from Sam Tsemberis, which is also available in the form of detailed guidance (again centred on ACT/ICM approaches)². Tsemberis’s original concept of Housing First still forms the bedrock on which new guidance, adapted to the specific situations found in the UK, Europe and the wider world continues to be built and we acknowledge that here.

Finland, which is often discussed in relation to Housing First, and which is indeed still promoted as the first national-level success in effectively ending homelessness by using Housing First can also be an important source of guidance and ideas. However, Finland uses Finnish Housing First, which while it uses the same name, is not based on the original Tsemberis model but on Finnish ideas and Finnish experience. Housing First was not imported into Finland from the US.³

There are not two kinds of Housing First, one originally American and the other originally Finnish, rather it is the case that Finland has for some years been operating a highly integrated, holistic, housing-led and preventative national homelessness strategy which is referred to as ‘Housing First’. This strategy includes services that have a great deal in common with the (American) ideas of Housing First, but it also incorporates extensive prevention, including an innovative prevention model sometimes referred to as housing social work, and an array of other supported housing and floating support models, all working within a housing-led framework. A key difference with somewhere like the UK was the integration of a social housing building programme specifically focused on people experiencing homelessness at the core of the Finnish Housing First strategy. For more on Finnish experience see:

- Y Foundation (2017) *A Home of Your Own: Housing First and Ending Homelessness in Finland*

1 See also Blood, I. et al (2017) *Housing First Feasibility Study for the Liverpool City Region* London: Crisis.

2 Tsemberis, S. (2010) *Housing First: The Pathways Model to End Homelessness for People with Mental Health and Substance Use Disorders* Minnesota: Hazelden Press.

3 Allen, M.; Benjaminsen, L.; O’Sullivan, E. and Pleace, N. (2020) *Ending Homelessness in Denmark, Finland and Ireland* Bristol: Policy Press.

- The work of Juha Kaakinen and colleagues at the Y Foundation on the successes, potential and challenges of the Finnish model, for example the 2021 paper *Finnish but not yet Finished – Successes and Challenges of Housing First in Finland* and a well-known [TED talk](#).

There is also a wealth of research which contains practical lessons about Housing First in the UK and in at least broadly comparable countries in Europe and the wider OECD from which lessons can be drawn. A search on [Google Scholar](#) using “‘Housing First’+homelessness’ generated some 16,400 hits in July 2024 and by the time this guidance is available, that number will have gone up quite a lot.

Much of the research material is North American. However, there are articles and other research on successful Housing First strategy, for example the successful [French and Canadian national programmes](#) and the *Housing First Italia* programme, led by the federation of Italian homelessness organisations [fio](#). PSD, that can be useful in thinking about how to design and deliver Housing First.

The European Journal of Homelessness, which is open access (the articles can be downloaded for free) contains over a decade of material on Housing First. This includes everything from programme evaluations and research on individual Housing First services through to reviews of books on Housing First.

It is also worth drawing attention to the *evaluation* of the three central government supported ‘pilot’ programmes in England and the associated guidance from what is now MHCLG called *Mobilising Housing First toolkit: from planning to early implementation*. However, it is important to note that these three pilots were much better resourced than most of the Housing First commissioned by local authorities in England, including the multiple Housing First services that significantly predated this ‘pilot’ programme.

There is always a risk that guidance will become quite quickly outdated and it is worth noting that this guidance is based on a particular group of Housing First services operating within particular policy frameworks. At the time of writing, a new Labour government, which has among other things been talking about a possible national *Housing First Strategy* for England, has just taken power. Some of the issues reported in this guidance, which include the practicalities and realities of dealing with ever shrinking and often precarious funding sources for Housing First and, as the National Audit Office reported in 2024, an absence of coherent national homelessness strategy in England⁴, may not be present in the same form, or to the same extent, as was the case between 2010-2024.

4 <https://www.nao.org.uk/reports/the-effectiveness-of-government-in-tackling-homelessness/>

THE ROLE OF THIS GUIDANCE

This guidance draws on the results of a three year evaluation of the *Henry Smith Charity Strategic Grant Programme* which supported six Housing First services. Two rural and suburban Housing First projects were developed in North Wales (Housing First Gwynedd) and West Sussex (Turning Tides). Specialist women's Housing First team members were added to existing Housing First services in London (Bench Outreach) and in Leeds (Turning Lives Around). The development of new Housing First services was also supported in Leicester (Action Homeless) and Southend (HARP). A separate Henry Smith Charity programme also provided continuity of funding to another West Sussex Housing First service (Stonepillow) which also became part of the research.⁵

This guidance focuses on practicalities of setting up and running a small to mid-sized Housing First service and developing Housing First for women. The intention is to draw together learning from running small and mid-sized services, which encompasses much of the Housing First in the UK at the time of writing, which are at the sort of operational scale that smaller and mid-sized local authorities can currently commission. The guidance is not strategic, though it has some lessons for wider strategy, and it is also UK specific, although again some of the experience reported here may have broader applicability to Housing First services operating in an adverse policy environment and hyperinflated housing markets.

The goal has been to develop practical guidance drawing on the direct experience of seven Housing First services. This covers some Housing First services that became operational and worked towards a steady operational state and some others that significantly modified their existing Housing First services to meet additional forms of need. References to wider guidance and research are made throughout this document.

The guidance presented here is broken down into six main sections:

- Fidelity in practice
- Resource management
- Recognising and responding to housing market variation
- Responding to high and complex needs
- Strategic integration and joint working
- Housing First for Women

The seven Housing First services

This guidance draws on the experiences of seven Housing First services supported by the Henry Smith Charity as reported in the Centre for Housing Policy evaluation.⁶ In six cases, the Housing First received financial support under the Henry Smith Charity Housing First Strategic Grant. The seventh Housing First service, provided by Stonepillow, was supported under an associated Henry Smith Charity programme.

⁵ The research on which this guidance draws has been published as Bretherton, J.; Pleace, N. and Colliver, K. with Heap, C. (2024) *The Henry Smith Charity Housing First Strategic Grant: Research into the Effectiveness of Housing First Services* University of York: York.

⁶ Bretherton, J.; Pleace, N. and Colliver, K. with Heap, C. (2024) *The Henry Smith Charity Housing First Strategic Grant: Research into the Effectiveness of Housing First Services* University of York: York.

Action Homeless (Leicester)

This service was developed by *Action Homeless*. The service was designed to provide support for 24 people with multiple and complex needs over a three year period, being designed to scale up from six people in year one, to 12 in year two and eventually reaching 24 in year three. Designed caseloads were six per team member, which is similar to the kinds of levels seen in other Housing First services across England.⁷ Referrals to the Housing First service were expected to come from people experiencing homelessness who had multiple contacts with existing services in the City of Leicester. The three year plan for Housing First was supported by the Henry Smith Charity Housing First Strategic Grant and became operational in early 2021. Action Homeless Housing First had access to its own tenancies and hostels which could be used for people being supported by Housing First. Some of these were in bedsit or studio apartments within larger converted housing and they could be employed on a temporary or permanent basis.

Bench Outreach (London)

Bench Outreach is a long-established homelessness charity that concentrates on the London Boroughs of Islington and was one of the first organisations in the UK homelessness sector to establish a Housing First service in 2013⁸. Support was sought from the Henry Smith Charity Housing First Strategic Grant to enhance the existing Housing First service through the addition of a specialist team member for women. Bench Outreach had found that around half the people using its Housing First service were women and had determined there was a need for a specialist, female team member. The goal for the one full-time women's team member was to support up to 30 women over a three-year period. Alongside direct support to women using Housing First the specialist team member had a wider role in ensuring that the Housing First team were gender informed, trauma informed and aware of the needs and challenges surrounding experience of domestic abuse. Bench Housing First was supported by the London boroughs of Lewisham and Greenwich which gave them some access to social housing. The specialist team member started work in early 2021 and was operating at capacity by the end of 2023.

HARP (Southend)

The *Homeless Action Resource Project* (HARP) is based in Southend and is a longstanding charitable provider of homelessness services. The original proposal for a Housing First service was for a four year transition away from the more traditional supported housing that HARP had been offering. HARP initially encountered a series of logistical and partnership challenges which created problems in realising their plans for Housing First. These issues were exacerbated by the impacts of the COVID-19 pandemic. This meant that the HARP Housing First service became operational after the other services that were supported via the strategic grant from the Henry Smith Charity, going live in Autumn 2021. The designed capacity of the service was ten people, a level that had been achieved by late 2023, with plans in place to extend the service.

Housing First Gwynedd

This Housing First service was set up by *Shelter Cymru*, an independent Welsh charity that focuses on housing inequalities and homelessness. Homelessness policy and legislation in Wales are a devolved power within the remit of the Welsh Government and while *Welsh homelessness law and practice* has strongly influenced English policy, it is separate and distinct. Housing First Gwynedd was designed to operate in North Wales, covering a largely rural area in and around Caernarfon and Bangor. The approach taken was reported as being influenced by *Housing First Vermont*, one of the first US Housing First services to operate in a more rural area. The service was intended to work with up to 14 people (a caseload of 6-7 per FTE staff member) at any given time and was working at designed capacity by 2023. The service faced significant challenges around securing suitable housing in a rural area with a significant tourist industry, but had successfully found settled housing for eight people by the end of 2023.

7 Homeless Link (2020) *The picture of Housing First in England 2020* London: Homeless Link.

8 Bretherton, J. and Pleace, N. (2015) *Housing First in England: An Evaluation of Nine Services* York: University of York.

Turning Lives Around (Leeds)

A long-established homelessness charity with origins in the formation of Leeds Housing Concern in 1972, *Turning Lives Around* has a long history of providing supported housing and other services to people experiencing homelessness in Leeds. Like Bench, Turning Lives Around sought support from the Henry Smith Charity Housing First Strategic Grant to develop specialist support for women which was designed to be integrated into an existing Housing First service. The proposal was to add 10 places for women that would be supported by two FTE specialist team members to an existing Housing First service. The goal was that the women's Housing First team members would collaborate with domestic violence services in Leeds and that the service would, as with other Housing First, be focused on women with multiple and complex needs, including women who were living rough. Caseloads were intended to be between five and seven per full time team member. The service was designed to have a six-month 'bill free' period while a woman was establishing a home, which helped provide furniture and other essentials and could also be used should there be a need for lock changes or other modifications or repairs around safeguarding. Both team members had a full caseload by the end of 2023.

Turning Tides (West Sussex)

Established in 1992, *Turning Tides* is a community led charity that provides a range of supported housing and addiction services in West Sussex, including Worthing, Horsham and Littlehampton. The goal build a collaborative Housing First service with the capacity to support 14 people. The Housing First service was designed to be integrated with the existing services operated by Turning Tides and a key part of the rationale for developing it was that the charity was encountering more people experiencing homelessness associated with high and complex needs. Like Housing First Gwynedd, Turning Tides Housing First was operating in housing market that was highly stressed and did not always have ready access to social housing. The began operations in 2021 and was operating at capacity by the close of 2023, having found settled housing for seven people.

Stonepillow (West Sussex)

Stonepillow Housing First joined the wider evaluation of Housing First supported by the Henry Smith Charity in 2022. Stonepillow is another homelessness charity working in West Sussex, with services that include daytime service hubs, hostel and supported housing accommodation and addiction services, within Chichester and Bognor Regis. Stonepillow had previously secured National Lottery funding, support from Crisis⁹ and from a local authority to add Housing First to its range of services. The goal was for the Housing First service to support 30 people over the period covered by the Henry Smith Charity grant application. Stonepillow had begun to develop Housing First in response to changing patterns of needs among people experiencing homelessness in its area, as rates of high and complex need, including severe mental illness and addiction, were seen as increasing. As with several of the other Housing First services, there were serious challenges around securing affordable and social housing supply. Stonepillow was something of a hybrid approach, offering a hybrid version of Housing First that had similarities to the Critical Time Intervention model, which has an inbuilt time limit which is flexibly applied, meaning that support was ongoing (please see the following section on Fidelity).

9 <https://www.crisis.org.uk>

FIDELITY IN PRACTICE

An overview of fidelity

Fidelity, or the degree of fit with the original Housing First model as developed by Sam Tsemberis and subsequent interpretations of exactly what Housing First should be, can be something of a contentious subject. Concern about fidelity arose first in the United States, when Housing First was defined by Federal Government an evidenced programme response to homelessness among people with high and complex needs, specifically those experiencing chronic (long term) and episodic (repeated) homelessness in 2005. Federal funds supported 'Housing First' but were not too precise about what exactly that meant, which resulted in some considerable variation in how 'Housing First' services were operating. High fidelity services, close to the Tsemberis model continued to develop, a good current example being *Pathways Vermont*, but other forms of Housing First also began to appear, some of which were at best only loosely related to the original idea, albeit that they still called themselves 'Housing First'.¹⁰

In the UK and Europe, exact fidelity with the original version of Housing First was challenging on two levels. The first was that Housing First, as an ACT/ICM service, represented something quite close to a miniature social housing, welfare state, health, mental health and addiction service. ACT/ICM Housing First was still case management based, it could not do everything itself and needed access to other services, but it had been designed to support people experiencing homelessness who had very high and complex needs in a society that did not have the extent of welfare, social housing and public health services that existed in the UK and North Western Europe. The cost of such an approach was hard to justify when the necessary health, social care, mental health and addiction services, amongst others were, at least in *theory*, freely available. This led to arguments and practices in favour of a 'Housing First light' or 'case management only' model of Housing First that would reflect the differences in European and US welfare, public health and housing policy.

The second issue was cost, ACT/ICM Housing First was expensive compared to most other UK and European homelessness services. While Housing First had quite often been demonstrated to be more cost effective than the even *more* expensive US linear residential treatment (LRT) services that it was designed to replace, those LRT services (which were essentially mental health and addictions services that offered accommodation within a resettlement pathway) were not widespread in Europe and did not really exist in the UK. Intensification of existing approaches to floating support, again broadly within a 'case management only' model became widespread in the UK and in some part of Europe. In practice, Housing First was distinguished by having caseloads per team member of somewhere between *three and eight people*, rather than 25 or more people per team member.

In some countries, as was the case with the Canadian pilot programme *At Home/Chez Soi* and the French pilot programme, *Un chez-soi d'abord*, and subsequent national Housing First strategy, Housing First was developed and funded as a mental health intervention and followed the detail of the original ACT/ICM using significant budgets at national level. However, Housing First has often, as in the UK, not been developed or funded through a well-resourced national strategy, which means there is no overarching set of centralised expectations about what exactly a Housing First service should do. When this is combined with the inherent need to adapt any Housing First service to specific local circumstances variation can start to appear in what Housing First services do and how they work.

10 Stefancic, A., Tsemberis, S., Messeri, P., Drake, R. and Goering, P. (2013) The Pathways Housing First fidelity scale for individuals with psychiatric disabilities. *American Journal of Psychiatric Rehabilitation*, 16(4), pp.240-261.

Experience in the seven Housing First services

The approach taken by the seven Housing First projects can be summarised as follows:

- Fidelity was interpreted in terms of the ethos or philosophy of Housing First, not in relation to the relatively resource intensive ACT/ICM model which has proven difficult to develop and fund in the UK during the period 2010-2023.
- Each Housing First service had to adapt to local circumstances and to the patterns of need that they encountered, making some variation in the detail of operation inevitable.
- It was possible to maintain the ethos of a Housing First approach even in situations in which resources were constrained, access to other services was restricted and rapid access to affordable/social rented settled housing was challenging.
- In practical terms, the seven Housing First projects were all following these precepts:
 - Adequate housing is a human right.
 - Offering flexible, agile mobile support provided to people in their own homes, which can also be delivered in other settings as the person using the service decides.
 - Providing a very high degree of choice and control to people using Housing First, which includes individuals choosing which forms of support and treatment they will use.
 - Separating housing from support, i.e. people retain settled housing when/if they stop using Housing First and they hold their own tenancy for their home.
 - Following a harm reduction model, which means that Housing First does not require abstinence from drugs or alcohol, or engagement with medical or psychiatric/mental health treatment in order to work with someone.
 - Pursuing a broad recovery orientation, i.e. seeking to work with each person to enable a *mutually agreed* trajectory away from homelessness for people with high and complex needs, without expectations that their sustained exit from homelessness take a particular form.

This is a significantly shorter and broader approach to fidelity than was the case for the *original ACT/ICM model* developed by Tsemberis, or other examples of fidelity scale linked to the original ACT/ICM model of Housing First.¹¹ The day to day practice of the seven Housing First services was however close to the 2017 Homeless Link publication *Housing First in England: The Principles* which lists:

- People have a right to a home
- Flexible support is provided for as long as it is needed
- Housing and support are separated
- Individuals have choice and control
- The service is based on people's strengths, goals and aspirations
- An active engagement approach is used
- A harm reduction approach is used

The operational practices of the seven services in relation to fidelity differed from the original and some of the more recent guidance. The seven Housing First services did not show the same emphasis on recovery in the sense of an expectation that the risks and the treatment and support needs associated with homelessness would come to an end and, to use the original American terminology, that someone would eventually 'graduate' from Housing First. A key issue here was that treatment and support needs were often at a level at which the Housing First services could not see a way in which some people using their services would ever be able to manage independently. This was related to several factors:

- People were being referred to and accessing the seven Housing First services at a point at which physical and mental health problems were acute and had been for some time. Many people using the Housing First services were in a state of decline linked to limiting illness and disability and some were terminally ill.
- The process of rehousing or getting someone into their first settled home was protracted for several of the services. This meant that contact with Housing First took time to reach a steady state, as people were being supported in temporary accommodation, rather than a settled home, for months.

11 Greenwood, R.M., Bernad, R., Aubry, T. and Agha, A. (2018) A study of programme fidelity in European and North American Housing First programmes: Findings, adaptations, and future directions. *European Journal of Homelessness*, 12(3), pp.275-298.

- Access to some NHS and social care services was often slow, unreliable or so delayed as to mean that a service was effectively unavailable. This was particularly the case in relation to mental health services, although wider issues with NHS access were widespread, exacerbated by the effects of the COVID-19 pandemic which overlapped much of the evaluation period.
- The Housing First services were sufficiently resourced, but they did not, as is the case with most local authority commissioned Housing First services in England, have access to the level of resource that would have enabled an ACT/ICM approach to be taken. This meant they had no inbuilt capacity to offer social care, social work, health, mental health or addiction services.

This meant that realistic goals for the seven Housing First services centred on maximising wellbeing in whatever situation someone was living in, finding access to a suitable settled home as soon as possible and trying to maximise access to other services and improve quality of life. However, this created practical limits on what these services could achieve,

so that while the core ambition, which was to end homelessness that had been associated with high and complex needs was frequently attained and sustained they faced multiple challenges around addressing every aspect of ongoing need. The core goal of Housing First and the ultimate test of fidelity, an effective capacity to end homelessness among people with high and complex needs was being achieved by all seven services, but they were limited in some respects and so their interpretation of fidelity reflected those operational realities.

Wider research has reported that many Housing First services face similar difficulties across England. There are widespread reports of people being referred to Housing First services only at a point at which the long-term effects of limiting illness, disability, mental health and addiction issues are present. Challenges have also been reported in terms of being able to refer up to more intensive services, should treatment and support needs intensify or down to less intensive services if someone's needs should lessen. One of the most common reasons for contact with a Housing First service ending is the end of life.¹²

Key learning

The key learning from the seven Housing First services can be summarised as follows:

- Wherever Housing First is established, it must be recognised that the service needs an appropriate policy environment in which to operate, i.e. it must have reasonably fast access to suitable settled housing and sufficient quality and speed of access to social care, social work, NHS, mental health and addiction services to enable it to operate to its full potential.
- Housing First is not, in the UK, usually modelled on the ACT/ICM approach, it uses a lower cost intensive case management model, this has advantages as it means Housing First can be quickly and affordably established, but it also means that reliance on external partnerships is much higher, because Housing First without the resources of an ACT/ICM model cannot directly provide the psychiatric, addiction, social work and housing services that the people using it need.
- Housing First can end homelessness outside those operating conditions, something which all seven Housing First services demonstrated repeatedly, but no Housing First service can achieve full fidelity, in the sense of entirely matching expectations underpinning the ethos and philosophy of Housing First. If it lacks the right connections with other services and the right housing supply.
- Referral to Housing First needs to be managed, but may be happening too late in many instances, as all seven services reported having to support people with very high and complex needs in often challenging operational contexts. Housing First is not designed to function as a palliative service for people experiencing homelessness with high and complex needs, but to bring about an enduring end to homelessness.

12 Blood, I., Birchall, A. and Pleace, N. (2021) *Reducing, Changing or Ending Housing First Support. Research Report* London: Homeless Link

RESOURCE MANAGEMENT

The evaluation of the seven Housing First services identified five challenges around resource management:

- The budgets on which people with experience of homelessness had to manage were highly limited, relative to their living costs around essentials, i.e. food and energy and often restricted them to subsistence level lives, without the resources to pursue social activities.
- Wider pressures around the cost of living meant that the kinds of wages they could offer could raise challenges around staff retention.
- It was difficult for the services to expand because local authority commissioning budgets and other possible sources of income, for example social care and health service commissioning, were difficult to access in a situation of steep and sustained decline in those budgets.
- Reliance on external partnerships to access many resources, particularly health and social care and suitable housing was extremely high, the Housing First services had to foster multiple relationships in order to be able to function.
- The support of the Henry Smith Charity had been instrumental in creating services in locations that hitherto lacked Housing First, particularly in rural and suburban areas and in enabling established Housing First services to extend their parameters and scale, centring on supporting expansion into Housing First for women. There was no evident source of support other than the Henry Smith Charity to enable these expansions of Housing First within each of the areas in which the services were operating.

The household budgets of people using Housing First

The seven Housing First services responded creatively to the challenges around resources, using an agile approach in support to maximise access to community and other resources with the people they were working with. This meant working with people to enable access

to all benefits for which they were eligible, as very widely reported issues over inadequate access to Personal Independence Payments (PIP) and with the level of Universal Credit (and the Housing Element within it) being inadequate to meet basic living costs were routinely encountered by the services.¹³ People using Housing First were also connected to all the community groups and charities working locally who might provide assistance, with this sort of activity, the Housing First services could secure clothing, furniture, television sets and facilitate other basics like ensuring food and energy budgets were sufficient and enable Internet access. However, the need to focus extensive efforts on ensuring someone had enough resources to manage a basic level of existence in their own home created pressures on team member time, which might have been spent in other ways to help underpin and sustain exits from homelessness. Again, the seven Housing First services were successful in enabling and sustaining exits from homelessness for many of the people with complex needs with whom they worked, but considerable effort was being spent in ensuring many of the people using these Housing First services had the bare minimum.

The lack of personal financial resources, coupled with support and treatment needs that could both limit physical mobility and be associated with very poor self-esteem, created boredom and isolation among people using the seven Housing First services. This was difficult to counteract, because while arrangements might be made to support someone with limited mobility to access social support or to work with someone to build up the self-confidence needed for beneficial social interaction, there was a reality in which many of the people using Housing First did not have any money to spend on a social life or on any entertainment, beyond television and limited use of the Internet. Housing First team members arranged, facilitated and accompanied people using their services to activities, but the scope to do this was inherently limited across all seven services. Additional efforts were made over holidays like Christmas.

¹³ Patrick, R. (2017) *For Whose Benefit? The everyday realities of welfare reform* Bristol: Policy Press; Machin, R. and McCormack, F. (2023) The impact of the transition to Personal Independence Payment on claimants with mental health problems *Disability & Society*, 38(6), pp.1029-1052.

These working practices, which were essential, could also create pressures. Housing First teams were the main source of support around basic needs and around emotional needs, creating relationships that could, from the point of view of some of the people using the seven services, become intense, because they relied on their Housing First team member for effectively everything. During the COVID-19 pandemic, the Housing First teams might be the only contact that someone using one of the services had, which was often via a phone or social media because of lockdown protocols. After the immediate dangers of COVID-19 had passed, a second set of pressures arrived with the advent of the cost of living crisis associated with the Ukrainian war. This put further pressure on Housing First team members to try to ensure that the people using their services had enough resources to manage a basic existence and sustain their exits from homelessness.

Staff recruitment and retention

Homelessness services are not a high wage sector and the same is true of almost all Housing First services, regardless of how they are funded. Challenges arose in the context of the cost of living crisis associated with the Ukrainian war, as Housing First team members found themselves dealing with very rapid food and energy cost inflation at a speed that had not been seen in decades. This created personal pressures on some staff, but also meant that those leading Housing First services could find it difficult to retain and recruit staff. One Housing First service was able to respond to increasing wages, but not all were in that position.

This linked to the wider point that Housing First services are often operating on relatively limited budgets. This is not a criticism of the levels of support offered by the Henry Smith Charity, which were higher than those available to some local authority commissioners, but it was the case that Housing First is generally not financed at the same sort of levels in the UK as it is in some comparable countries. Housing First services in North Western Europe and Ireland do not face the same precarity of funding (short term contracts with local authorities which tend to fall in value over time) as has been the case in the UK since 2010.¹⁴ Local authority budgets in England fell by 18% in real terms between 2010 and 2023 (the decline had been much steeper but was offset by recent increases around COVID-19).¹⁵

The capacity of the seven Housing First services to respond to these pressures was inherently limited and much depended on the commitment and good will of their staff teams. Some of the services continued without much change, others saw some changes in their staffing, but in all instances, there was a high degree of commitment to the idea of Housing First and to the individual services for which Housing First team members worked.

Building and Expanding services

Capacity to create and build Housing First services outside the major cities and the capacity to extend services in scope, form or function has been strongly linked to the willingness and perhaps more so the *capacity* of local authorities to commission Housing First. The seven Housing First services supported by the Henry Smith Charity had come into being or been extended in scope only because of the funding they had received. The Henry Smith Charity Housing First Strategic Grant had created Housing First in some rural and suburban areas, supported it in others and enabled extension of two services into providing Housing First for women.

By the point at which the evaluation of the seven Housing First services came to a conclusion in late 2023, all had shown success in ending homelessness among people with high and complex needs and all were facing higher levels of need than they were equipped to deal with. Waiting lists were in place for several Housing First services. There were reasons to expand these services, but the possibilities around doing so were highly limited because there was no obvious source of additional funding. This situation may be subject to some change dependent on how the 2024-2029 Westminster government responds to homelessness, whether it pursues a national Housing First strategy and the decisions taken about local authority financing in England.

¹⁴ Blood, I.; Pleace, N.; Alden, S. and Dulson, S. (2020) *A Traumatized System: Research into the commissioning in the last 10 years* Leicester: Riverside.

¹⁵ Source: *Institute for Fiscal Studies* (2024)

Key learning

The key learning from the seven Housing First services can be summarised as follows:

- The potential of Housing First services can be undermined if they are having to spend a disproportionate amount of their limited time and resources ensuring that the people they are supporting have the bare minimum needed to sustain an exit from homelessness.
- Improvements to the welfare system and less restricted access to benefits designed to assist people living with limiting illness and disability would reduce the pressure on Housing First services and their staff, in particular around the reliance of people with experience of homelessness having to rely so heavily on Housing First.
- Quality of life is undermined for people using Housing First if they have no financial resources on which to draw to enable them to participate in social activity. There are limits to the extent to which Housing First services can counteract boredom and isolation that is strongly associated with not having any money at all once basic essential needs have been met.
- Housing First services need to be able to offer a living wage and ideally offer salaries at a competitive level to recruit and retain the right combination of staff for their teams.
- There is often scope to expand the scale and range of Housing First services, but there were limited options through which the services could pursue extra funding. The Henry Smith Charity had helped create, sustain and extend Housing First services in a context in which little other funding was generally available. A dedicated budget and systematic commissioning of Housing First within a clear national homelessness strategy would enable greater coherence of Housing First services and help maximise their potential in ending homeless.

HOUSING MARKETS AND SOCIAL HOUSING SUPPLY

Housing First in the UK often struggles to find enough secure, adequate and affordable housing. The reasons for this are twofold:

- Even where fast track referral arrangements can be made with one or more social landlords, finding enough housing quickly enough can be difficult, especially as social landlords are trying to respond to multiple forms of housing need with a limited supply of housing.
- Multiple issues exist in the private rented sector (PRS). Standards in the lower end of the sector, accessible to people using Housing First who are reliant on benefits, can be extremely poor. More generally, the PRS has worse standards of thermal efficiency and repair than either social housing or owner occupied homes. Rents are often very high, in part because some small landlords are exiting the sector and in part because owner occupation and social rented housing have both become harder to access. While insecurity is not universal, someone renting from a PRS landlord has far less security of tenure than someone in other tenures, something that will remain the case even after 'no fault' evictions¹⁶ are abolished.

Demand for housing does vary with the nature of housing markets. Among the seven Housing First projects, three, one in North Wales and two in West Sussex, housing markets were under specific pressures because of the presence of Airbnb and holiday homes. Alongside this, smaller towns and rural areas can lack the right sort of housing in terms of what the benefits system will fund (a small one-bed flat or apartment), because for example the housing that is available is more likely to be family sized homes or in the form of detached housing than is the case in an urban environment.

Those among the seven Housing First services that had access to at least some social housing or their own housing stock were less likely to have to support people using their services in temporary accommodation for prolonged periods. That said, no single source of housing supply was consistently

reliable, i.e. there was no single 'ideal' model that could be easily transferrable to any Housing First service working in the UK.

The other challenges centred on where housing (and sometimes temporary accommodation) was located. Homes available at relatively shorter notice at the right level of rent could often be in areas that had social problems, such as high rates of crime, anti-social behaviour and wider issues with low social cohesion. Alongside this, there could be issues in suburban and rural areas with poor public transport links, wherein housing could be suitable on most points, but too far away from services, shops and other amenities, creating risks around isolation and access to treatment. Physically distant housing also creates challenges for Housing First services, if for example their teams have to spend a large amount of time on the road.

Landlord reluctance remained as an issue, as knowledge about Housing First and about the characteristics and needs of the people using it was inconsistent. Landlords, both social and PRS could view people experiencing homelessness as representing a series of risks, including unreliability in paying rent and other charges, addiction and mental illness that manifest as anti-social and criminal behaviour. The issues with social and PRS landlords seeing lone adults experiencing homelessness as 'problem tenants' and being reluctant to house them on that basis have been around for decades. These attitudes are not found everywhere and some social landlords, as was the case for some of the working partnerships among the seven Housing First projects, are actively supportive of Housing First. Nevertheless, these attitudinal barriers to some suitable housing can and do still exist.

¹⁶ In England.

Key learning

The key learning from the seven Housing First projects can be summarised as follows:

- Circumstances vary, so there is no single, simple solution to securing sufficient housing supply of the right sort for a Housing First service.
- Working entirely with a single tenure may not be advisable. While social renting provides generally better standard housing at a much more affordable rent and with much greater security of tenure than the PRS, pressures on the sector do mean that it can struggle to respond quickly and appropriately. Equally, the PRS while it may be able to offer housing more quickly, can have poorer standards of housing management, does not offer security of tenure and at the lower end open to people reliant on benefits, can often offer poor standards of housing.
- Issues with housing supply can impair the operation of Housing First. Wherever possible, advance planning to work to try to ensure that there is a steady stream of suitable housing in place will minimise the risks that people using Housing First will spend prolonged periods in temporary accommodation or be housed in unsuitable ways. Being prepared to pursue multiple sources of possible housing supply should be a part of this process.
- An awareness of location, logistical limits and the wellbeing of people using Housing First is crucial. Housing that is suitable in terms of standards, costs and security, but which is located in areas with severe social problems and/or in peripheral or isolated areas with poor communications and public transport links is likely to create issues such as isolation and poor access to treatment and support.
- Housing supply will almost certainly be difficult at some point for every Housing First service in the UK. There are deep structural flaws in the UK housing system that mean that housing prices and private sector rents have become hyperinflated, particularly in more affluent areas with more job opportunities, which means Housing First operating in such locations will face major challenges without some forms of social housing supply being available. More generally, social housing supply is marginal in many areas of the UK, to the point where it is often not available for rapid rehousing.
- The realities of the cascade failure of the UK housing system need to be faced by all Housing First services. This means readiness and capacity to effectively support people in temporary accommodation for protracted periods, as this is likely to be an issue at least some of the time for many services. It also means that working on multiple fronts, with PRS, social landlords and other potential sources of suitable housing, rather than relying on a single source for suitable homes will often be necessary.

RESPONDING TO HIGH AND COMPLEX NEEDS

Some challenges exist for many Housing First services working in the UK. All Housing First is designed primarily for what in most countries, including the UK, is a *minority* of people experiencing homelessness whose homelessness is associated with multiple, complex and high treatment and support needs.

This group of people is at heightened risk of chronic (long term) and episodic (repeated) homelessness and more likely to experience both sustained use of homelessness services and experience of living rough. Characteristics include combinations of severe mental illness, addiction, limiting illness, disability, experience of trauma and abuse dating back to childhood and high frequency contact with the criminal justice system.¹⁷ At any one point, several thousand people in the UK are in this group, including some people in supported housing for people experiencing homelessness and some of the smaller number of people sleeping rough. The bulk of homelessness in the UK at any one point is families in temporary accommodation. For example, while there are some 33,000 spaces in supported housing for people experiencing homelessness in England¹⁸, around 112,000 homeless households containing some 146,000 dependent children were in temporary accommodation in England in December 2023¹⁹, compared to around 4,000 people sleeping rough in England at any one point.²⁰

The reality of the nature of UK homelessness, i.e. that a high cost, high risk but also relatively *small* population of people with high and complex needs associated with repeated and sustained homelessness²¹ has important implications for Housing First as a service level response and as a strategic response:

- The level and nature of need creates a context in which Housing First is a logical and relatively

affordable response. In a mid-sized city, suburban or rural area Housing First will be working with dozens, but *not* hundreds of people. This makes Housing First practical because it means that ambitions to secure enough housing supply to largely end recurrent and sustained homelessness associated with high and complex needs are not hopelessly unrealistic. At local authority level, Housing First services do not require hundreds of properties all at once and in some smaller areas, they may well not require as many as one hundred homes in order to significantly reduce long-term and recurrent homelessness.

- Equally, pursuing a higher intensity support model with workloads of somewhere between three and eight people for each Housing First team member becomes a realistic and workable model if there are inherent limits to the scale that Housing First services are going to need to reach. Housing First can be cost effective because it is highly targeted.
- It is this realisation, that Housing First is a targeted response for a relatively small and specific population, rather than a massive strategic programme that has helped fuel the adoption of Housing First by North American and European governments, as well as by Scotland, Wales and Northern Ireland in the UK. At the time of writing England lacks a national Housing First strategy, but following the 2024 election this looks set to change.

17 Kemp, P.A., Neale, J. and Robertson, M. (2006) Homelessness among problem drug users: prevalence, risk factors and trigger events. *Health and Social Care in the Community*, 14(4), pp.319-328; Fitzpatrick, S., Bramley, G. and Johnsen, S. (2013) Pathways into multiple exclusion homelessness in seven UK cities. *Urban Studies*, 50(1), pp.148-168. England, E., Thomas, I., Mackie, P. and Browne-Gott, H. (2024) A typology of multiple exclusion homelessness. *Housing Studies*, 39(3), pp.695-719.

18 <https://homeless.org.uk/knowledge-hub/2022-annual-review-of-support-for-single-homeless-people-in-england/>

19 <https://www.gov.uk/government/statistics/statutory-homelessness-in-england-october-to-december-2023/statutory-homelessness-in-england-october-to-december-2023#temporary-accommodation>

20 <https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2023/rough-sleeping-snapshot-in-england-autumn-2023>

21 <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/homelessness-monitor/about/the-homelessness-monitor-great-britain-2022/>

However, the nature and focus of Housing First also sets some important parameters around how services should work:

- Housing First services are case management based, they need reliable access to other services, ranging from mental health or addiction through to social housing and (at the time of writing foodbanks), if they are to work reliably and deliver the best outcomes.
- The ACT/ICM model as originally developed in the US and implemented in Canada, Denmark and France minimises reliance on other services because it provides intensive case management teams and has the capacity to scale-up support to its integral assertive community treatment teams when support needs are high. If addiction, mental health, medical and other services such as peer support are built into Housing First many needs can be met in-house. UK models of Housing First are largely case management only, i.e. they lack this capacity and rely heavily on effective access to other services.
- Housing First needs to have capacity to refer up, when treatment and support needs become too acute to support using mobile support and ordinary housing and to refer down when someone's treatment, support and day to day needs around sustaining an exit from homelessness no longer require the intensive support offered by Housing First.
- The realities of working with people with high and complex needs have to be recognised in how Housing First is funded, i.e. it must have sustained and sufficient resources and in terms of the nature of employment it offers, i.e. salaries need to be sufficient to recruit and retain the right staff and reflect the nature of the work they do. Support for staff is also an important consideration in how a Housing First service should operate.

Risk management

From the experience of the seven Housing First services supported by the Henry Smith Charity, the key issues in responding to multiple and complex needs centred on various dimensions of risk management:

- If Housing First services could not connect quickly with the other services someone needed to meet their treatment and care needs, or address more basic needs around food, energy and furniture (for example), ensuring positive outcomes over a sustained period was going to be more difficult. At best, poor responses from other services put increased pressure and responsibilities on Housing First team members whose entire working lives were spent with often highly vulnerable and sometimes challenging people with very high and complex needs.
- Housing First services can end up maintaining support for people whose support needs lessen. This can happen, once they feel ready and decide they no longer need Housing First, if they are still in need of some help but there is nowhere to go for lower level support. From a logistical standpoint, it can mean a Housing First service is running at least several dormant or semi-dormant cases because those people still need at least some access to support.
- Housing First services could also find themselves effectively providing palliative care to someone whose treatment and support needs had escalated above the levels that Housing First should be expected to manage. Here, the issues could again be around access to and availability of other services, which might be forms of intensive supported housing through to social (care) services and NHS provision. This could distort the ways in which Housing First services were operating, for example by having to draw on more than the designed-in level of maximum support for one or more people for sustained periods.
- Social isolation, boredom and low self-esteem could be major barriers to engagement with services and in establishing a greater degree of positively chosen independence and progress in relationship building. Housing First team members could support this on multiple levels, but there were risks in providing emotional support to people who had often experienced a lot of loss, social marginalisation and rejection.

Key learning

The key learning from the seven Housing First projects can be summarised as follows:

- A capacity to improvise within existing resources while making as many useful connections to external services as possible was at the core of managing high and complex needs. In many senses, unreliability and uncertainty around access to external support, and a need to react quickly when something was on offer, were crucial to providing the mix of support that people using the Housing First services needed.
- There was a reality of people being referred with very high and complex needs who were quite often at the end of a pattern of sustained, unsuccessful engagement with other forms of homelessness service. Treatment and support needs were often complex and profound and could be combined with issues around addiction and associated criminality, while both poor mental and physical health, including limiting illness and disability were almost universal. The people using Housing First had often exhausted other service options and, alongside their homelessness, other support, treatment and care needs had not been addressed, often for sustained periods. Housing First had to be attuned to these needs and have the capacity to respond to them.
- The seven Housing First services highlighted the importance of time in responding to high and complex needs and successfully managing risk. Time to work with someone on an open ended basis was seen as very important, both in having the space to build the working relationship needed and gain trust and in being there to help someone using Housing First manage the often long waiting times for many services. Time in terms of having relatively small caseloads, which enabled some flexibility around increasing and lowering support time was also highlighted. Duration of contact also enabled a better understanding of need, character and experiences, i.e. better recognition and management of need, within a coproductive approach in which someone was listened to and their preferences recognised meant a depth of understanding could be built up. Ultimately that depth of understanding enhanced service effectiveness and outcomes, because it meant that what someone was feeling and what they needed was better understood.
- Housing First team members across the seven services talked in terms of creating normal, social situations in which discussions around support could take place. For example, this might involve meeting someone in a coffee shop or café, rather than visiting them at home. Alongside this, efforts were made to enable appropriate contact with family and friends and to introduce people to activities, usually run by community groups or local charities, that helped create opportunities for social interaction. There was no single, standard approach to keeping these working relationships appropriate and manageable, experience and emotional intelligence were crucial qualities in trying to ensure that a formal support relationship was not misinterpreted. It is important not to downplay these challenges or the need that Housing First team members can have for support in managing them. During the COVID-19 lockdowns, the only human contact that many people using the Housing First services had was with a Housing First team member.

STRATEGIC INTEGRATION AND JOINT WORKING

Existing research on Housing First in the UK has tended to indicate relatively poor strategic integration of Housing First services. One reason for this is that many Housing First services have been small scale short-term pilot programmes or been funded through ever diminishing and precarious local authority commissioning, meaning that they do not tend to be large in scale or an established part of the service landscape.

There are exceptions, *Camden's Housing First programme* which the London Borough of Camden introduced in 2010, was one of the first in England. Camden Housing First worked by taking referrals for people who had become 'stuck' in the existing resettlement pathways offered by the Borough, i.e. people whose recurrent or sustained homelessness was not being resolved by existing services, all of whom had high and complex needs. The *approach was a success* and Housing First was expanded into an integral part of Camden's strategy. At a wider scale, the *Scottish Pathfinder Housing First programme* and the *Greater Manchester Housing First programme* are further examples of strategic integration.

However, Housing First services can find themselves sitting outside local homelessness strategy, or because they are operating at a small scale and on a precarious basis, not taking a very large role in local responses to homelessness. The seven services experienced different dimensions of working relationships, with Bench Outreach having a longstanding working relationship with two London boroughs that facilitated access to social housing. However, other services were not particularly close to their local authorities, perhaps in some cases because those authorities had no track record in commissioning Housing First and the Housing First services were supported from an external source, the Henry Smith Charity. Again, the relative scale of Housing First services, which in much of the UK *tend to be quite small*, can also be a barrier to strategic integration, even where they have been commissioned by a local authority.

The key challenges here centre on strategic decisions about Housing First that are outside the direct control of individual services. There is ongoing progress in Scotland, Wales and Northern Ireland in developing integrated homelessness strategies that incorporate Housing First. England was recently described (over the period 2010-2024) by the National Audit Office in the following terms: *the government still has no strategy or public targets for reducing statutory homelessness* while noting that there have been significant increases in homelessness.

The 2019-24 Government *simultaneously advocated Housing First* while providing no national level strategy, programme or resources to support it, *beyond three relatively small pilot programmes* which were only commissioned long after the evidence base for Housing First had been established. Instead, the main budgets that were available to commission Housing First, held by English local authorities, were cut by 27% *between 2010-24* and an estimated *£1 billion* was cut from annual budgets for homelessness services at local authority level. The development of a coherent, integrated and properly resourced English homelessness strategy, where 85% of the UK population live, has been a matter of urgency for some years.

There is no easy answer around enhancing strategic integration for Housing First, but the experience of the seven Housing First services was that trying to build and maintain relationships with local authorities and other service providers was crucial to successful engagement. This was often a demanding task, local authorities, short of resources and with falling staffing levels were not always very receptive. There were also

a large number of other relationships that the Housing First services had to try to cultivate with local hospital trusts and Clinical Commissioning Groups (CCGs) and NHS Foundation Trusts, social (care) services, the local criminal justice system and social landlords, all of which were increasingly short of resources. COVID-19 created specific difficulties in engaging with overtaxed NHS services.

Key learning

The key learning from the seven Housing First projects can be summarised as follows:

- Insofar as possible, close collaboration needs to be developed with local authority homelessness leads as soon as possible, ideally before a service becomes operational. This should include formal integration into referral processes so that Housing First is a clearly defined partner in local homelessness strategy.
- High quality data that show the successes of Housing First needs to be collected to share with the local authority and other partner agencies. This is particularly important if a Housing First service is to have a secure future as a local authority commissioned service that is taking a clearly defined and demonstrably important role in preventing and reducing homelessness. Individual success stories can help bring these points home to partner agencies.
- Housing First has to show how it is useful, how it will enable better responses to homelessness and help reduce some of the wider pressures on other services, it cannot be expected to be automatically welcomed in a context in which other homelessness, the NHS, local government and social landlords are constricting and struggling to meet basic operational targets as resources continue to constrict. This situation may ease somewhat going forward, but the legacy of the 2010-2024 austerity on all aspects of local governance, the NHS and social care will present an ongoing challenge.
- There are limits to what an individual Housing First service can do as much depends on the attitude and approach taken by national and central governments. If Housing First becomes an integral part of a coherent and sufficiently resourced homelessness strategy in England and positive developments continue in Wales, Scotland and Northern Ireland, this will be important in ensuring Housing First services take their proper place in an integrated, preventative and housing-led response to homelessness at UK level.

HOUSING FIRST FOR WOMEN

The evidence on Housing First for Women (HFW) is underdeveloped at present, although the research on which this guidance is based²² and some other UK research²³ and some North American literature²⁴ has so far indicated that there is a clear case for the development of Housing First that is designed, managed and delivered by women for women. The key issues that have been identified at present are as follows:

- As is indicated by *wider research* on women's experiences of homelessness in the UK and recent research *in London* there are strong associations between women's experience of recurrent and sustained homelessness linked to high and complex needs and domestic abuse and gender based violence. This is within a broader association between all forms of homelessness, including what is usually referred to as family homelessness (which is disproportionately composed of lone women parents with dependent children), domestic abuse and violence against women and girls (VAWG).
 - All available research evidence clearly indicates, as is the case *around all dimensions* of domestic abuse and gender based violence, that women experiencing homelessness are *much more likely* to have experienced abuse and violence than men experiencing homelessness. *Existing evidence* is that women whose recurrent and sustained homelessness is associated with multiple and complex support needs, are *extremely likely* to have experienced violence and abuse.
 - There is growing evidence that because of the extent of domestic abuse and violence experienced by women who become homeless that women's homelessness has different patterns of causation to that of men. A key initiative in the UK in recent years has been the *Domestic Abuse Housing Alliance* (DAHA) which uses a process of accreditation with housing providers that is designed around early detection of domestic abuse within a framework of homelessness prevention.
 - There is *some evidence* that lone women experiencing recurrent and sustained homelessness associated with multiple and complex treatment and support needs are very often parents. Separation from children, either because a woman has left children with extended family when homelessness threatened, or because children have been taken into care by child protection services appears to be widespread on the basis of this existing evidence. This creates both specific needs around trauma linked to separation from children and around the careful management of support in reconnecting women with their children.
 - The specific needs for women using Housing First can be summarised as 1) a need for Housing First to integrate safeguarding for women against ongoing risks of abuse and violence as part of the core service offer 2) provision of women team members to work with women using Housing First 3) an operational and strategic requirement that Housing First services for Women are designed, managed and provided by women.
- The experience across all seven Housing First services was that women had distinct needs that centred on the nature of their experiences and the trauma that they were very likely to have undergone from domestic abuse and VAWG. In practice, experience of these abuses and violence were reported as effectively universal among the women using the seven Housing First services. However, it is important to note that there has long been a tendency in homelessness,

22 Bretherton, J.; Pleace, N. and Colliver, K. with Heap, C. (2024) *The Henry Smith Charity Housing First Strategic Grant: Research into the Effectiveness of Housing First Services* University of York: York.

23 Quilgars, D.; Bretherton, J. and Pleace, N. (2021) *Housing First for Women: A five year evaluation of the Manchester Jigsaw Support project* York: Centre for Housing Policy;

24 Oudshoorn, A., Forchuk, C., Hall, J., Smith-Carrier, T. and Van Berkum, A. (2018). An evaluation of a Housing First program for chronically homeless women. *Journal of Social Inclusion*, 9(2), pp.34-50; O'Campo, P., Nisenbaum, R., Crocker, A.G., Nicholls, T., Eiboff, F. and Adair, C.E. (2023) Women experiencing homelessness and mental illness in a Housing First multi-site trial: Looking beyond housing to social outcomes and well-being. *Plos one*, 18(2), p.e0277074.

health, welfare and other services to problematise women, i.e. to effectively make excuses for a lack of dedicated planning, thought and sufficient resources – and indeed a basic lack of recognition of women’s needs – by presenting women as ‘complex’ or ‘challenging’. This sort of narrative enables services (and whole strategies) to claim that the supposed ‘complex and challenging’ characteristics of women are a reason for poor service outcomes, rather than basic failings in service design and planning.

By extension, it follows that a strategic or policy response that says every area should have a HFW service, which while it may be a good idea in itself, does not become a way of avoiding wider consideration of women’s needs when they become homeless. If women’s needs are to be properly recognised across all Housing First services and in Housing First strategy (at whatever point that may come into existence in England) then *all practice across all Housing First services* needs to be modified to fully recognise and respond to women’s needs.

Two of the seven Housing First services had been supported by the Henry Smith Charity to provide specialist Housing First services for women, were both adding dedicated HFW capacity to existing Housing First services, rather than building a freestanding HFW service, which has happened in *Greater Manchester*. In both cases, these Housing First services reported being convinced of the need for dedicated HFW team members because of the nature and extent of need they were experiencing among women using their Housing First services. The HFW team members quickly reached capacity and there was thought to be a need for additional HFW services.

The need for safeguarding was widely reported because women were often being pursued by former partners who had been abusive. This was not part of the original design of Housing First, largely because data on women’s experience of homelessness were inadequate, which meant it was *underreported*, and so it was assumed that most of the people using Housing First would be lone men, whose needs would often include an *absence* of social connections. Experience with HFW and with wider use of Housing First by women is that problematic, risky and dangerous relationships that women need to get away from often lie at the core of experience of recurrent and sustained homelessness. This means the nature of what Housing First does has to be refocused on ensuring that women are not only securely, adequately and suitably

housed, but also that they are physically safe. This requires liaison and coordination with landlords, with the criminal justice system and with other women’s homelessness services.

The traumatic effects of recurrent and sustained homelessness will often be combined with the damage to health and wellbeing that has resulted from abuse and violence. This can mean that women will tend to represent with more complex needs than is the case for men using Housing First. The process of resolving their homelessness and enabling women into a secure position, in which the risks of further homelessness are much reduced, may typically mean that they require more support for a longer period than lone men. This is not to suggest that men were not presenting to the seven Housing First services with very high, complex and multiple treatment and support needs, rather that for many of the women, those needs were still more acute.

There are multiple reasons not to have male team members working with women who are using Housing First. The option to have a woman team member should always be in place, but wherever practical and possible, the nature of the experiences that women using Housing First have had does very strongly suggest that using women team members should be the default approach.

Reconnecting women with family and with children is again a dimension that was not specifically allowed for within the original design of Housing First. This is not to say that there was no allowance, as broad support with reconnection and social integration and creating and rebuilding relationships has always been part of the model. However, there can be dimensions of this process that could be potentially time consuming and complex to process for Housing First team members, such as liaison and coordination with social work and child protection services and support for women in dealing with the court system.

The women using the seven Housing First services were also presenting with other issues. Housing First team members were not simply supporting highly vulnerable women who needed safeguarding, those women also had the same mix of treatment and support needs as everyone else using Housing First, i.e. limiting illness and disability, severe mental illness, addiction and high rates of contact with criminal justice systems. Again, this underlines the complexity of understanding and meeting women’s needs when using Housing First which has two main implications:

- Case loading for Housing First team members working with women may need to be carefully considered as the relative complexity of individual cases may be typically higher than that for men. Duration of contact with Housing First may also need to be longer.
- In design and in strategic planning, the use of HFW team members and HFW services should be built on the assumption that the services they offer will be designed, managed and delivered by women.

Key learning

The key learning from the seven Housing First projects can be summarised as follows:

- There was a recognised need for HFW services, as evidenced by the experience of services' in supporting women using Housing First.
- Women's treatment and support needs, combined with frequent requirements for safeguarding, often meant that they presented with more complex needs than was the case for men. There are some implications for caseloads and resourcing which arise because of this, HFW, either in terms of dedicated Housing First team members or HFW services may typically need more resources per person.
- The process of ending support could equally be more complex for women, both in the sense that their needs could require more intensive support for longer periods from Housing First, but also in ensuring that ongoing needs, including around safeguarding, would be properly provided for when women decided they no longer needed Housing First.
- While it has to be recognised that women will often have still more complex treatment and support needs, there are dangers in narratives that start and stop with the idea that HFW is necessary because women have 'more complex' needs. This links to wider evidence that mainstream health, welfare and other systems have often responded to women by problematising them, i.e. define women as more 'complex' or 'challenging', when their unmet treatment, care and support needs are actually – at least in part – linked to systemic failures and incorrect assumptions about women's experiences. All practice in all Housing First services needs to fully recognise and respond to women's needs, it is not enough to create a separate HFW sector.

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