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## Foreword from Moya Woolven, CEO of Basis Yorkshire

As CEO of Basis Yorkshire, I would like to thank Homeless Link for providing the funding which has enabled us to produce this review, the team of consultants led by Helen Woods, all the participants, including professionals from Basis who attended focus groups and agreed to be interviewed and most importantly the women who agreed to share their experiences with accessing housing in Leeds. A special thank you is also owed to Catherine Tottie for her contribution to this report.

Leeds is a compassionate and progressive city with a strong history of partnership working to safeguard those who live here. This compassionate approach was also clear in the city's immediate response to women's homelessness when the first lockdown was called for, with the provision of women-only emergency accommodation, one of the first cities to do so in England. The findings of the report reflect the experiences of those who have moved through the homelessness system in Leeds and show that despite best strategic intentions and a great deal of good practice, there is still work to be done to ensure that the ambitious and innovative strategic intentions deliver improvements in practical outcomes for women. We hope that the learning contained within can further strengthen the system to ensure that Leeds achieves its ambitious plans for ending homelessness, for everyone, for good.

While focusing particularly on the needs of women who sex work, we recognise that the experiences described within this report are common among many women who require access to intensive support. We very much hope that the findings of this report can be used broadly in reducing inequality for women across the city. We hope it can act as a springboard for continuing further partnership work to explore both the outcomes and recommendations within, to make changes to further reduce or remove barriers that prevent women from accessing the support they need when finding appropriate and safe homes in Leeds. We also hope it can inform wider learning for those working in the housing and women's sector. Whilst we acknowledge that the primary focus on those who require access to intensive support means the review is limited in its scope, and also that some of the recommendations are already underway, the experiences of stigma and marginalisation described affect sex workers everywhere.

# Acknowledgements from the author

Central to this research was talking to and working proactively with women who sex work to ensure that their views and experiences shaped this study. Thank you to those women who took time out to talk to us.

Thanks also go out to the range of stakeholders who shared their knowledge and experiences.

And thanks go to the team at Basis Yorkshire for their expertise and input into the development of this report.



## **Summary of Findings**

Sex work is a largely gendered profession. Societal gender inequality intersects with stigmatising attitudes towards sex work to mean that women engaged in any form of sex work can find themselves socially isolated, excluded from services, and facing hostile policies and practices. This is particularly true for sex workers accessing homelessness services, where gender is often not a conscious consideration in service design. To be fully inclusive of women who sex work, homelessness services must actively work to overcome gender inequality and provide a service that safeguards women from stigma and abuse at all levels of delivery.

Many women experiencing homelessness are living with the impact of trauma, often caused by stigma, poverty, past abuse, and deprivation. Exposure to trauma is often higher for homeless women who sex work. In particular, women engaged in street sex work are more likely to require access to multiple streams of support, many of which will stem from past or current trauma. Gender, trauma and stigma informed approaches are required to respond to the realities of the challenges faced by many women who sex work. Many housing and support services in Leeds are committed to implementing these approaches. Despite this, the women interviewed for this report highlighted common experiences of stigmatisation. Negative experiences had a ripple effect, and the lasting emotional and practical impacts of these continued to create barriers to services at all levels.

Homelessness among women is often hidden from view and therefore less likely to be picked up by statutory services. Women's homelessness is more likely to be defined by temporary and insecure stays with friends or family, sofa-surfing, stays in temporary accommodation, housing that is in poor or unsuitable conditions, or risk of violence within the home. Women are significantly less likely to sleep rough due to fear of violence on the street, meaning they are often hidden from street outreach services and official measures of homelessness. Homelessness provisions are often male-dominated environments, and many women will avoid these due to concern about potential risks these spaces may pose. While focused on women who sex work, many of the experiences described within this report are reflective of the wider experiences of women experiencing homelessness, particularly those who require access to more intensive levels of support as they move through the system.

The Covid-19 pandemic has had a significant impact on sex working women. Social distancing meant many women found themselves unable to work safely, forcing many to choose between their income and the risks associated with Covid-19. Many services had to make drastic adaptations to their delivery model, with reduced or digital contact becoming the norm. These shifts alongside increased social isolation more broadly have taken a toll on women's mental health and overall wellbeing.

Despite the widespread challenges posed by the pandemic, there were a number of positive outcomes triggered by Covid-19 for women across Leeds. "Everyone In" and the associated changes to housing pathways meant many women accessed services for the first time. These key changes include:

- The widening of the Somewhere Safe to Stay model, with the provision of gender-specific, self-contained emergency accommodation units opened in response to Everyone In and wrap-around support on-site.
- The temporary suspension of the Choice-Based Lettings process and the establishment of an Emergency Lettings Panel which prioritised those experiencing homelessness into affordable permanent accommodation.
- The introduction of a Single Point of Contact (SPOC) within Housing Options to facilitate move on from hotels into supported housing.
- The significant increase in partnership working between statutory and third sector services, with the aim of improving outcomes for those accessing support.

However, both during the pandemic and more broadly, women who sex work continue to face barriers when accessing homelessness services and secure long-term accommodation. The most significant barriers identified within this report include:

- The shortage of good quality affordable housing in the social and private sector.
- The stigmatisation of sex work and the implicit and explicit discrimination this can cause.
- The need for greater implementation of consistent gender and trauma-informed approaches to support service provisions at all levels.
- Limited capacity for flexibility meaning services can be slow to respond in times of crisis.
- Insufficient use of information sharing pathways between agencies providing support services to those experiencing homelessness.
- The shortage of appropriate refuge accommodation for individuals who require access to intensive support who are fleeing domestic abuse.
- Concerns regarding the long-term impact of Covid-19 on job losses, unemployment, and the return to no-fault evictions.

The pandemic triggered a national shift in approaches to homelessness, with 'Everyone In' changing the system overnight. Leeds were one of only two local authorities nationally to immediately implement emergency accommodation providing for women specifically. This gender and trauma-informed approach made services accessible for many women who sex work. However, some of the positive changes to housing pathways were put in place temporarily and are not currently planned to continue once pandemic restrictions are lifted. Similarly, some stakeholders expressed concern about the momentum for improvement during the early stages of the pandemic being sustained over time. This report outlines the widespread improvements to housing systems for women who sex work, but further highlights the space to build upon this foundation to create greater long-term systems change.



## 1. Introduction

Throughout the last ten years, rates of homelessness in the UK have increased dramatically and unanimously across the country. Life stressors including poverty, health conditions, domestic abuse, trauma and addiction can intersect with an insecure housing market to mean housing is difficult to find and harder to maintain. For women who sex work, the additional stigma of their work can intersect with the above, meaning they are disproportionately represented in UK homeless populations.

Basis Yorkshire supports women in all forms of sex work, empowering women to work in ways that support their safety and wellbeing. Basis contributes to the wider Leeds Sex Work Strategy developed by Safer Leeds including working closely with Leeds City Council (LCC) and West Yorkshire Police (WYP) alongside numerous other agencies in delivering the 'Managed Approach', aimed at improving long-term outcomes for sex workers across the city. This includes the Holbeck Managed Area, which aims to safeguard street sex workers by widening support opportunities and

reducing the enforcement of street sex work-related arrests. Basis operates an evidence-based, person-centred model to advocate for the rights of women who sex work to work safely, free from stigma and inequality. This report, commissioned by Basis, is designed to address the experiences of housing and homelessness for women engaged in sex work across both street and indoor settings.

The Covid-19 pandemic saw a dramatic shift in homelessness provisions in local authorities across the UK. Innovation in emergency housing available to women and greater flexibility with referrals to social housing resulted in a notable improvement to outcomes for women known to Basis. It is recognised, however, that housing capacity remains highly restricted. This report explores the shifts to housing systems and responses to homelessness that occurred as a result of the Covid-19 pandemic. It outlines learning from women who have sex worked whose housing situations were impacted by Covid-19, as well as women who have sex worked with experiences of

homelessness more generally, and proves how their knowledge can influence future practice to improve the lives of women locally and nationally.

While this report focuses on women who sex work, many of the experiences described are not exclusive and are instead common among many women engaging with the homelessness and housing sector. This is particularly true for women who require access to more intensive levels of support, for whom homelessness and trauma often intersect to make services inaccessible. By producing this report we seek to explore how and why women's patterns of homelessness are different, and what change agencies can make to achieve more consistently successful outcomes that account for gendered differences. By analysing the housing system in Leeds and producing recommendations to agencies across the city, we hope to advocate not only for women who sex work but for any woman coming into contact with homelessness services.

### 2. Research methods

### 2.1 Methodology

Basis Yorkshire commissioned Helen Woods, Perry Richards Management Services, and associates Yvonne Prendergast and Sarah Clement to research and write this report. The methodological approach taken, which complied with Covid-19 restrictions in place at the time, is outlined below:

- A brief, literature review of relevant documents.
- Interviews with 5 women who sex work.
- 3 case studies provided by Basis staff about the women they have supported.
- One to one interviews and an online focus group with staff from Basis
- Semi-structured interviews and three online focus groups with local government, third sector and other stakeholders.
- A discussion with Housing Solutions Working Group.

Stakeholders we spoke to were from the following organisations and our thanks go to all who participated:

Basis Yorkshire

Beacon

Change Grow Live Street Outreach

Engage

Housing Solutions Group

Joanna Project

Leeds City Council Commissioners

Leeds City Council Community Safety Team

Leeds Community Health Care Trust

Leeds Housing Options

Leeds Women's Aid

Simon on the Streets

Together Women Project

**Turning Lives Around** 

West Yorkshire Police

#### 2.2 Research Limitations

When asked about diversity monitoring, most stakeholders said that those who accessed their service were primarily white British. All the women involved in this study self-defined as white British, with one additionally describing herself as a Traveller. This raises questions about the accessibility of services for women engaged in sex work who also experience racism.



# 3. Context3.1 Housing pathways in Leeds

The term 'housing pathways' refers to the range of options and services available to people who are homeless or at risk of homelessness. While not an exhaustive list, some of the primary services working in Leeds are as follows:

**Housing Options:** Leeds City Council (LCC) Housing Options department provide advice to prevent homelessness and carry out statutory homelessness assessments in line with legislative guidance set out in the Housing Act 1996 and the Homeless Reduction Act 2017.

Homelessness outreach services: Change, Grow, Live (CGL) is the central street outreach service to locate rough sleepers and to help them move towards secure accommodation. They work alongside Simon on the Streets, a street-based support service for those experiencing rough sleeping or who are vulnerably housed. Basis Yorkshire and Joanna Project provide outreach for women who sex work experiencing homelessness. Beacon also provides an outreach service.

Rapid Rehousing Pathway: Barca Leeds work with people who are street visible, street begging and/or rough sleeping, who have recently been in a tenancy or are close to getting one. They support individuals who do not otherwise engage with services and experience multiple needs including homelessness, substance addiction, recent offending, and current mental ill-health.

**Drop-in services:** St Anne's Resource Centre is a homelessness resource centre, working with people who are homeless, rough sleeping or precariously housed. Basis Yorkshire and Joanna Project provide drop-in facilities for women who sex work, although this has been suspended during the Covid-19 lockdown. Together Women Project Leeds also run a drop-in centre for women who are in, or at risk of becoming involved with, the criminal justice system from their Leeds centre.

Emergency accommodation: St. George's Crypt provides mixed gender emergency accommodation service for rough sleepers and other single homeless people, primarily utilised to house single homeless men. In early 2020 St Anne's began providing the Safe to Stay Hub, a 5-bed women's emergency accommodation unit developed as a response to the need for gender-specific emergency accommodation. The Hub was forced to close as a result of Covid-19, as all emergency beds were within the same room and did not allow for social distancing or self-isolation. This was replaced with gender-specific hotel based emergency accommodation as part of the national Everyone In scheme.

**Domestic abuse services:** Leeds Women's Aid provide emergency refuge accommodation for women fleeing violence, as well as a range of community-based services for survivors of domestic abuse. There is a wide network of refuge services nationally, but spaces are oversubscribed and many refuges are only available to

women with low support needs.

Commissioned supported housing: Beacon delivers the LCC commissioned supported housing service. Beacon was launched in 2017 and is delivered by a consortium including Turning Lives Around, Touchstone and Foundation. Pathway Managers are based in Housing Options and this is the main route through to supported accommodation. Beacon provides self-contained flats. shared accommodation and 'intensive support environments' that provide on-site, round the clock support within hostel accommodation. Beacon can accommodate around 230 people at any one time with stays averaging between six and ten months. Beacon provides some women's specific accommodation including Francis House, a 10-bed women's hostel. This includes two safeguarding beds accessed through Housing Options Safeguarding Team. St Anne's mental health service offers 42 single tenancies within a range of shared supported accommodation for people with mental health conditions.

Non-commissioned supported housing: There is a range of shared accommodation across the city not commissioned by LCC, instead funded via external funders and housing benefit. These provisions often include a service charge which is in turn used to fund 'intensive housing management services' including increased building management and tenancy support. The intensity of provision varies between services or in line with the needs of the tenant.

Housing First: Basis employed a second Housing First worker in partnership with TLA funded by Nationwide in 2020, which is now funded and supported by Leeds City Council. Funded by the Tudor Trust, Basis Yorkshire and Turning Lives Around (TLA) work in partnership to deliver a Housing First programme, providing homeless women who sex work with a secure tenancy with close adherence to the international Housing First model. Tenancies are initially held by TLA and transferred to the residents as they become more independent. TLA and Leeds Action to Create Homes (LATCH) launched a new Housing First scheme in September 2020, funded for three years by the Henry Smith Charity.

Affordable social and private sector housing: Social tenancies in the city are allocated via the Choice Based Lettings system managed by Leeds Homes¹. The Leeds Homes website advertises Leeds City Council and partner housing association homes for registered customers to bid on. Housing Options have increasingly developed links with private sector landlords, sourcing more private accommodation, establishing the Leeds Rental Standard² and operating the Private Sector Lettings Scheme.

**Tenancy support after resettlement and to prevent homelessness:** Engage, led by Barca in partnership with Connect, GIPSIL and Riverside, deliver a commissioned floating support service for individuals within their own homes who may need additional

<sup>1</sup> https://www.leedshomes.org.uk/

The Leeds Rental Standard developed by Leeds City Council that ensures a minimum standard is set for private landlords across the city. Further information about the Leeds Rental Standard is available at: http://www.leedsrentalstandard.org.uk/



Photo by Gary Butterfield

support to establish or maintain their tenancy. The mental health homeless team (MHHT) provides a dedicated support service for people with mental health conditions who are facing homelessness. Referrals for this service must come via a health professional. Some further tenancy support services are delivered by social landlords such as Leeds Tenancy Support Service.

Addiction recovery services: Forward Leeds is the combined drug and alcohol prevention, treatment and recovery service for adults, children, and young people for Leeds. Forward Leeds is a partnership led by Humankind Charity (Humankind) in conjunction with Barca Leeds, St Anne's Community Services, Leeds and York Partnership NHS Foundation Trust (LYPFT). As well as a wide range of treatment and recovery services, they offer a housing support service to certain service users also engaged with other parts of the charity.

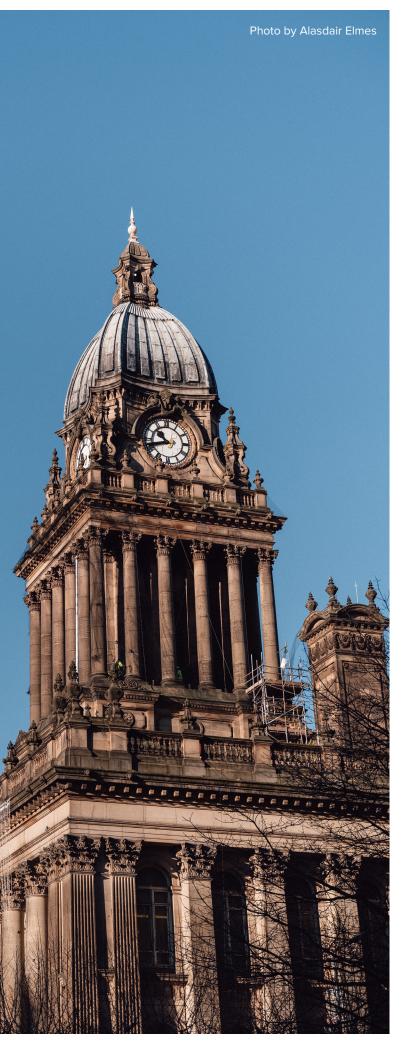
#### Support for those involved with the criminal justice system:

Through the Gate is a housing and employment support service run inside prisons in Leeds by Catch 22 and the St Giles Trust. CGL also delivers support in the community through the Integrated Offender Management service. Compass St John also delivers supported housing and tenancy management to individuals working with the National Probation Service, and have recently begun a specific women's provision.

Other relevant services: Basis Yorkshire deliver several services in addition to the above mentioned Housing First programme, including the Athena Project, which is commissioned by LCC to provide broad-ranging support for sex working women. They also provide a community mental health worker commissioned via Live Well Leeds, a specialist sex work sexual violence adviser, an inclusion and participation worker and an employment and education worker. Bevan Healthcare CIC provides York Street Health Practice,

a GP practice offering services to those who are homeless or in unstable accommodation.





#### 3.2 Leeds Strategic Approach

Several strategic approaches in Leeds relate to women who sex work, including the Managed Approach, the Homelessness and Rough Sleeping Strategy, and a series of well organised and committed partnerships across organisations that represent women's interests.

Leeds Sex Work Strategy is a citywide strategy designed to safeguarding those working in any form of sex work. The Managed Approach was developed by the Safer Leeds Partnership in October 2014 and has continued to evolve since. The 'Managed Area' is a multi-agency coordinated approach to managing on-street sex work, meaning that in the designated Managed Area in Holbeck police will not arrest for kerb-crawling or soliciting between 8 pm and 6am<sup>3</sup>. This is delivered alongside a dedicated call line for the reporting of on-street sex work-related incidents, a dedicated policing team, and a higher level of engagement with the local community including the involvement of the Leeds Anti-Social Behaviour Team (LASBT) and the Street Cleansing Team to respond to any issues of risk or littering.

#### Leeds Homelessness & Rough Sleeping Strategy 2019 – 2022<sup>4</sup>

highlights that street-based sex workers who are homeless are one of the most disadvantaged and excluded groups of homeless people. It emphasises that Leeds Housing Options is committed to working in partnership with Basis and the Joanna Project to identify how they can help women who sex work access safe, sustainable and affordable housing. The strategy acknowledges that stable accommodation will help women exercise greater control over their lives. It identifies that supported accommodation environments are not always suitable for women with intensive support needs. Commitments in the strategy include working to overcome common barriers into services and identify any gaps in provision, further exploring the Housing First model for women who sex work and consulting women with lived experience to inform further policy targeted at improving housing pathways for women.

Women's Lives Leeds (WLL) is an alliance of organisation working with women and girls, with specialisms in domestic violence, mental health, sexual health, sex work, trafficking, child sexual exploitation and education. Leeds City Council has been working with WLL to monitor the needs of women across the city. WLL deliver Women Friendly Leeds<sup>5</sup>, aimed at increasing equality for women across the city following the United Nations Women Friendly City initiative. WLL also facilitate a women's housing working group, bringing together a range of partners from across the city to push for improvements to housing pathways for women experiencing homelessness across the city.<sup>6</sup>

<sup>3</sup> https://democracy.leeds.gov.uk/documents/s208220/Managed%20Approach%20Independent%20Review%20Report%20Appendix%20080720.pdfl.

<sup>4 &</sup>lt;u>Leeds Homelessness & Rough Strategy 2019 - 2022</u>

<sup>5</sup> Women Friendly Leeds | Better For Women, Better For Everyone

<sup>6</sup> On June 16th, Leeds City Council announced the Managed Approach would be discontinued.

#### 3.3 Sex work in Leeds

Sex work is a diverse industry and there is no one cause or motivation which connects all sex workers. Most women who sex work in the UK are parents<sup>7</sup>; the high cost of living combined with low wages, limited access to welfare benefits, and the cost of accessing childcare during working hours are commonly cited as motivations to engage in sex work over or alongside other forms of employment. For some women, sex work can offer agency, flexibility and financial benefits beyond that of other forms of labour. Some engage in sex work alongside other forms of employment. For some, sex work can be one of few accessible types of work alongside pressures caused by homelessness, addiction or mental health. For some, sex work may be the result of coercion or exploitation. Attempts to use criminal enforcement to control the sale of sex can compound the existing stigma associated with sex work, meaning barriers to support that abusers can exploit.

Previous analysis of Basis' Housing First pilot<sup>8</sup> highlights the experience of women who sex work in Leeds who required access to more intensive support when navigating homelessness. The report highlighted the disproportionate representation of women who sex work amongst the female homeless population. Despite this, women who sex work were generally less likely to access statutory and voluntary support services. Experiences of stigma and trauma were widespread, as well as feelings of exclusion from housing provisions and services more generally. For the women who participated in the study, experiences of mental ill-health and addiction were often linked with their experiences of sex work and homelessness. The women accommodated under Housing First all had enduring intensive support requirements and had struggled to maintain more traditional forms of accommodation in the past. Access to secure accommodation, financial stability, and the holistic approach provided by Housing First meant that the women who engaged with the programme were better situated to consider their long-term wellbeing outside of their immediate survival needs. The report highlighted the need for the further embedding of trauma-informed approaches among services, emphasising that providing women with choice and control over their housing situation is essential for long-term success.

7 https://prostitutescollective.net/wp-content/up-loads/2019/10/Nice-Girl-report.pdf

8 Emma Bimpson (2018) An evaluation of Basis Yorkshire's Housing First pilot University of Leeds March 2018



#### 3.4 Systems change

This report is intended to stimulate meaningful systems' change to the housing systems providing for women who require access to more intensive support services in Leeds. Systems change has been defined as "an intentional process designed to alter the status quo by shifting the function or structure of an identified system with purposeful interventions"9. Traditionally adaptations to systems will happen gradually and in small parts, meaning that the overall system is not always designed intentionally and may not consistently provide the best outcomes for the people who move through it. Systems change "aims to bring about lasting change by altering underlying structures and supporting mechanisms [...] including policies, routines, relationships, resources, power structures and values". 10 This can mean specific, practical interventions into a 'system' to ensure it consistently provides the support it is intended to, changes to potentially negative working practices, and critical engagement with workers and commissioners at all levels.

Efforts to create systems change are becoming increasingly widespread but with this, challenges have emerged. A recent Sheffield University review of West Yorkshire Finding Independence (WY-FI) concluded that adopting a systems change approach to WY-FI services ultimately resulted in service 'flex', largely dependent on the practice of individuals, rather than true systems change. For WY-FI, challenges emerged for frontline officers in large or overstretched organisations. It was concluded that while some elements of services had flexed support, this had not ultimately impacted the overall system model. Maintaining this flex was dependent on the ongoing efforts and presence of particularly dedicated workers. This study concluded that for systems change to be meaningful and lasting it must be viewed as a continual process to be engaged with rather than as a destination to be reached.11

Rob Abercrombie, Ellen Harries and Rachel Wharton (June 2015) Systems Change: A Guide to What It Is and How to Do it. NPC

<sup>10</sup> Ibid.

Richard Crisp, Del Roy Fletcher, Sadie Parr, Ian Wilson (2020) West-Yorkshire Finding Independence (WY-FI): Effectiveness, outcomes, and impact Final evaluation report Sheffield: CRESR.

#### 3.5 Homelessness and Covid-19

In 16 March 2020, in response to the Covid-19 pandemic and the first national lockdown, the Ministry of Housing, Communities and Local Government (MHCLG) and Public Health England (PHE) produced guidance on reducing the risk of viral transmission among homeless populations. <sup>12</sup> Most radically, this saw all local authorities in England compelled to house anyone who was rough sleeping within 72 hours. The policy, later known as 'Everyone In', was aimed at reducing infections and enabling individuals to self-isolate if required.

Leeds immediately responded to Everyone In with the provision of self-contained emergency accommodation units hosted at hotels across the city. Building on the success of the women-specific Somewhere Safe to Stay hub provided by St Anne's, this included a women's specific provision, making Leeds one of only two councils across the country to consider adapting a gender-informed model to their emergency response. This approach has been widely hailed as a success, with other local authorities adapting gender-specific provisions as time progressed.

For those living in their own tenancies when the first lockdown was announced, a ban on evictions was imposed, and variations on this initial ban remain in place at the time of writing. The ban is not and has not been, a complete one. Evictions can take place where the possession is on the grounds of anti-social behaviour, nuisance, false statement, or domestic abuse, or where the court has granted possession because of substantial rent arrears. For 'no fault' evictions, a minimum notice period of 6 months has been instated<sup>13</sup>. Limitations on evictions are currently in place until the end of May 2021, with further extensions likely to reflect levels of Covid-19 restrictions.

The Covid-19 pandemic has seen huge changes to all aspects of life across England. Crisis<sup>14</sup> have reported that all local authorities have seen an increase in demand for homelessness support since the start of the pandemic. Initially, this need was driven by those already experiencing homelessness; this was followed by a rise in cases of domestic abuse which saw a higher number of families presenting as homeless, alongside an overall increase in people experiencing homelessness for the first time. Among these cases, experiences of social isolation and mental health difficulties also spiked compared to pre-pandemic rates.

While Covid-19 triggered enormous difficulties in almost all areas of life, it forced a paradigm shift within the housing sector. The high level of take up under the Everyone In scheme saw an unprecedented number of individuals engaging with temporary accommodation, many of whom had experienced acute homelessness for years. <sup>15</sup> Crisis reported on the hugely positive impact caused

12 https://www.gov.uk/government/publications/covid-19-guidance-on-services-for-people-experiencing-rough-sleeping

13 A "no-fault eviction" is a Section 21 notice. The landlord does not have to give a reason for the eviction.

14 Crisis (2020) 'The Impact of Covid 19 for people facing homelessness and service provision across Great Britain' (November 2020)

15 Fitzpatrick et al. (2021) The Homelessness Monitor: England 2021, Crisis (March 2021)

by the prioritisation of homeless people in housing allocation processes, from the use of hotel provisions, and more widely from the pause in evictions and temporary uplift of Local Housing Allowance. Homeless Link<sup>16</sup> identified a number of key changes nationally, including much greater inter-agency collaboration across the homelessness sector, an increase in awareness of the risks faced by women, and support services that were able to work more flexibly.

However, not all changes were positive. The uptick in engagement with temporary accommodation saw an increase in pressure on move-on accommodation, an area already experiencing extreme strain following welfare reforms and the national housing supply shortage. For those in need of support, a move to remote, digital working made many support services inaccessible. Gaps caused by digital exclusion widened, and the impact of reduced access to support systems had a significant impact on emotional wellbeing. Longer-term, this is likely to mean an overall increase in levels of support needed for those experiencing homelessness.

16 Homeless Link (2020) Learning from the Ending Women's Homelessness Fund Case studies March – July 2020

## 4. Key Findings

#### 4.1 Women's homelessness

Since 2011, across the UK, all forms of homelessness have increased sharply. Local and national Government bodies have faced increased pressure to address homelessness as cases have risen. Homelessness is often imagined as rough sleeping, its most visible and immediate manifestation. Despite this, homelessness is massive in scope, with rough sleepers forming only a small proportion of homelessness cases nationally. In recent years, increasing concern has been raised regarding 'hidden' homelessness. Hidden homelessness encompasses anyone living without a safe, permanent home but not otherwise captured in national homelessness statistics. This includes those who are staying temporarily with friends or family, sofa-surfing, squatting, at risk of violence in their home, living in such poor or unsuitable conditions that it is not safe to remain long term, or those who have no legal right to occupy their address. It is widely understood that women are disproportionately represented among the UK's hidden homeless population, encompassing the different patterns with which women experience homelessness.

Cases of homelessness are often monitored through data collected by local authorities counting cases in which they have been approached for support by someone who has lost, or is at risk of losing, their home. In Leeds, the main triggers causing homelessness among women are domestic abuse, sexual violence, and welfare reforms. Leeds City Council have acknowledged that Universal Credit 'presents a significant challenge in respect of preventing/ relieving homelessness', with higher levels of rent arrears, larger numbers of evictions, and reluctance among private landlords to let to those in receipt of the benefit.<sup>17</sup>

Initiatives to relieve homelessness often focus on reducing rough sleeping, and may therefore be less likely to engage with women. Figures collected in November 2020 suggest that around 14% of those who sleep on the streets in Leeds - 5 individuals out of 35 - are women. However, rough sleeper counts rarely consider the different behaviours adapted by women rough sleepers. 'Street counts' - in which those who are 'bedded down' at night are counted and logged by the local authority to inform national rough sleeper monitoring – have been criticised as confirming a gender bias in homelessness reporting by failing to account for the different patterns of homelessness adopted by women.<sup>18</sup> Homeless Link<sup>19</sup> report that women experiencing homelessness are more likely to exhaust all other options rather than sleep on the street, including staying with family and friends, using public transport, sleeping in A&E waiting rooms, or staying on the move all night. In doing so, women seek to avoid the risks of violence and exploitation associated with street sleeping.

Because of this, homelessness statistics, and rough sleeper statistics in particular, are likely to be under-representative of the true scale of homelessness among women.

To fully understand the scale of women's hidden homelessness<sup>20</sup>, monitoring methods have to be adapted beyond the guidelines issued by the Government. In 2018, specialist sex work organisa-

tions across Leeds identified "around 35" women known to them who they believed fell under the 'broader definition' of homelessness. Women often cite safety concerns as their reason for avoiding sleeping on the streets. However, alternative arrangements often mean alternative risks. Some will stay in unsafe homes with violent partners, with one participant stating:

"I'd rather take a beating from a man than go back to homelessness [...] then you end up staying with someone and it's not safe, and you get beaten anyway".

Women engaged in sex work may stay with clients or find themselves forced to exchange sex for somewhere to sleep. One stakeholder spoke about women resorting to staying with dealers and in crack dens, feeling this is safer than "the alternative" of the streets. These arrangements are often dangerous in their own right, but stakeholders expressed concern that these situations were often misunderstood as lower risk. Hidden from street sleeper counts, women will often find themselves excluded from many of the interventions aimed at reducing homelessness. At the point at which a woman will resort to sleeping rough, she is significantly more likely to have been exposed to exploitation and trauma while other options were exhausted, creating further barriers to engagement with statutory support services.

Similarly, the particular concerns raised by sex workers, especially for those who work indoors, can go unrecognised by housing support services. Risks posed by clients, landlords, or criminals can mean individuals are unsafe in their homes, often meaning someone will meet the broader definition of hidden homelessness. However, these cases are often not seen to qualify for formal housing support. One woman spoke of her experiences being stalked by a client who would present at her home, a risk which the police "shrugged off". Unable to prove the level of risk she was under with a police report, she remained in her home for months despite the danger she was in. Concerns around being seen to 'voluntarily' give up a tenancy, and therefore be disqualified from the Local Authority's duty of care, means that women who face unrecognised risks may stay in unsafe housing at risk to their own physical and psychological well being.

As disadvantages intersect, risk to the wellbeing of the individual can increase, and the impacts on mental and physical health caused by homelessness can be devastating. Stakeholders working in Leeds identified that the general level and intensity of support required had increased across the last 10 years. This reflects the broader national picture, with Homeless Link reporting over two thirds of services seeing an increase in presentations from women requiring more intensive support over the previous two years<sup>21</sup>. Leeds recently conducted a city-wide report into experiences of 'street-based' life – encompassing rough sleeping, begging, street drinking and street sex work<sup>22</sup>. It found that life on the streets significantly increased the likelihood that a person would die younger than the general population, meant a higher likelihood of death from injury or suicide, and saw much higher rates of

<sup>17</sup> Ibid

Bretherton and Pleace (2018) Women and Rough Sleeping: A Critical Review of Current Research and Methodology Uni. Of York Centre for Housing Policy

<sup>19</sup> Homeless Link (2019) Promising practice from the frontline Exploring gendered approaches to supporting women experiencing homelessness and multiple disadvantage

<sup>20</sup> Leeds Homelessness & Rough Sleeping Strategy 2019 – 2022

<sup>21</sup> Ibid

Safer Leeds (July2020) City-wide learning report: Understanding and progressing the city's learning of the experience of people living a street-based life in Leeds.

long-term drug use and the complications that can come alongside this. Nationally, women experiencing homelessness have a life expectancy of 43 – compared to 81 among the general population. Stakeholders in Leeds highlighted a gradual increase in support required around physical health for homeless women across the city. This was particularly in relation to the long-term impacts of intravenous drug use including abscess, infection, lost limbs and organ damage. Reports were made of women on palliative care pathways while homeless. Stakeholders reported cases of women remaining homeless while pregnant, significantly increasing the risk of health complications for both mother and child.

Existing evidence indicates a population of women who experience racism who are even further hidden from statutory services and support in relation to their housing, and this concern was echoed in stakeholder interviews. In particular, stakeholders raised concerns in relation to migrant women experiencing abuse or exploitation. Worries were shared that these women may be less able to escape their abusers and may face more barriers to accessing support if they did, particularly for those with no recourse to public funds. It was hypothesised that this may be worsened by insecure residency status and concerns that agencies may be obliged to report migrants who access services to the Government.

"It's bad when you're homeless and staying with someone because you can't stay for free, so you have to do things that you don't want, like money or sex or drugs."

(Participant)



#### 4.2 Impact of Covid-19 in Leeds

Social distancing measures put in place in response to Covid-19 made contact between households - and thereby face-to-face sex work - illegal. These changes had a significant impact on women who sex work, forcing many to choose between their financial wellbeing, staying within the law, and the risks posed by the virus. Support providers reported a massive increase in provision of food parcels, vouchers, and support with utilities as women struggled to make ends meet. This was described as a "tsunami of need" which built up during the first lockdown both in terms of the number of individuals accessing their service and the intensity of support required.

In Leeds, the decision was made to formally close the Managed Area in response to the virus. It was recognised, however, that this was unlikely to prevent all women from street sex working when they needed the income. Because of this, the Managed Approach strategic partnership continued to meet monthly to monitor the safety and wellbeing of sex workers across the city. Weekly Managed Area operational meetings also continued, facilitated by West Yorkshire Police and attended by key support agencies. These meetings ensured that individual sex workers who had been sighted in the MA had access to robust, responsive support, as well as monitoring levels of sex working in Holbeck using indicators such as litter and reports from residents.

The pandemic forced support services across the city to radically change their models of delivery, but stakeholders reflected on how resilient and adaptable agencies had shown

themselves to be. One stakeholder reflected on 'moving mountains in a short space of time' to deliver Everyone In, but this meant services could 'do more than we had done before'. New services were designed rapidly, and existing services adapted to minimise the impact of restrictions on those accessing services. Innovative partnerships were built between agencies, with an ethos of shared working to maximise outcomes for those requiring housing support.

Most notable for women who sex work was the implementation of gender-specific, self-contained emergency accommodation. Prior to the pandemic, Leeds had opened the Somewhere Safe to Stay hub, a 5-bed dormitory style emergency accommodation unit that catered specifically for women. With the introduction of social distancing meaning dormitory-style accommodation units were no longer able to function safely, LCC built on the successes of this model by ensuring one of the hotels used to provide emergency accommodation would cater exclusively to women - one of only two local authorities, alongside Manchester, to make this decision from the start. 14 gender-specific beds were made available in self-contained units including a bathroom and cooking facilities. Women were no longer required to vacate the premises during the day, and without shared facilities levels of engagement were generally higher. The premises were staffed on a 24-hour basis by St Annes Community Housing, with 'surgery'-style support provided during the day by Housing Options, Basis, Simon on the Street, and others. Stakeholders saw this as a universal success, with many women

seeking support who had not previously wanted to engage with emergency accommodation.

Women-only premises spaces were limited, however, and other emergency accommodation units - still self-contained, but mixed gender - were also used to house women. These units were met with more mixed reviews, with some women feeling 'vulnerable' and 'unsafe' when sharing their living environments with men. What this did evidence, however, was the true scope of need for emergency accommodation. Nationally, cases of 'single' homeless people being placed in temporary accommodation surged.23 In Leeds, stakeholders spoke of over 200 beds filled at a time, with services 'chock-a-block with keeping people in

support'.

Particularly hard-struck by the pandemic were services which functioned on a drop-in basis. For services supporting women who sex work, both the drop-in and street outreach services available were significantly reduced. Prior to Covid-19, Basis ran a drop in every Monday - Thursday providing practical and emotional support to women who sex work encompassing sexual health, housing, drug and alcohol and peer support. Joanna Project also offered a drop in to street sex working women. Social distancing meant that these provisions were no longer able to run. Basis had also provided an evening outreach service three times a week in the Managed Area, using a specially adapted van to offer further support to women while

Fitzpatrick et al. (2021) The Homeless Monitor: England 2021, Crisis (March 2021)

they were working. The formal closure of the Managed Area meant this service was changed to instead offer a phone call to a Basis outreach worker facilitated by the police. In addition, home visits were highly restricted and support workers were no longer able to assist women in attending face-to-face appointments. For both Basis and Joanna Project, however, these reductions have been tackled by continual one-to-one key worker support, which has remained in place throughout the pandemic.

Other services which previously provided face-to-face support have also been impacted. LCC Housing Options, who prior to the pandemic had provided assessments face-to-face, have moved to telephone appointments provided via their emergency duty line. They report having been overwhelmed by calls throughout the pandemic, with an increase in homelessness presentations at the same time as restrictions to the supply of available tenancies. The pandemic has also forced their staff to terminate outreach activities. Prior to Covid-19, Housing Options workers had regularly attended drop-in sessions for women who sex work as well as joining Basis' street outreach van on a weekly basis. This service had seen positive results for many who engaged with it, but has been suspended for the duration of the pandemic as Basis was no longer offering outreach in the van.

Restrictions on movement and the ban on evictions meant that the housing market was effectively closed during the first lockdown; people in temporary accommodation "wanted to move on, and they couldn't". In response, Housing Options, Beacon

and LCC commissioners established a Single Point of Contact (SPOC) as an extension to the existing Beacon Pathways team. Since the beginning of the pandemic, Beacon have implemented temporary referrals and admissions criteria which essentially limit referrals to those from emergency accommodation and rough sleeper outreach. This was set up to ease the pressures on temporary accommodation providers, streamlining the process of moving people out of emergency accommodation into commissioned supported housing and prioritising accommodation to those in most urgent need. In addition to this, the previous choicebased lettings system was temporarily suspended and replaced by the Emergency Lettings Panel, a joint-working initiative established between commissioners, Housing Options, and support providers. This panel prioritised those experiencing homelessness into social tenancies across the city. By prioritising those most in need, the panel aimed to minimise the risk of longer-term stays in emergency and temporary accommodation, thereby increasing the capacity to respond to new homeless presentations.

As well as inducing change to widespread responses to homelessness, the pandemic also highlighted the strengths of some smaller accommodation provisions. Housing First, which has been delivered in the city since 2016, meant women were able to protect themselves from the virus within their own homes. This meant minimal disruption to the women housed by the project, each of whom has also required more intensive support during their housing journey. The pandemic has highlighted the need for increased capacity for accommodation which can respond to higher levels of support need, and while not specifically linked to the pandemic, additional funding has now been invested to widen the provision of Housing First across Leeds by the third sector as well as statutory partners

For many navigating housing systems, homelessness services are just one part of a broader network of support. The pandemic also saw restrictions to access of many essential health and support services. Concerns regarding strain to the NHS meant some hospital appointments were postponed or cancelled, and some stakeholders reported early difficulties obtaining medication prescriptions. However, these changes were paired with an increase in partnership working between healthcare providers and other agencies. Outreach workers were given the ability to collect prescriptions on behalf of those they supported, which reduced barriers to engagement with healthcare. Some specialised healthcare providers continued their services for people who may otherwise be excluded from healthcare systems, with capacity for prescribing, wound dressing, and outreach appointments. Telephone appointments for the sexual health clinic were introduced alongside more limited face-to-face meetings, which again meant access was more straightforward for some.

Similarly, drug and alcohol services had to temporarily close their offices, meaning a shift away from face-to-face support and towards online and telephone appointments. Because of these limitations, a risk-based ap-

proach was taken to methadone prescribing, meaning prescriptions issued fortnightly rather than daily where this option was safe and manageable. Stakeholders reported this as an improvement for many they supported, but did reflect that this was difficult to manage for some. Access to Naloxone was also widened as part of a wider risk-management strategy towards substance use.

are disproportionately represented. For many, no formal supervised contact provisions were available, with contact centres closing completely. This left many women reliant on informal contact arrangements with family members or, in many cases, unable to access face to face contact at all.

Whilst some services continued to provide face to face support, most services related to housing, health and offender services across Leeds moved to telephone or online appointments through the pandemic.

While some stakeholders reported improved engagement through these methods, others raised concerns about digital exclusion: 'People became more easily contactable at the hotel or on the phone, but as time has gone on it's maybe not the case'. Women who sex work 'often don't have phones', meaning that continued engagement can be difficult. To overcome this, some services including Basis were able to provide phones, tablets, data, and credit to reduce levels of digital exclusion and maximise engagement with newly digital services. This was implemented with the support of agencies such as Digital Leeds, as well as other local, national and corporate foundations.

Many specialist organisations, including those supporting migrants, were forced to close during the initial lockdown. Stakeholders reflected a gap around specialist knowledge about immigration rights and access to benefits, particularly for those with no recourse to public funds - advice which only a qualified immigration advisor can legally provide. More general services such as the Citizen's Advice Bureau continued but were difficult to access due to the overwhelming number of people experiencing difficulties due to the pandemic.

Social Services and contact centres were also restricted, with an emphasis on reducing the risk of virus transmission between households.

This had a significant impact on child contact for those separated from their children, of whom women sex workers

#### Case study 1: "A"

"A" first came into contact with sex worker support services through a referral into the Joanna Project made by the MAT' team in November 2020. She had told officers in the Managed Area that she needed an urgent appointment for a Methadone script having been off since the summer and needed accommodation. Prior to this, including prior to Covid-19, she had been sex working mostly indoors without disclosing this to any other agency.

She had significant experiences of homelessness previously, had stayed in temporary accommodation as well as living in a shared property that she had felt compelled to accept. She had left this tenancy due to the property being damaged by flatmates who used drugs, with no support from her male support worker. During her time in temporary accommodation, she had felt very vulnerable and unsafe, largely due to the predominance of men who accessed the service. The lack of a safe place to stay has on occasion forced her to return to an abusive ex-partner. While the Joanna Project had referred her to emergency accommodation the only available provision was mixed-gendered and male dominated. She was further encouraged by Housing Options to seek private accommodation, following an assessment in which she had stated she might be able to "stay with friends".

Eventually, she was offered a space in the Crypt which was swiftly changed to the women-only emergency accommodation hotel when a space became available. She has since been referred into Basis Housing First, awaiting a suitable property becoming available. She also accesses additional wrap around support from Forward Leeds and the Joanna Project.

The women-only emergency hotel with female staff has created a much stronger feeling of safety for A. She feels the staff are respectful, friendly and helpful. Importantly, the location feels safe, her room is comfortable and there are useful extras like a washing machine. A feels safe where she is, but she really wants a home to make her own.

Managed Area Team - specialist team of police officers working in the Managed Area

#### 4.3 Approaches to support

Throughout the study, those interviewed reflected a need for gender and trauma informed approaches to support for women in general and sex workers specifically. There was an eagerness among stakeholders to develop their gender and trauma informed approaches to service delivery, and a drive to share this learning at multi-agency level. Throughout interviews with women, it was clear how huge the impact of meaningful support often is, and that considered approaches can provide a key catalyst for change:

"I've had so much bad stuff in my life - abuse from my ex, drugs, losing my children...and getting sectioned. [...] I've been determined but I couldn't prove myself enough beforehand, I'd relapse or whatever, but this time I've done it and I've succeeded. And I ain't going back to that life now. I cannot praise my workers enough – I wouldn't have survived without them."

(Participant)

Female-only accommodation, as provided through the Covid-19 pandemic, was highlighted as holding huge value, with mixed-gender provisions often proving unsustainable. Women identified the need for more gender-specific hostels as key to improving provisions in Leeds, with one stating that 'They shouldn't be putting vulnerable women with men. There's only one hostel for women; it's not enough. I don't believe in them being mixed'. Prior to the pandemic, there had been limited women-only emergency provision in Leeds. Mixed provisions were much more widely available, but these were often felt to be dominated by men and intimidating because of this. Mixed environments were also commonplace in temporary move-on accommodation, which could be compounded by a reduced level of staff supervision. Women felt vulnerable to abuse and exploitation, and stakeholders and participants alike reported women living in close quarters with known abusers, with significant negative impacts on trauma recovery.

"I was homeless when they put

me in a house with five men, where one of them got charged for whatever he did to his missus – why put a vulnerable woman in with five men? [...] they left me there for nine months. The men ganged up on me and took money out of my bank account. My abusive ex also found out where I lived."

(Participant)

Stakeholders identified a huge need for women-led, women-centred services. This is particularly relevant to women who sex work, who reported the value of 'having space away from males, particularly when you're doing sex work, you're seeing the worst of men'. Some participants felt a "shoehorning" approach to women was often taken, in which women were expected to fit into existing approaches without consideration of how gender may impact the accessibility of a service. It was speculated that this was derived from a lack of recognition 'that women have different needs to men and are subject to different types of risk'. Stakeholders reflected on the need for specialised services as key for trauma recovery, with 'gender specific services allow[ing] women to feel safe, away from some of the triggers related to previous abuse, so that they can access the help they need'.

Implementing a gender-informed approach requires organisational commitment to understanding women's experiences of inequality, appropriate organisational structures and policies which embed a gendered approach, and the recruitment and training of knowledgeable, empathic, compassionate, and resilient staff<sup>24</sup>. There is a strong foundation of gender-informed services in Leeds, including Women's Lives Leeds (WLL), an alliance of organisations targeting health inequality for women who require access to intensive support. Between stakeholders, and particularly within the Housing

24 Homeless Link (2019)
Promising practice from the frontline
Exploring gendered approaches to
supporting women experiencing
homelessness and multiple disadvantage

Solutions Working Group, there was a shared sentiment that this momentum should be extended to develop housing provisions which are gender-informed by design.

Recognising the successes of the gender-specific approach throughout the pandemic, LCC have committed to building on this learning and widening their gender-informed approach. The Council has secured funding for a further dedicated women's accommodation facility via the MHCLG. These additional, self-contained units will replace the Somewhere Safe to Stay provision in a move away from dormitory-style facilities. Much of the learning from Everyone In will be transferred to this provision, with 24-hour staffing, wrap-around support and a female-only staff team. This provision, prioritised by LCC in their planning post-Covid, is currently under refurbishment and due to begin service in mid-2021.

For many women, experiences of gender can be indivisible from experiences of trauma. Violence against women and girls is widespread nationally and internationally, and women experiencing homelessness or engaged in street sex work will often have experienced trauma directly related to their gender. Most have experiences of the trauma caused by poverty. Experiences of abuse within the home, during childhood or adulthood, are common, with around a quarter of homeless women thought to be care leavers.25 A significant number have had the singularly traumatising experience of having a child removed from their care. Trauma is often not static, with many experiencing continual traumatisation as they cope with the pressures of daily life. These pressures can result in worsening mental health, substance use, criminalised behaviour, physical health problems and issues maintaining housing.

Trauma-informed approaches seek to acknowledge the impact of trauma, recognise its signs and symptoms, and create proactive, recovery-focused responses. To do so, policy and practice should reflect evidence grounded

25

lbid

in psychology, working to create safe environments and reduce risks of re-traumatisation.<sup>26</sup> One stakeholder highlighted that 'if [women] go through from worker to worker all the time, you are going to lose that relationship... you'd have to tell your story over and over again and it's something women definitely don't want to do'. Trauma-informed services encourage individuals to identify their strengths, survival skills and coping mechanisms and to utilise these to create positive, lasting change. The foundation of this is often in a mutually respectful support relationship, with several women identifying their relationship with a particular worker as key to their engagement: "I'm comfortable with them, they're not judgemental. Often, you just sense that atmosphere right away that you're being judged, but not with them. So, then you can engage".

Stakeholders also talked of the importance of peer support gained through shared women's spaces and activities, and specialised peer mentors who can directly relate with what a woman may have gone through.

In general gender and trauma informed services and strategies should aim towards co production. The Leeds Homelessness and Rough Sleeping Strategy highlights the need to include women with lived experience of sex working when designing services and identifying the space for improvements across the city. The pandemic has increased momentum across the city to build gender and trauma informed approaches across services, as well as increased consideration of how co-production can inform this. The city is moving towards a wider consideration of systems change approaches, fuelled by the huge increase in partnership working across agencies that has taken place since the initial lockdown. While still in its early stages, there is an increasing motivation to see change that is both meaningful and sustainable applied to services across the city.

4.4 Stigma towards women who sex work

"When I mentioned to the counsellor, I was doing sex work the instant response was pity, they feel sorry for you. It's like 'Oh I'm so sorry to hear that', like someone's died! Sorry that that's happened to you. You're a victim. She was awkward and didn't seem to know how to get me to talk about it."

(Participant)

Stigmatising attitudes towards sex work can create barriers for women which prevent them from engaging with support or cause them to hide their work and forego specialised support. All the women who participated spoke of experiences of stigmatisation and how distressing this could be: 'Professionals [...] as a sex worker, they look down on you, you're the scum of the earth, or like a slag, you're dirty'.

This stigma, and the fear of further stigmatisation it causes, can create significant barriers to maintained, meaningful engagement with services; experiences of negative attitudes in media, services, friends, family, and police can mean women feel apprehensive about identifying themselves as sex workers. Women worried about the negative impacts such a disclosure may have: "I've never told housing workers because I think that it would deter them getting me a house". Stigma, both implicit and explicit, was felt in attitudes across a range of services.

"They definitely treat sex workers differently – they automatically think you'll be working from your house all the time like a top up service when anyone can come at any time. And like, [landlords] say 'Well you're not sex-working now are you!' like I'm doing something wrong. In jail it's the same. It's like, have you recovered from a job that you choose to do!"

(Participant)

Across interviews with women who have sex worked and other stake-

holders, people spoke of stigma compounded by an often complicated housing system. One woman reported feeling stereotyped as having complex support needs due to her history of sex work and experiences of domestic abuse: 'It's very one-sided [...] they don't listen to you. When I'm trying to get across the facts that I've had a domestic violence incident when I'm homeless, they only focus on the violence and say I have to go to a women's refuge because I can't look after myself. I was only in the situation because I was homeless'.

There were several reports across interviews of misconceptions about sex workers which could lead to the unfair dismissal of housing duty by the Council. 'I'd say to housing workers that it's not only people on the streets who are at risk. Like for example if a client finds out where I live, I need out of there asap, they have no idea how dangerous that person is'. Having risk recognised often came down to 'proof' in the form of police reports: 'I had one customer who got a bit stalkerish and ended up assaulting me. I reported him [...] but police shrugged it off and said there wasn't enough evidence. So, I had to continue living there for a good few months'. 'Intentional' homelessness - the voluntary surrender of a tenancy which could otherwise have been maintained – can disqualify a person from receiving

housing support in future. Participants

felt that risk from clients was often di-

minished or dismissed, leaving women

to choose between living with the risk

to themselves or leaving their tenan-

cy and being deemed to have made

themselves homeless 'intentionally'.

"There's other reasons why you might need to get out e.g., transphobia, harassment, you need emergency housing. There's no such thing as intentionally homeless, nobody does that for no reason. I didn't just give up my flat cause it was cold – a client had found where I lived."

(Participant)

Stigma can cause sex workers to become isolated because of uncertainty around who to trust and fear of being outed. At the point of engaging with

<sup>26 &</sup>lt;u>TIC PIE briefing Mach 2017</u> (homeless.org.uk)

services, women have often experienced increasing stigma and isolation over a number of months, with increasingly severe impacts on their wellbeing. 'You can talk to your friends as much as you want but they're never going to understand what it's like however much you explain it, like the fear or the danger that you put yourself through and it's impossible to relate'.

just recover from homelessness and everything we've been through". The ability to recognise and respond to stigma, and to speak about sex work in a shame free environment, was central to meaningful engagement.



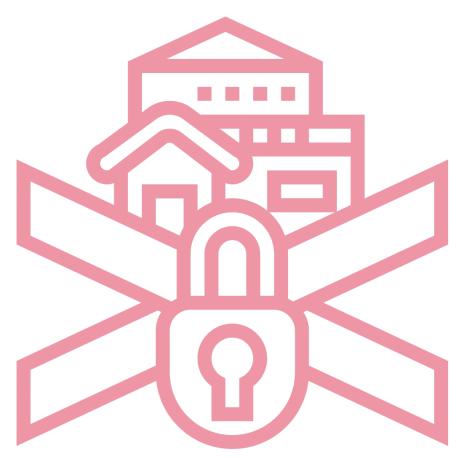
While the stakeholders interviewed aimed to be inclusive of sex workers. many did acknowledge the potential for services to be unintentionally stigmatising. However, others denied treating people at all 'differently'. There was a defined contrast between stakeholder understandings of stigmatisation and its lived experiences as reflected in the interviews with women who have sex worked. This identifies stigma as something that is often unconscious, and that eliminating it from a service requires active, critical, and reflective effort. Some felt that terminology used by support services could reinforce stigma, as with phrases such as "failure to engage" and being "tenancy ready", which were felt to place undue blame on the individual for the complexities they experienced. Despite this, these terms were still widely used by accommodation services and in local decision making.

Despite these challenges, participants did highlight a great deal of good practice across the city. Women spoke fondly of drop in services and of joined-up working that relieved some of the pressure to repeat stories to different workers again and again. Specialist link workers from other agencies with experience of working with sex workers, such as through the police or Housing Options, were identified as a particularly strong means of overcoming the barriers caused by stigma. One woman, who had been assessed by Housing Options at Basis' drop in, reflected that the worker 'was just really kind and had time [...] it's a lot more personal when she comes to see you'. Considering what changes could be made to overcome stigma, participants again emphasised the strength of specialist services. "We definitely need the women's centre in Leeds, better women's services [...] a space for women to sit and talk or cry and

"I went to the Basis drop-in because I was completely on my own and because it was so dangerous. No-one had a clue what was going on and I needed someone to be able to share these experiences with.

When we started speaking about it openly it was like a weight had lifted."

(Participant)



#### 4.5 Barriers to service

Capacity for flexibility in responding to the different approaches required when supporting women who sex work was frequently identified as a space for development across services. Stakeholders talked of the need for services to adapt to the different schedules of women in the sex industry. "Obviously, sex workers work overnight so if they're given an appointment at 9am it's highly unlikely that they are going to attend". Some talked about the barriers that can be created in accessing emergency accommodation with curfews; an example included the requirement that a resident be back by midnight, which was not practical for many women who sex work as they regularly work through the night.

Delays in the system were identified by a number of stakeholders as frequently causing women to disengage. Agencies who offered intensive support through times of crisis reflected on what is commonly a short 'critical response window', in which an individual has requested help, feels motivated to engage with support, and is physically present with workers. Stakeholders identified a need for flexibility in 'a 'then and there' approach'. Delays in the system, such as long waiting times, or requests to report elsewhere hours or days after the initial call for help, meant that individuals in need of urgent help often disengaged. For women who may have been 'making do' with punters, dealers or violent partners, this often meant disappearing from support altogether without any resolve to their housing situation. Several stakeholders reported practical barriers in contacting Housing Options, such as frequently being unable to get through on the dedicated line. After the initial call, it is common to be called back for an assessment, which can take hours or days. For those functioning under a critical response window, this delay can mean the window of opportunity is missed. Telephone-only appointments can also cause further delays, as signatures are often required on documentation which cannot be completed digitally, causing further stoppages.



Some individuals who had previously struggled to maintain contact with support services now found benefit from the 'hub' approach of the hotel provision. With movement restricted, many women found it easier to keep appointments and engage over time as they found themselves at home more often. Stakeholders reported that, by bringing support to the hotels, they had an easier time maintaining communication with women. Having gender-specific, accessible, and confidential spaces to meet with workers simplified the appointments process, reducing expectations on individuals to travel to appointments and meet obligations elsewhere from their homes. Increased opportunities for one-to-one working meant police, Basis and Joanna Project staff were able to provide practical support in accessing clothes, toiletries, activity packs, phones and



#### 4.7 Housing First

Stakeholders overwhelmingly stated their support for the Housing First model to meet the needs of homeless women. Housing First is an international standard for homelessness support, and support for this has grown over several years across the UK. Basis was an early adopter of the Housing First model for women who sex work and have been running the programme continually since its successful pilot in 2016. Housing First is an evidence-based accommodation model based on the principle of home as a basic right, which provides a person with a secure, unconditional tenancy from which they are offered wrap-around support for any other needs. Housing First is often seen as the inversion of the traditional 'tenancy-led' model of support, wherein an individual is expected to 'prove' their suitability for a tenancy through extensive engagement with other support services.

Housing First provides innovation and change to housing systems in which women who require access to intensive support too often fall through the gaps. The person-centred approach means that consideration is put into the location of properties, as well as their proximity to support networks, with these factors critical to the success of a Housing First placement. This, alongside a harm reduction approach and an ethos of unconditional support, means that the women engaging with Basis' Housing First project have almost universally made significant improvements to their health and wellbeing. With fewer concerns over their financial wellbeing or keeping a roof over their heads, Basis report that the great majority of women supported by Housing First either stop or significantly reduce sex working, with many further able to address addictions or mental-ill health from the safety of their home.

#### Case study 2: "B"

Case study 2: "B"

"B", who is in her late 30s, was previously homeless and engaged in street sex working in the managed area. Following support from Basis' Housing First project, she is now living in her own property where she feels safe and well-supported: 'No place before has been as good as this - I've.... got out of a problem area. I'm not vulnerable anymore'. B has stopped using drugs since moving into her home.

She had left her previous tenancy to get away from an abusive partner and stayed in supported housing where workers helped her to access benefits and prepare for her move. Other third sector projects had helped with food, clothing, a kettle, and other essentials for her home. She was positive about the process and while the wait for a permanent home was frustrating, partly due to delays linked to Covid-19, it was worth the wait. For B, the long-term support is a key factor: 'It's not like they hand you the keys and say, 'here you go".

B spoke proudly of having a permanent home: 'This is where I want to stay. It's good here. I want to girlify the place with pink fluffy things, settle down and make it my own'.

## 4.8 Strategic adaptations during COVID-19

In response to the increased pressure to move people on from emergency accommodation caused by the pandemic, the development of the SPOC helped fast-track people into commissioned supported housing via a more streamlined referral process. The aim of the SPOC was to improve communication, monitoring and recording of information and also supporting initiatives to improve the efficiency of move-on. Since the pandemic began referrals have been limited to those who are staying in emergency accommodation provided through LCC. Some of the stakeholders we spoke to told us that the SPOC improved moves through the housing pathway. One stakeholder however felt that the elimination of self-referrals may restrict access to supported housing. The SPOC has helped services understand when individuals are refused for a move on property. One stakeholder advised us that the SPOC 'helped keep track of significant barriers to clients accepting an offer and moving on, and [helped us] work with others to develop solutions'.

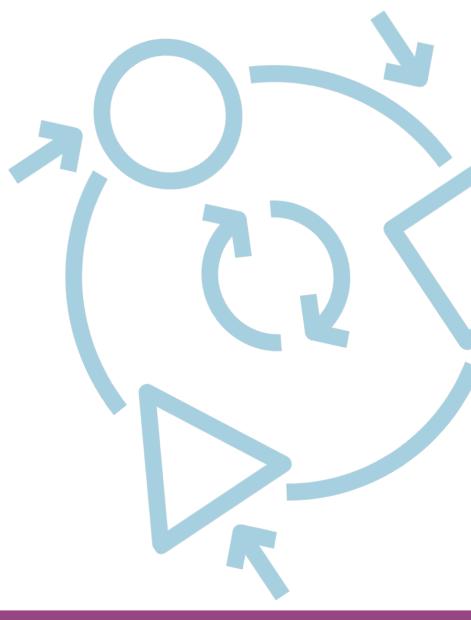
Stakeholders praised the introduction of the Emergency Lettings Panel during lockdown, referencing this as successful in facilitating moves into affordable tenancies. Developed in response to the initial freezing up of onward moves during the first lockdown, one stakeholder praised it as 'a hands down success'. After early concerns about significant backlogs as a result of the pandemic, it was instead reflected that move on rates had been similar to the previous year as a result of the Emergency Lettings Panel. This model was seen as a particular success in prioritising women who previous systems had not worked for. Stakeholders reflected on integrating the learning from Basis' Housing First model into the panel: 'Quite a lot of the women from the hotels have been housed through that model now [...] it's obviously challenged and changed a lot of opinions in the system - that needed to be done - and hopefully changed things going forward'.

The Emergency Lettings Panel was created temporarily as a response to the pandemic, put in with intentions to return to Choice Based Lettings. Some stakeholders speculated that the process could result in sex working women missing out on an offer of social housing. Historic reports of anti-social behaviour – commonly applied to indoor sex workers and women who require access to intensive support – were given as potential reasons why women may be 'overlooked' for offers of accommodation. Some highlighted that women will often protect their wellbeing by refusing a first offer of accommodation if the proposed property is felt to be unsafe, too triggering given previous experiences of trauma in the area or too far from their support network. However,

despite having legitimate reasons for refusal, doing so can result in the loss of priority on the housing register, and can trigger the termination of the council's legal duty to re-house them.

Nationally, the eviction ban saw a significant reduction in households being asked to leave tenancies. Some stakeholders felt that the temporary freeze on no fault evictions had helped prevent homelessness in the private sector, but concerns were expressed that once the ban was lifted a 'massive backlog' of evictions may result in a surge in homelessness.

Concerns were expressed regarding evictions in cases of exploitation, to which women with multiple needs could be more vulnerable. 'Cuckooing' was cited as a particular problem, in which criminals will exploit an individual within their own home and gradually take over the property. However, the Council's response to cuckooing was praised, with the implementation of partial closure orders. These orders were designed to allow people to continue living in their property while prohibiting others from attending, with referrals made to relevant partner agencies to safeguard the tenant from further exploitation.







#### 4.9 Partnership working

There is a strong ethos of multi-agency working in Leeds across housing pathways. The move to online meetings caused by the pandemic saw this broadened even further, with agencies able to come together quickly without associated costs or loss of time. There was a motivation for this partnership approach to be built upon following the pandemic, with a great deal more openness at all levels of service delivery meaning an increase in innovative problem solving. Several stakeholders reported a 'positive working relationship' with Housing Options, particularly at strategic level, and a willingness to work flexibly in finding practical solutions for women.

Effective information sharing can work in streamlining the processes of applications and reducing duplication within the system. While there were some excellent examples of joint working across the city, some stakeholders highlighted the need for improved information sharing between agencies. For example, some spoke about the risk of re-traumatisation during homelessness assessments where needs and risk assessments can involve several personal, intrusive questions. This is particularly so for women who are fleeing abuse, with repeated assessments asking similar questions often feeling overwhelming and counterproductive to support. One stakeholder spoke of women having to know the 'key words' to 'prove' eligibility and trigger a duty of care. This was particularly highlighted in relation to women who may 'mask' their problems and downplay the severity of their situations due to trauma, meaning those with a legitimate claim to housing duty sometimes being missed because of how questions and responses were phrased.

As part of assessing and engaging an individual who presents as homeless, Housing Options are required to create a Personal Housing Plan (PHP) mapping options and support requirements. One stakeholder expressed concern that these were not always transparently shared. While Housing Options require explicit permission from the applicant to share this information, they reflected that an initial information sharing agreement could enable support providers to share information as needed without having to get express permission every time, which can be a slow process. Some stakeholders spoke of the effective use of LCC's Gateway client management system for this purpose, but this was not something that was made available to a number of stakeholders interviewed. Access to Gateway has since been widened. Similarly, some stakeholders felt that coordination between multiple services working with one woman was not always as streamlined as it could be, and suggested having a nominated lead worker to ensure information was shared effectively. While partnership working across the city was praised, some specific multi agency meetings were criticised for repetition and lack of focus. Stakeholders spoke of the need to refine these meetings to ensure they produced measurable outcomes for the women they discussed.

#### 4.10 Sharing accommodation

Much of the temporary accommodation in Leeds comprises of shared accommodation, in which a number of individuals will have their own room but shared kitchen and bathroom facilities. The staff at these projects were widely praised, with one woman praising them for doing 'everything they could' to support her into permanent accommodation and helping her access wider support.

However, the nature of shared environments means they can pose particular challenges. Tenants have limited control about who they will share with, which can cause issues of 'compatibility' if residents dislike one another or know each other from different settings. Stakeholders felt that shared accommodation arrangements could be disruptive for women who required access to more intensive support, with issues arising between residents that could prove destabilising. Furthermore, many simply don't enjoy sharing facilities and the tensions that can arise as a result; while positive about her shared housing experience in general, one woman spoke with us about the challenges of sharing a bathroom and kitchen with others. Shared accommodation can also create stumbling blocks for those in recovery, with a number of reports made of recovering drug addicts being placed into properties with active drug users. Stakeholders identified a shortage of suitable accommodation in Leeds, stating that the pandemic had highlighted a "significant gap in self-contained accommodation".

Despite the challenges raised, stakeholders did also reflect on the dangers of policies that generalised groups of women, and particularly women who sex work. Stakeholders expressed concerns around risk-averse exclusion policies that could significantly impact women sex workers' access to supported accommodation. These can include curfews and policies surrounding drug use, and were generally a reflection of support requirements going unmet. Stakeholders identified different patterns of behaviour among women which can mean they face exclusion from hostels at higher levels than men. Zero-tolerance policies around drug dealing meant women – who are more likely to share small quantities between themselves rather than having a clearly defined 'dealer' - can be excluded at much higher rates than males in similar situations. Further to this, stakeholders shared concerns that sex working women may be assumed to have support requirements too complex for a shared hostel environment, and that they may therefore be held back because of this. While it is true that some women do require support at levels that cannot be met in traditional shared environments, stakeholders expressed that these concerns were often blanketed across any woman who disclosed a history of sex work rather than assessed on a case-by-case basis.

Further to this, the quality of some non-commissioned supported accommodation – those delivered with funding external from the local authority - was flagged as a concern, and questions were raised about the standard of support offered in these services. One woman spoke of 'massive' rents for properties 'that are a complete state with nothing except a bed'. This echoes a similar pattern that has emerged nationally, with concerns that non-regulated housing suppliers may take advantage of the housing shortage to make profit from substandard properties. This has led the Government to publish a national statement of expectations for non-commissioned supported housing funded primarily through housing benefit, stating these services should be offering intensive housing manage-

ment to their tenants. It is not clear to what extent this is enforced, and concerns remained locally about the quality of housing offered through non-commissioned agencies.

#### 4.11 Women with experience of domestic abuse

For women in Leeds, domestic abuse is one of the most frequent triggers for homelessness. Refuges are specialist emergency accommodation provisions for women and families fleeing domestic abuse. Refuges are oversubscribed nationally, however, and are therefore offered on a series of conditions often excluding women who require access to more intensive support. These blanket policies can often exclude women with a history of sex work, previous arrests, or substance use. One woman told us that she was considered too high risk because of her offending history: 'I was in prison for wounding with intent as a teenager, more than 15 years ago, but they won't let me go in hostels. I haven't been in prison since, I'm a good citizen but when my ex nearly killed me, they refused me a refuge'. Refuges also reported problems with securing move on accommodation, further limiting capacity to take on new residents.

There was also concern raised around a shortage of specialist, intensive support services for women with multiple needs including around domestic abuse. With this, a 'small cohort' of women in the city were referenced for whom existing services were not sufficient. The reasons cited as to why included limited lengths of stay, limitations on staff time and conditions placed on residents that saw women regularly excluded from accommodation.

Jane's Place, a specialist supported housing unit in Lancashire, was given as a possible model to follow to fill this gap in provision. A 'recovery refuge', Jane's Place offers self-contained supported accommodation for women who require access to intensive, longterm support who have also experienced domestic abuse. Staffed by experienced female staff members who are equipped to respond holistically to the trauma felt by residents, the successes of the project were lauded by a number of stakeholders and interest was shown in replicating this within Leeds.

#### 4.12 Private sector housing

LCC has built strong relationships with a number of private sector landlords in order to widen access to secure accommodation. The number of council properties in Leeds has decreased across the last 10 years, putting strain on an already oversubscribed waiting list. The private rental market in Leeds has also seen significant changes and is now larger than the social housing market, increasing around 13% of the city's housing stock in 2007 to around 22% in 2019. As a result of this increase, women are more likely to be encouraged into private rented accommodation, but this risks having higher rents, less security, and less consistent quality. Private rents are often larger than the local housing allowance, meaning those claiming benefits are priced out of a large portion of the market - one stakeholder had recently searched for a private sector tenancy within the local housing allowance rate, a search which yielded one result across the entire city.

Private sector housing also frequently required a guarantor and rent in advance, both of which can be inaccessible for women living in poverty. Landlords can also be reluctant to rent to benefit claimants, despite laws making this practice illegal. Among women interviewed, the quality of housing in the private sector was identified as a problem: 'I have a garden and I've made it homely but it's damp - the walls are actually wet - but I don't want to complain to the landlord because I'm not supposed to decorate it and I have done - I don't want him to shout at me'. For women who sex work there are additional risks associated with private sector landlords. One stakeholder told us that on occasion they encounter landlords who will exploit women who sex work, threatening to out them unless they engage in sexual activity or blackmailing them to pay increased rent.

homeless link

Stakeholders also reported that often women refuse private lets because of the uncertainty they can come with, with landlords able to evict at any time. LCC's Homelessness Strategy recognises this, and so has implemented a clause in which people who accept private sector tenancies can retain priority for social housing: 'We also find that many people are willing to take a private rented tenancy as an interim housing option, providing they can ultimately secure council housing. We therefore permit people to retain their council re-housing priority award when they accept a private rented tenancy'.27 However, it is not clear how widely this information was known or implemented.

27 Leeds Homelessness & Rough Strategy 2019 - 2022



#### Case study 3: "C"

"C", who is in her early 20s and currently works part-time in retail, has lived with her young child in a privately rented house since mid-2020. Her housing situation is not ideal, because of the condition of the property - which has significant damp - and because the area can be 'a bit intimidating'. However, it offers some stability. Finding this property, however, was a difficult process, and C states this was not helped by the confusing housing system.;I said I was looking every single day and I wasn't coming for no reason; she said I had to look at private rented first... But no-one wants to give it to you when you get the deposit from the government because it takes a while. She said she'd put me on the list and backdate it 5 months because I'd been waiting, but she didn't do that. It's just really confusing. I think the only reason they accepted me is Covid-19, because I'd been looking for ages and no-one will take you on Housing Benefit'.

When she was harassed and assaulted by a client who knew where she lived, C attempted to move to a new house, but pathways were limited. They said there were no viewings for months because of Covid. Unless you literally say you haven't got a bed for the night then they just send you home and not get back to you for ages'. C noted that pressures to leave were missed by housing workers: 'I'd been staying in a family member's flat, but he was annoyed because he wanted to rent it out to someone else. I was only supposed to stay a month but ended up staying months. I was in an upstairs flat before this, but it was very difficult with the [child's] buggy, was very cold and then I was desperate to leave because a customer found out where I lived, and it wasn't safe cause he kept turning up. I gave notice without having a place to go and hoped for the best that family would help'.

C had not let housing workers know that she sex worked because she felt it would deter them from offering her accommodation. She had experienced repeated incidents of stigma prior to this, with health professionals belittling her, being rude, assuming that she was 'mentally unstable', pitying her and being unable to address her work.'I don't feel any shame and I don't lose sleep at night because of it. It's just part of my history. Maybe they think I would talk about it if I want, but you have to feel that they're approachable'.

While in her current accommodation, C declined a Council flat offered in a multi-storev block because it was unsuitable for her child. She had understood from workers that she would maintain her priority status. However, she has since learned that she no longer has priority and feels that she no longer has any chance of getting council housing. They acted like it was fine when I said no to the flat... and said it wouldn't affect my priority, but it was a lie. No-one communicates with you but when I looked on the system, I was no longer a priority'.

It was the Basis drop-in and the peer support from other sex workers that provided a space for C to share her experiences and get the support she required: 'When we started speaking about it openly it was like a weight had lifted'. Looking ahead, C is hopeful for her future - she is planning her next housing move: 'I don't think I want too much. I'd like a bigger garden for my child to play, some storage, a nice bath and for it to be nice and cosy and not alienated'. With support in place, she is now hoping to get back into education: 'When I first went to Basis, I was really anxious all the time and really aujet but now I'm open with other people. I'd like to study again but I'll have to plan my move first and maybe do a short 3-month course, maybe in social care, to get back into the education thing'.



#### 4.13 Tailoring approaches

Throughout all the interviews conducted, it was clear that there was no one-size-fits-all approach to housing for women who sex work. Thoughts about where a property should be located, for instance, varied between interviews.

'What I had to do is break all ties, change my phone number, even broke off contact with the one person who knew where I lived because he got back on the spice. I can't have that in my life, and when he's on that it's going to encourage me to take other stuff... being out the way in a nice area can change people's lives in a dramatic way'. (Participant)

However, not all women felt a move 'away' would be useful, as this would isolate them from peers, support systems and their work. One stakeholder highlighted the potential issues surrounding social isolation if women are moved away from their support networks, and the need for support to make meaningful social connections – people 'say they want a council house far away – but then have no social contact and it's too far away'. This highlighted how adaptive support services need to be, and that what works for one woman will not work for all others. Women face being penalised in the priority system for social housing if they refuse 'suitable' tenancy offers, but the criteria for what is 'suitable' will change significantly between women. Unless housing systems are able to adapt to the requirements of different women who sex work, individuals will continue to fall through the cracks into properties and locations which do not meet their needs.

#### **4.14 Prison leavers**

Prison release is also a common trigger for homelessness. An offending history can be a barrier to supported housing. Some stakeholders highlighted that there have been improvements to prevent women being released without a home to go to, but short sentences still often result in tenancy breakdown. In general, women in the criminal justice system tend to commit crimes with shorter sentences than men, but these sentencing periods can still cause disruption to housing and mean difficulties on release. Women are normally expected to present to Housing Options on their first day of release, with some released on Fridays to find that the Council offices and many other support services are closed for the weekend.

One woman interviewed had been supported by Basis to secure accommodation prior to her prison release, and felt this had offered her security which reduced her chances of reoffending. 'Never in my experience or other women I know have you got a

place to go from prison, 99% of the time you're released onto the streets. Then you end up back in prison'. With wrap-around support and access to housing, she had felt more able to settle and was motivated to avoid re-offending so that she would not return to prison.

#### Case study 4: "D"

"D", who is in her late 30s, lives in a supported housing service in Leeds. Her recent experience of homelessness was triggered by a period in prison. After being told she would have a supported property on departure, she was left without a property with the explanation that, since she was not on licence, there was no duty of care.'I was left outside the jail with nowhere to go'. Being homeless led to her sofa-surfing in different situations which led to her experiencing of significant violence including assaults.

D felt that she had gained little help from the council: 'once you mention sex work or jail, you're totally disregarded, passed from pillar to post without an end result'. She perceived a lack of awareness of sex work and the realities of homelessness, with workers failing to grasp that her experience of violence was due to staving in unsafe situations because she had nowhere else to sleep.

During the onset of Covid-19 and the 'Everyone In' approach, D was supported by Basis Yorkshire to stay in a mixed-gender hotel, which provided safety, regular food, helpful workers, and the opportunity to prepare to move into a property. Basis helped with her move to supported housing and kitting out her new property.

D emphasised the impact of stable housing in her life. She explained that while she has struggled with addiction for many years, she always worked and had a home until she lost her housing and everything then went wrong: 'Homelessness is so hard, it's the worst thing. Then you end up staying with someone and it's not safe and you get beaten anyway'.

When asked what she envisaged for the future, D emphasised the need for consistent support services for women: 'A woman housing worker who is trained in sex work would be massive, who could review things with you regularly - to be able to be honest about doing sex work and not be looked down on'. She also highlighted the need to look at 'the bigger picture... If there was a place when you leave jail which is safe... a holistic place with domestic abuse, drugs and sex work services... a support package... rather than leaving you with nothing and you end up sex working'.



### 4.15 Sex working mothers

Most of the women we spoke to were mothers. All the mothers we spoke to saw this as an important part of their identity, regardless of whether their child was in their care or not. The trauma of having children taken into care can be worsened by a housing system which categorises women along a binary of either 'single' or 'family' homeless, discrediting a woman's identity as mother<sup>28</sup>. This can mean being assigned properties that are unsuitable for children, further obstructing the chances of having their child returned to their care.

One stakeholder felt that Children's Social Care assume that children are at automatic risk if their mother is sex working, with sex work often routinely conflated with substance use or mental ill-health. They felt there needed to be greater awareness and understanding of sex work across Children's Social Care, as well as greater communication between social workers and housing workers when a mother is experiencing homelessness. It was further highlighted that supported accommodation can further enforce separation of a mother from her children. Many supported environments do not allow anyone under the age of 18 on the premises, which can mean women with children are unable to facilitate contact. This has been especially true during the pandemic and the long period during which contact centres were closed. Greater recognition of the needs of homeless mothers who are separated from their children would greatly support the wellbeing of many women experiencing homelessness.



"Because I've got my dog with me, I've got a home and a plan. If I didn't have him it wouldn't feel like a home. He's like the final piece in the puzzle. I've got so much to get up for and to do - without him I would just lay there. When I was separated from him, I didn't know what to do. It was the hardest thing in the world."

(Participant)

#### **4.16 Pets**

Some of the women we spoke to highlighted the problems of accessing accommodation with pets. While there were a small number of emergency and temporary accommodation provisions in Leeds which would allow dogs, these were all in male-specific properties. Private rental properties also often have blanket bans on pets in properties. One woman spoke of her frustration with this: "It's so hard accessing housing with animals. I want to know what the actual issue is from the landlord's perspective. How much damage is a dog going to cause? [...] They're putting a carpet and a bit of paint in front of people's lives, hearts and souls. What about a deposit scheme? I'd happily put down a deposit if my dog could stay".

Similarly, refuge accommodation is unable to cater to women with pets. While there are some specialist pet-fostering services available to women fleeing abuse, spaces on these are limited and often not accessible in an emergency. This can mean women remaining in dangerous situations as they want to remain with their pet. One woman, speaking on this, reflected that "there's no other option if you need to stay with your animal, other than stay outside in the freezing cold and putting the animal and yourself at risk, or get separated from your animal, moved around endlessly while you're unhappy, you've lost everything".



5. Recommendations	Local gov- ernment	Voluntary sector	National organisa- tions
1) Design a strategic approach aimed at capturing, responding to and reducing hidden homelessness.  a. Develop a city-wide strategy to reduce hidden homelessness, in partnership with key organisations.  b. Facilitate a women's homelessness task group to identify cases of hidden homelessness and broaden operational solutions.  c. Following the model of existing rough sleeper outreach programmes, develop alternative intervention pathways to assist hidden homeless women into stable accommodation.  d. Engage in further quantitative examination of hidden homelessness, particularly in developing representative methods of capturing data to reflect the scope and prevalence			<b>✓</b>
<ul> <li>2. Embed gender and trauma informed practices which are non-judgmental and welcoming to women who sex work.</li> <li>a. Consult with sex workers and specialist sex worker support organisations to develop sex worker-friendly practices.</li> <li>b. Adapt existing policies informing the response to violence towards women to ensure that these recognise the different experiences of women who sex work, particularly as relates to risk from domestic violence, clients, exploitation, and criminal networks.</li> <li>c. Encourage training and development among staff teams exploring gender, trauma, stigma, and sex work.</li> <li>d. Ensure accessible escalation pathways are in place to appropriately challenge stigmatising practice.</li> </ul>			
<ul> <li>3. Ensure emergency accommodation for women is responsive to experiences of trauma and stigma.</li> <li>a. Expand capacity for self-contained, gender-specific bed spaces, building on the model implemented during Everyone In.</li> <li>b. Where mixed-gender spaces have to be used, implement trauma-informed policies to minimise risk to physical and emotional wellbeing for women accessing the service, particularly relating to domestic abuse and exploitation.</li> <li>c. Ensure gender and trauma informed practice is a core component into all strategic planning and commissioning decisions for any premises where women may be accommodated.</li> <li>d. Following the 'Jane's Place' refuge model, explore commissioning opportunities for longer-term specialist recovery refuge accommodation for women fleeing abuse who require access to more intensive support environments when needs have not been met by existing provisions.</li> </ul>			

4. Continue to refine practices within Housing Options to improve outcomes for women who require access to trauma-informed intensive support.			
<ul> <li>a. Build on joint-working practices between the Housing Options safeguarding team and specialist third-sector organisations to improve accessibility, including resuming outreach homelessness assessments with Basis and Joanna Project.</li> <li>b. Develop shared learning initiatives and broaden lines of communication between Housing Options and specialist service providers to ensure sensitive, gender-informed practice is delivered consistently.</li> <li>c. Increase capacity for time-sensitive responses to requests for emergency accommodation, following due diligence processes.</li> <li>d. Build on existing inter-agency communication when formulating Personal Housing Plans for women who require access to intensive support.</li> <li>e. Further develop multi-agency working between partner agencies and the criminal justice system to ensure all women leaving prison have access to suitable accommodation.</li> </ul>			
5. Prioritise consistent quality in any housing stock utilised as part of formal housing pathways in the city.			
Continue to work in increasing capacity within social housing stock and commissioned supported accommodation.	$\square$	$\subseteq$	
<ul> <li>b. Where non-commissioned and private rental accommodation must be used, ensure that these meet an agreed minimum quality standard, with regular monitoring to ensure this is maintained.</li> </ul>	$\square$		
6. Further develop joint-working practices to ensure holistic, person-centred support for those experiencing homelessness			
<ul> <li>a. Continue regular multi-agency consultations at strategic level to ensure maximum suitability and impact of strategic planning.</li> <li>b. Develop professional networks across the city to share good practice and identify gaps in service.</li> </ul>	<b>☑</b>		
c. Embed gender and trauma champions within teams who can represent organisations, disseminate training, and consult on internal and external policy decisions.		lacksquare	
7. Evaluate racial bias within housing and support systems and establish how these may be made more inclusive to those who experience racism.			
a. Undertake further qualitative research into experiences of racism for women who sex work, as well as for those experiencing homelessness more broadly, and of the barriers		$\square$	$\subseteq$
this creates for service engagement.  b. Review policies and procedures with specific consideration of including anti-racist principles at all levels of service delivery.	$\subseteq$	$\subseteq$	
c. Employ paid consultation opportunities for those with lived experience of racial discrimination to inform practices and procedures.	$\subseteq$		
8. Increase opportunities for peer support and co-production.			
a. Ensure strategic decision making involves paid participation from those with lived experience.	$\square$	$\square$	
b. Facilities supporting women, and homeless individuals more broadly, should provide safe, confidential spaces and trained staff to enable peer support.	$\square$		



### What we do

Homeless Link is the national membership charity for organisations working directly with people who become homeless in England. We work to make services better and campaign for policy change that will help end homelessness.

## Let's end homelessness together

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