

SHELTER

Fobbed Off:

The barriers preventing women accessing housing and homelessness support, and the women-centred approach needed to overcome them

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SHELTER CENTRED

EXECUTIVE SUMMARY

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1 in 2

Single women are denied the right to a safe home^{xi}

1 in 4

Single women with children live in a home that harms their or their family's physical or mental health^{xii}

850,000

Lone mothers do not have a safe or secure home^{xxv}

1 in 3

Lone mothers are constantly struggling or already behind on their rent or mortgage^{xxx}

We are living in a housing emergency. In the UK, 17.5 million people are denied the right to a safe home and women are disproportionately affected.ⁱ

When it comes to being homeless or living in unfit housing, we need to pay attention to women's experiences. A failure to recognise women's specific needs means women are often being failed when faced with the housing emergency.

Shelter provides face-to-face housing advice and support to people affected by the housing emergency in 11 hubs across England. Across almost all of our hubs, women make up the majority of clients, and they often don't contact us until they're at crisis point.

This research brings together the findings of a 10-month research project, covering Bristol, Birmingham and Sheffield. It includes the insights of 14 peer researchers who are women with lived experience of housing issues living in one of the three areas, 35 interviewees also with this lived experience, Shelter's frontline services staff, and local organisations working with communities in Bristol, Birmingham and Sheffield.

Funded by the National Lottery, the research investigated the housing problems women, non-binary people and their families are facing, and their experiences with services to try to resolve these issues. We explored interviewees' experiences of best practice with services and, crucially, the barriers that prevented them accessing the support they needed. Based on these contributions, we outline a series of priorities for delivering effective women-centred services and have produced a co-designed women-centred service model.

This report backs up the findings of the research with wider insights about the way a broken housing system is disproportionately affecting women.

The scale of the problem

In the last 10 years, the number of women in England who are homeless has increased by 88%.ⁱⁱ There are currently **75,000 women homeless** and living in temporary accommodation with their families,ⁱⁱⁱ and in autumn 2020, **377 women were recorded rough sleeping** in England.^{iv} Of the 35 interviewees we spoke to, 19 had experienced homelessness, often multiple types of homelessness, such as emergency accommodation or 'sofa-surfing'. Interviewees were living in a range of difficult circumstances: 23 had been treated poorly by their landlord or accommodation provider, 18 lived in homes in a state of disrepair, and 10 lived in overcrowded conditions. 15 participants felt that being a woman has a negative impact on housing and homelessness experiences.

Housing and health

In England today, single women with children are twice as likely than other households to be living in a home that harms their or their family's physical and/or mental health.^v Our peer research reflects this with **31 of the 35 women interviewed reporting poor mental health** as part of their housing problem picture and 21 reported poor physical health experienced by themselves or a family member. While housing and homelessness was not always the cause of these health issues, where they weren't, they were exacerbating existing conditions, such as allergies or respiratory illnesses being made worse by damp or mould in the house. COVID-19 also had a negative effect on over three-quarters of interviewees' (27 out of 35) housing problems, as people felt more isolated stuck in unfit housing or vulnerable if they had to shield due to health conditions.

Health issues can also make it harder for women to access the services they need. This could be because of access needs or because poor mental health makes them feel unable to face the problems they have, and wade through multiple forms, or service requirements in order to get help.

69%

Of women who rent privately worry they wouldn't be able to find somewhere in the event of a relationship breakdown^{xlii}

1 in 10

Lone mothers were unable to rent in the last five years due to a 'no child' policy^{lii}

Women struggle to cover their housing costs

Rising rents, unattainable home ownership and a shortage of social housing is causing serious problems for many people, but income disparities between men and women heighten housing affordability issues for women.

Contributing to the lack of affordable housing for women is the continued degradation of our benefits system. Women are more likely to claim benefits and so have been hit hard by the numerous cuts and freezes to LHA rates over the years.

Almost three-quarters (25 out of 35) of interviewees reported struggling to cover their housing costs, with concerns that benefits would not cover the cost of their homes. 'No DSS' discrimination can limit women's housing options further, with 1 in 3 private renters who are single women with children in the household being unable to rent a home they wanted because the landlord or letting agency had a policy of not renting to those receiving housing benefits.^{vi}

Domestic abuse causes women's homelessness

Domestic abuse is one of the top three triggers for being homeless or threatened with homelessness in England.^{vii} Although not always the cause, studies over the last 30 years have shown that domestic abuse is "near universal among women who become homeless".^{viii}

A third of the participants (12 out of 35) we spoke to reported domestic abuse as being an issue related to their housing problems.

Survivors of domestic abuse are forced to leave their homes to protect their own lives and those of their children, but they face a lack of suitable alternatives, particularly due to the shortage of refuge spaces. The benefit cap further penalises women fleeing domestic abuse as they move from a working household to an out of work household, which is subject to the cap.^{ix} The remaining options are often precarious and sub-standard, such as being stuck in temporary accommodation, 'sofa-surfing' with friends and family or on the streets. This can deter women from leaving the perpetrator.

Lone mothers face particular challenges

The vast majority of lone parents are women (90%).^x This makes women more susceptible to discrimination from landlords or letting agents unwilling to rent a home to them due to a no child policy. The severe and disproportionate financial struggles many lone mothers face trying to keep their family in a safe, affordable home can be highly traumatic for them and their children. Concerns around having their children removed due to their housing challenges may also prevent them from seeking support – as was the case with two interviewees.

What do we know about what women-centred services should look like?

A women-centred approach to support is necessary to get women facing housing issues the help they need. But what does this look like according to existing literature and outputs from various organisations supporting women?

- **Increasing women-only provision** – this is important to make women feel safe and comfortable, particularly following experiences of gender-based violence. It may take various forms (e.g. women-only accommodation, women's centres, women's groups etc.) and a fully inclusive approach means provision is for cis and trans women, as well as non-binary and gender non-conforming people comfortable in spaces that centre on women
- **The importance of co-production and involving women with lived experience** – services are better when those who directly benefit from them are involved in their design and delivery. Involvement opportunities include peer research and recruiting staff with lived experience to empower them to be part of the solution
- **Taking a trauma-informed approach** – this is essential given the prevalence of abuse experiences and trauma around managing childcare responsibilities while living in insecure housing

1 in 3

Women turned to family for advice on housing^{lxxxiv}

1 in 4

Women turned to friends for advice on housing^{lxxxiv}

- **Tailoring support to be person-centred and holistic** – support must be tailored holistically around the person, putting their needs and intersecting aspects of their identity at the centre of support to ensure they get the help they need. A more joined-up approach achieved through enhanced partnership working or a 'one stop shop' ensures women can navigate the maze of services more effectively

What did good advice and support look like?

Most interviewees sought help and support with their housing from multiple different services or networks, which is important to bear in mind when considering the different barriers people may come up against. The local authority was the most common port of call for 32 interviewees, followed by both Shelter and support from family and friends for 23 people. Other charities (e.g. Citizen Advice Bureau) were also accessed by 18 people. The support received from Shelter and other charities was most commonly identified by participants as the most 'helpful' source of support. Seeking help from family and friends underlines the importance for women of having a support network to rely on.

Participants told us 'good' support looked like:

- **Practical support** – people appreciated support undertaking practical tasks like completing forms, writing letters, or communicating on their behalf with services
- **Emotional support** – this ensured people felt safe, hopeful, taken seriously and properly listened to and understood
- **Support with children's needs** – women appreciated help to make sure their children's needs were met and received this from family support workers, friends and family, and three women went to their children's schools

Barriers preventing women getting support

At the core of this research was the discovery and discussion of the barriers women faced when accessing advice and support with their housing.

Barriers which make services inaccessible for women

- **A lack of mental health support** – mental health acted as a barrier to getting support for half of the participants (18). Poor mental health left people feeling they couldn't cope with daily activities or unable to advocate for themselves or navigate the often complex maze of services. Services frequently failed to recognise and respond adequately to people's mental health needs, including showing awareness of trauma
- **Physical health issues, learning disabilities and autism made getting support more difficult** for five participants who felt there was a lack of understanding or tailoring of support to meet their additional needs, which left them feeling not listened to or discriminated against
- **Lack of knowledge of how the system works** – 20 participants didn't know where to turn to for support with their housing or how best to navigate the system
- **Language barriers** – seven participants struggled communicating with services due to a language barrier which made complex processes, like applying for benefits, harder
- **Barriers related to having children** – two participants feared having their children removed and so avoided asking for help
- **Barriers related to internet or computer access** – eight women found it difficult accessing help due to poor Wi-Fi in their emergency or temporary accommodation or lost access to a computer when the library shut in the pandemic
- **Eligibility barriers** – some found they weren't eligible for assistance from services with restrictions in place (e.g. due to funding restrictions and demand). Six people's local council denied them homelessness assistance or access to social housing

Barriers which lead to poorer experiences of services

- **Poor treatment by professionals** – this was reported by two-thirds of participants (23), making it the most commonly experienced barrier to getting adequate

support. Participants described a range of different ways they were treated badly, including being spoken to rudely, being made to feel like a burden or that your problems weren't severe enough, or being shown a lack of empathy or understanding. This left people feeling helpless and, at worst, re-victimised. The local authority was the source of support most often reported as 'least' helpful and poor treatment from council staff appeared in 17 people's accounts

- **Slow speed of response** – 22 interviewees felt they were having to wait weeks and weeks for an answer, and for many this problem became worse during COVID-19 when many services slowed down, were unavailable, more difficult to access or shut down entirely
- **Too many forms** – seven women told us they had problems filling in forms – some were overwhelmed by too many forms, some found them too rigid, and another participant said she found forms hard to complete as she's dyslexic

Priorities for delivering effective women-centred services

Our recommended approach to women-centred services is underpinned by the need for effective **mental health and wellbeing support**. This doesn't necessarily mean offering access to therapists and other mental health specialists, but rather keeping the wellbeing of the people you are supporting at the centre of what you do. This includes facilitating opportunities to improve people's mental health (e.g. peer networks) and preventing harm to people's mental health (e.g. through poor service delivery).

Support must also be **trauma-informed** in recognition of the traumatic experiences many women have had. It should also be **inclusive and accessible**, recognising and adapting to people's different accessibility needs through a person-centred approach.

We have outlined three priority areas for what women told us they want support to look like:

1. **Offer opportunities that bring women together** – peer support activities; involvement activities; and employment, training and volunteering opportunities
2. **Better collaboration between services women go to for help** – stronger partnership working which draws on the strengths of different organisations; better information sharing and signposting between services; and better joint working between the police, local authorities and services
3. **Practical support accompanied by emotional support** – 'professionals' help with practical tasks but also offer caring, non-judgemental support; partnering with specialist support to meet the needs of different groups (e.g. LGBTQ+ people, domestic abuse survivors, lone parents or families etc.)

Shelter's co-designed women-centred service model

Shelter's co-designed service model pulls together all of the three priority areas, and the key approaches which underpin them, to deliver an effective women-centred service that supports women and non-binary people with their housing problems. In the co-design sessions it was decided that preventative, early help was needed, and that a **Peer Support Service** element would build resilience and supportive networks among women and non-binary people accessing the service. The service must be led by people with lived experience in a range of paid and volunteer roles, including **paid peer research opportunities** to enable skills development and monitor the achievements of the service in line with its original aims. **Partnership working** across sectors is key to achieving longer-term changes for women and non-binary people across Birmingham, Bristol and Sheffield.

This report highlights that there is a gendered nature to the housing problems women experience, which demands a gendered approach to the solution. A women-centred approach to service design and delivery will empower women towards achieving their ultimate goal of living in safe, suitable homes where they can build a stable life for them and their families.



INTRODUCTION FROM A PEER RESEARCHER

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Being a peer researcher with Shelter really interested me, as not only was it an exciting opportunity to gain experience in conducting research, but I was also able to use our research findings to help co-design new and improved services to help women like me who've experienced problems with their housing. This meant that I could potentially make a difference to the lives of women in my area.

Like many of the women I interviewed, my housing problems stemmed from a combination of mental illness and abuse. After a number of years of being moved between different services, I ended up being discharged from a psychiatric hospital at the beginning of the pandemic with no home to return to. Like a lot of women, I was petrified of living on the streets, so ended up staying with a string of abusive men with very little support. Now that I have safe housing, which I mainly gained by relying on myself, I have the ability and desire to help other women.

I believe peer research is extremely important, especially in charities, as it shifts the dynamic of research from being an outsider investigating a marginalised group, to a group of people working together and collaborating around a shared goal. This improves the quality of the data collected as participants feel more able to open up to people that they have similar experiences to. A lot of the women I talked to had a history of traumatic experiences so it was important we ensured people felt prepared for what we'd be discussing to avoid it being triggering. It felt clear that speaking to a peer researcher made them feel more comfortable and less judged when opening up.

At the start of the project, I had no idea how many opportunities would come from being involved. As a peer researcher I've presented our findings to the National Lottery, shared my experiences with stakeholders running local services and secured a funded place at an international conference – all things I wouldn't have been confident enough to do previously.

Throughout the project I have been shocked and disturbed at how many of the participants were struggling with their mental health and how let down they had been by a number of services which should be helping them with their housing. There were challenging moments which also took their toll on me as a researcher, such as feeling deflated when using an interpreter had been harder than I expected. However, it was invaluable having a dedicated member of staff on hand (our Involvement Coordinator, Liv) to conduct debriefs after interviews where we could vent, reflect and learn together.

Most importantly, I feel privileged to have met and learnt so much from the people I got to interview, and also the other peer researchers who are all amazing women.

WITH THANKS TO

This research would not have been possible without the brilliant contributions of our talented peer researchers. They have been involved in all elements of the research, developing the topic guide and interview questions, conducting interviews, sharing and analysing insights, presenting findings and co-designing solutions. They have also co-produced this report.

We are hugely grateful to them for dedicating so much of their time and expertise to the project and feel privileged that they chose to take part. Together, they have contributed over 500 hours to the project over an eight-month period. Their insight, understanding, empathy and compassion, have meant that the research has genuinely been transformative for many of the people involved in the project, we at Shelter included.



ABOUT THIS RESEARCH

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1 in 2

Single women are denied the right to a safe home

1 in 4

Single women with children live in a home that harms their or their family's physical or mental health

A women-centred approach puts the needs and lived experiences of women first, and designs and delivers services with them at the forefront

Shelter provides face-to-face housing advice and support to people affected by the housing emergency in 11 hubs across England. In almost all of our hubs, women make up the majority of clients. Women often contact us at crisis point, when they are vulnerable and have been coping with complex issues on their own or with little help. When it comes to being homeless or living in unfit housing, we need to pay attention to women's experiences. A failure to recognise women's specific and differing needs means women are often meeting multiple professionals to take action and services are all too frequently failing to resolve women's housing issues. Inaccessibility and a lack of tailored support means that problems then escalate, and the situation becomes even worse for women and their families.

- Almost 1 in 2 (44%) single women are denied the right to a safe home, rising to two thirds (65%) for single women with children in the household^{xi}
- 1 in 4 (25%) single women with children live in a home that harms their or their family's physical and/or mental health – that's two times higher than for all other households^{xii}

This report brings together the findings of a 10-month peer research project funded by National Lottery which explored the extent to which women's needs are not being met when accessing the range of services needed to resolve their housing issues. We spoke to women and non-binary people in Bristol, Birmingham and Sheffield, where we have hubs located, and investigated:

- What are the issues that women, non-binary people and their families are experiencing when it comes to homelessness and unsuitable housing in Bristol, Birmingham and Sheffield?
- What are the barriers preventing women and non-binary people from accessing the right advice and support for them?
- What does best practise in other services assisting with housing, homelessness or other related issues look like?
- What solutions can we provide to address these issues and barriers?

The research provides insights which helped us to co-design a new women-centred service model (see Chapter 11) with local partners in each area which, if implemented, would improve the support delivered to women by Shelter and services more broadly, and contribute towards systems change more widely.

This research amplifies the voices and shines a light on the experiences of women, as well as non-binary people who feel comfortable in a project centred on women's experiences. We largely refer to women in this report as all participants except one person identified as women. There was one non-binary participant, whose singular perspective cannot fully illustrate the range of issues non-binary people face with their housing or when trying to access help. Recent research from AKT highlights that 30% of non-binary people^{xiii} who accessed services while homeless felt that service providers did not understand how to support them because of their identity.^{xiv} This statistic reflects the need for additional research to unpack the experiences non-binary or gender non-conforming people have when trying to access support with housing issues. Likewise for the experiences of trans women accessing services, as, so far as we are aware, none were represented in this research. As one of our participants put it, more organisations need to be "specifically doing research into people who are diverse in their gender or their sexuality".



WOMEN'S EXPERIENCES OF HOMELESSNESS AND UNFIT HOUSING

WOMEN'S EXPERIENCES OF HOMELESSNESS AND UNFIT HOUSING

The scale of the problem

75,000

Women and their families are homeless and living in temporary accommodation

We are living in a housing emergency in the UK, with over 17.5 million people living in overcrowded, dangerous, unstable or unaffordable housing.^{xv} The emergency does not affect everyone equally though, and women are affected in a specific and often disproportionate way.

In the last 10 years, the number of women in England who are homeless and living in temporary accommodation has increased by 88%.^{xvi} Currently, 75,000 women and their families are homeless and living in temporary accommodation.^{xvii} They make up 60% of homeless adults in temporary accommodation, compared with just 51% of adults in England.^{xviii}

At the sharpest end of the housing emergency, there were 377 women recorded rough sleeping in England on a single night in autumn 2020.^{xix} Efforts made by many women to conceal themselves to stay safe^{xx} and a lack of evidence and data on women's homelessness, means the extent to which women are affected is underestimated, and there is limited awareness of the needs of female rough sleepers among service providers.^{xxi,xxii}

850,000

Lone mothers do not have a safe or secure home

Lone mothers are often the worst affected, with 1 in 38 lone mothers in England currently homeless and living in temporary accommodation^{xxiii} and 1 in 42 lone mothers in England threatened with homelessness in the last year.^{xxiv} Overall, Shelter's research shows that almost 850,000 lone mothers do not have a safe or secure home – that's 65% of all lone mothers in England.^{xxv}

Women struggle to cover their housing costs

Rising rents, unattainable home ownership and a serious shortage of social homes are a recipe for rising poverty and homelessness for all.^{xxvi} In fact, 1 in 5 (20%) women had to borrow money from friends, family, banks and other lenders to keep up to date with rental or mortgage repayments.^{xxvii}

1 in 3

Lone mothers are constantly struggling or already behind on their rent or mortgage

Income disparities between men and women have a substantive effect on the affordability of housing for women. Women would not be able to find affordable rents in any region in England (based on median earnings) while for men this is only true in London.^{xxviii} Shelter found that, of those with housing costs, women are 36% more likely than men to be in arrears or constantly struggling to afford these costs – this equates to 4.7 million women.^{xxix} Lone mothers face the most acute affordability issues with almost 1 in 3 (30%) in arrears or constantly struggling to keep a roof over their heads – this equates to 321,000 lone mothers.^{xxx} Housing unaffordability is forcing women into poverty, with over 1 in 7 (15%) saying they or their partner had cut back on meals and/or skipped meals in the last month to keep up with their housing costs.^{xxxi}

The benefits system should prevent homelessness, however successive governments have cut and restricted the level of support available. As women are more likely to claim benefits, they are disproportionately disadvantaged by changes to the welfare system.^{xxxii} Women make up two thirds (67%) of Local Housing Allowance (LHA) recipients (LHA is the housing

1 in 3

Private renters who are women with children were unable to rent a home due to being in receipt of benefits

69%

Of women who rent privately worry they wouldn't be able to find somewhere in the event of a relationship breakdown

benefit for private renters) and so have been hit disproportionately hard by the numerous cuts and freezes to LHA rates over the years.^{xxxiii}

Being more likely to be in receipt of benefits makes women more susceptible to discriminatory 'No DSS' policies which make it even harder to find an affordable home to rent. Nearly a third (32%) of private renters who are single women with children in the household have been unable to rent a home they wanted in the last five years because the landlord or letting agent had a policy of not renting to those receiving housing benefits.^{xxxiv} Moreover, women who are disabled, Black or Bangladeshi are more likely to be in receipt of benefits, making them more susceptible to such discrimination.^{xxxv}

The benefit cap, introduced in 2013 and lowered in 2016, limits the amount of benefit working-age people can claim. Women are disproportionately hit by the benefit cap as 62% of those capped are lone parents^{xxxvi} and the vast majority (90%) of lone parents are women.^{xxxvii} To avoid the cap, lone mothers have to cover all childcare responsibilities and work more hours to avoid shortfalls with their housing costs and falling into arrears.

Domestic abuse causes women's homelessness

Domestic abuse, which disproportionately affects women,^{xxxviii} is one of the top three triggers for being homeless or threatened with homelessness in England.^{xxxix} Although domestic abuse isn't always the cause of women's homelessness, studies over the last 30 years have shown that domestic abuse is "near-universal among women who become homeless".^{xl} The home can be a very dangerous and, in some cases, fatal place for women, with over seven times as many women killed in their homes than in public, the next most common location.^{xli}

Survivors of domestic abuse are forced to leave to protect the lives of themselves and their children, however there is a distinct lack of suitable alternatives. This leaves women worrying they won't be able to find a decent place to live, with 69% of women who rent privately worrying they wouldn't find somewhere decent to live in the event of a relationship breaking down.^{xlii}

Refuges are a lifeline for women fleeing violence, however, spaces are 30% below the recommended level in England^{xliii} and spaces reduced during the pandemic.^{xliiv} Some women are more likely to be turned away from refuges, including women who are Black or minority ethnic, have No Recourse to Public Funds (NRPF), are deaf or disabled, or have mental health or substance misuse issues.^{xliv}

Women escaping domestic abuse are also being penalised by a welfare system that doesn't support them, and specifically by the benefit cap. Leaving a partner may mean a survivor has to claim benefits because they have had to leave their work suddenly for fear for their safety or because they have to leave their local area. They also may have to claim benefits because their partner has been in work, and they are not either because they are not allowed to – a common form of economic abuse – or because they look after their children full-time. In terms of the benefit cap, leaving a partner can mean women go from being classed as in a "working household", and not subject to the cap, to an "out of work household", and so subject to the cap.^{xlvi} Those who are trying to escape are disadvantaged further by the struggle to find a home which is affordable under the capped amount of benefits they'd receive.^{xlvii}

Women are being forced into precarious and often sub-standard living situations – stuck in temporary or emergency accommodation, staying with friends or family, in hostels or on the streets. Such limited and poor housing options deter many women from leaving so they remain in danger living with the perpetrator.

1 in 10

Private renters who are single women with children were unable to rent a home due to a 'no child' policy

Women have different experiences of being homeless

Women have different experiences of being street homeless to men, largely due to the increased threats to their safety. Women are at great risk of violence when on the streets.^{xlviii} This forces some women to opt for alternative but equally unsafe options, such as engaging in 'sex for rent'.^{xliv}

Women are also more likely to end up homeless in temporary accommodation where poor conditions and gross overcrowding are rife, particularly in emergency B&Bs and hostels.ⁱ Conditions in temporary accommodation were particularly hard during the COVID-19 lockdown periods as people struggled to stay safe and social distance in shared accommodation.ⁱⁱ

Lone mothers face particular challenges

Lone mothers may encounter discrimination purely on the basis of having children in their household. Shelter found that 1 in 10 (11%) private renters who are single women with children have been unable to rent a home they wanted in the last five years because the landlord or letting agent had a 'no child' policy.^{liii}

The severe and disproportionate financial struggles many lone mothers face trying to keep their family in a safe, affordable home may encourage them to seek help from services and other support networks. However, concerns that children may be removed can pose a barrier to seeking support, alongside feelings of shame and guilt caused by fears they have failed to meet gendered expectations of being "good mothers", which negatively affects women's mental health.^{liiii} It can also be highly traumatic juggling these decisions while living alongside your children in unfit or dangerous housing, particularly where there may also be a threat of violence from a perpetrator.



**WHAT DO WE
KNOW ABOUT WHAT
WOMEN-CENTRED SERVICES
SHOULD LOOK LIKE**

WHAT DO WE KNOW ABOUT WHAT WOMEN-CENTRED SERVICES SHOULD LOOK LIKE?

A women-centred approach to support is necessary to get women facing housing issues the help they need, but what does a woman-centred approach to support currently look like? The existing literature and outputs from various organisations supporting women suggest several key factors to achieve an effective woman-centred approach.

Increasing women-only provision

Women-only provision puts women and their needs at the heart of support

Women-only provision can take many different forms, including women-only accommodation, women's centres, women's groups, and women-only spaces. A fully inclusive approach to women's provision would be inclusive of both cis and trans women, as well as others comfortable in a space that centres on women but who may have experienced exclusion from these spaces, such as non-binary or gender non-conforming people.^{liv} Specialist support should also be available to support trans women and gender non-conforming people who may prefer to access LGBTQ+ specific provision.^{lv} Operating with staff who identify as women supports women-only provision, as well as an organisational culture that commits to addressing problems experienced by women (e.g. through training and strong governance and accountability).

Women-only provision is important to make women feel safe and comfortable, particularly when the presence of men can be intimidating following experiences of domestic abuse and gender-based violence. Homelessness services are however traditionally dominated by the experiences of male rough sleepers and so are more often tailored towards men's needs.^{lvi} Women do less well in services predominately working with men.^{lvii} Despite this, as of 2019, only 11% of homelessness services offer women-only accommodation.^{lviii} There is also a lack of funding for the women-centred services that do exist – Women's Centres are expected to provide a wide range of support to women with minimal funding from central government to do so.^{lix}

The importance of co-production and involving women with lived experience

Co-production brings together service providers and individuals with lived experience to collaboratively develop and deliver solutions (and services)

Co-production recognises that services are better when those who directly benefit from them are involved in their design and delivery. They know better than anyone about what works and what doesn't, and what they want and need from a service. Collaborating with women who have experienced homelessness and unfit housing will lead to improved outcomes for women in similar situations in the future and could prevent them from needing support from services at all. There's no one approach to co-producing services, but it is important that the approach is inclusive and accessible and that people with lived experience can meaningfully contribute.

Importantly, co-production must be reciprocal.^{lx} In supporting individuals to become agents for change, co-production can support women to develop confidence, and a sense of choice and control that may have been taken away from them during their experience of homelessness. Successful co-production only works where power is shared equally with everyone involved, and where people with lived experience can contribute to decision-making at all stages.

Involvement opportunities such as peer research and recruiting staff with lived experience empower people to be part of the solution and enable organisations to learn from the insight

and expertise shared by those with lived experience. Staff and volunteers with lived experience often demonstrate empathy and compassion with those accessing a service due to having shared or similar experiences.^{lxi} This can support them to develop more trusting and positive relationships with those they support.

Taking a trauma-informed approach

A trauma-informed approach recognises the signs of past and/or ongoing trauma an individual may be experiencing and adapts to better meet their needs

The prevalence of abuse experiences and the fear of having children removed among women enduring severe housing issues or homelessness makes trauma-informed support essential. This might include offering access to counselling or peer support groups. It also avoids women having to recount traumatic life experiences to multiple service providers which can be re-traumatising.^{lxii} Women who are homeless are found to have higher levels of poor mental health than men (which corresponds with the general population).^{lxiii, lxiv} Experiences of physical and sexual violence can also be a driver of substance misuse; women who have experienced violence are eight times more likely to experience drug addiction than women who haven't.^{lxv}

Dealing with trauma from past or current situations can make coping with everyday tasks and responsibilities feel extremely difficult and overcoming obstacles, including those posed by services themselves, can become unmanageable. We know that upstream preventative work is vital to helping people avoid homelessness,^{lxvi} however, a vicious cycle is fuelled as inadequate services and gaps in provision mean women avoid mainstream services, instead relying on family and friends. Their problems are then more complex if they eventually present to services down the line, often reaching out only at crisis point.^{lxvii}

There is increasing recognition that trauma-informed practice is the most effective approach to supporting domestic abuse survivors, however, it is still an emerging field in the UK,^{lxviii} and a lack of understanding among service providers of how abuse plays out in women's experiences remains evident. For example, one study showed that housing services did not perceive domestic abuse as a reason for homelessness.^{lxix} Another report showed services working with women experiencing homelessness or substance misuse rarely recognised that trauma from abuse often has lifelong consequences.^{lxx}

Tailoring support to be person-centred and holistic

A person-centred approach focuses on the person and considers their wants, needs, and life experiences

Holistic support provides solutions with all of the recipient's needs in mind

Growing in popularity in various sectors,^{lxxi} person-centred support tailors support holistically around the individual. Women are by no means a homogenous group and being person-centred means services take account of all intersecting aspects of someone's identity (including their ethnicity, gender, sexual orientation, disability, immigration status, etc.). People experience different forms of oppression based on these characteristics and their intersections, which can impact on their housing and support needs (and beyond). For instance, we know being Black or Asian, gay or bisexual, disabled or a lone mother means that the housing emergency is much more likely to impact you.^{lxxii} When looking at race and ethnicity specifically, studies have shown that Black British women are overrepresented among rough sleepers in London,^{lxxiii} and women are at greater risk of anti-Muslim harassment on the streets.^{lxxiv}

Taking time to understand someone's needs avoids misalignment with the priorities for a service, which can lead to women feeling unheard, unsupported and distrusting. Person-centred support responds to people's needs by, for instance, being culturally and linguistically sensitive,^{lxxv} being explicitly inclusive of all groups of women (e.g. stating that trans women are welcome in women-only provision) and considering accessibility needs.^{lxxvi} Otherwise, homelessness services end up being "for a white, heterosexual and cisgender individual".^{lxxvii}

Enhanced partnership working or, where viable, a 'one stop shop' providing wrap-around support under one roof, are other ways to support women holistically with their multiple needs. This leads to a joined-up approach which looks at people's interlinking needs and

recognises “each woman as a whole person”.^{lxxviii} This approach is much easier for women to navigate as it reduces practical barriers, such as having to juggle multiple appointments and manage childcare, particularly if also dealing with trauma or struggling to engage. Partnership working can be improved through shared databases, multi-agency meetings, or a ‘navigator’ model which is specialised support designed to help women navigate services.

Evidence of women centred approaches working

The benefits of women-centred working are demonstrated by anecdotal evidence and direct feedback in a range of reports and Shelter’s own frontline work. While the formal evidence base of the impact and outcomes of a women-centred approach is still growing, examples of compelling outcomes data can be found. In St Mungo’s reporting, women with complex needs saw more positive changes in women-only projects than in mixed ones.^{lxxix} Also, a report from the Women Centred Working Initiative, showed 80% of women accessing women-centred support saw their mental health improve substantially, and almost all women reported a significant improvement in their life as a whole.^{lxxx} More evaluation research evidencing the outcomes of women-centred approaches would be beneficial.



METHODOLOGY

METHODOLOGY

Conducting Peer Research

Peer research is a “participatory research method in which people with lived experience of the issues being studied take part in directing and conducting the research”.^{100xi} Peer researchers apply their knowledge and expertise gained from lived experience to the whole research process: understanding the research context, assisting in the design of tools, collecting and analysing data, and sharing findings. Peer researchers were recruited to this project as volunteers; volunteering is a mutually beneficial relationship that has significant opportunities for personal development for the individual volunteering. Benefits include positive effects on mental health and wellbeing, confidence and self-esteem as well as practical and technical knowledge and skill development. Crucially, volunteering is accessible, supportive and flexible, meaning peer researchers can organise the time they give around their commitments.

The peer researchers recruited for this project were women with lived experience of homelessness and unsuitable housing, which for some were ongoing problems. They spoke to 34 women and one non-binary person who have experienced housing problems, as well as other shared experiences which often accompany housing issues, such as domestic abuse and mental health problems.

Shared experiences between the peer researchers and participants can lead to a deeper understanding of the nuances of people’s stories and greater empathy between researcher and participant. The power dynamics between researcher and ‘subject’ often seen in more traditional forms of research are reduced. These principles were central to the way in which the researchers conducted and analysed their interviews and they received positive feedback from some interviewees who found sharing their story with someone who has been through something similar highly cathartic and sometimes healing. Equally, the peer researchers appreciated an opportunity to use their expertise and experiences to generate solutions which improve a system that had frequently failed them. They also developed their research skills, gained professional development, and most reported that their confidence had grown.

The research process

14 peer researchers were recruited via advertisements through Shelter’s online and social media channels, and through local partners and groups. Peer researchers received training on conducting peer research which covered qualitative research methods and techniques, safeguarding, ethics, personal and professional boundaries and self-care. They engaged in co-designing the interview questions, ensuring the topics covered were guided by their own experiences. Next, they piloted the questions on one another to gain experience of conducting semi-structured interviews and to reflect on the participant’s potential experience of an interview. This qualitative method was used to capture detailed, in-depth understandings on what was often presented as a chain of housing problems.

There was a strong emphasis on ethics for the emotional wellbeing of the peer researchers and the participants. Peer researchers had briefings with the Involvement Coordinator prior to conducting interviews and debriefs afterwards. This created a continuous feedback loop to understand aspects that were working well, gather advice if needed, and provide support if the interview was triggering or caused the researcher emotional distress. Likewise, participants had the opportunity to be connected with advisers or signposted towards helpful resources where needed.

Participants were recruited through internal and external networks, including through Shelter’s social media, by approaching people on Shelter’s client database where they had

consented to involvement and research, and via over 70 local charities and organisations. Peer researchers also drew on their own networks involving those who may otherwise not be reached through services, another advantage of peer research. Recruitment posters were created in English, Urdu, Bengali and Polish to further encourage a diversity of perspectives. Participants were offered a £10 gift voucher as a thank you for taking part.

Participants were based in Bristol, Birmingham or Sheffield, were living in a range of different housing situations and a variety of tenancy types (e.g. private rental, social housing, homeless (emergency or temporary accommodation), supported housing) and household types (e.g. living alone, living with a partner, children and/or friends). People were at different stages of their housing journey, with 30 out of 35 telling us their problems were ongoing or only partially resolved.

We spoke to participants about:

- The housing problems they have experienced (which might be ongoing)
- Steps taken to resolve their housing issues
- Good and bad experiences with services and barriers to getting the support needed
- Ideas for the type of help and support they would like to be available to help people with their housing

Interviews were recorded and, where needed, an interpreter was provided. The identities of the participants were concealed in all outputs and discussions to maintain anonymity, and all names of participants in this report are pseudonyms. Since this was a qualitative piece of research, it could not be exhaustive or fully representative of all women with all types of housing issues. Rather, it was a means to understand the types of issues posing challenges at the time to the women we spoke to across the three areas, and what common trends kept them from accessing the support they needed to resolve their housing problems.

It was important to come together to share our findings as the research progressed. Peer researchers filled in detailed summary notes after each interview and a short bio to share key information about interviewees' experiences with other peer researchers and the project team during group sessions. There was an initial interim analysis session and a final analysis session during which recurrent themes were identified when the data was collated.

Co-design is a method by which people with relevant skills and experience come together to create a product, service, or solution. Power is shared equally with everyone in the room and all the participants have an equal say in decision-making

Once all the interviews were completed and there was consensus on our findings, we held a total of six co-design sessions in Bristol, Birmingham and Sheffield. These were attended by peer researchers, people from Shelter's Research and Involvement teams, frontline services staff from each hub, key stakeholders from local advice and support organisations and community groups, and local authorities. The sessions culminated in the design of a new and improved women-centred service model (see Chapter 11) which integrates the research findings and local knowledge to address parts of the system where people are falling through the cracks and ensure that people receive good support.

For this report, further detailed analysis took place by coding the qualitative responses from the interviewee summary notes across key focus areas. This report was co-produced with peer researchers who have written sections of the report, collated quotes from interviews, provided definitions used in this report, and designed the character graphics.

**WHAT WERE WOMEN
FACING WHEN IT
COMES TO THEIR
HOUSING?**

WHAT WERE WOMEN FACING WHEN IT COMES TO THEIR HOUSING?

Our findings have been broken down into two main sections: women's experiences of housing problems, and their positive and negative experiences with the services they went to for help. To illustrate how the most common experiences reported might present in an individual woman's case, three character profiles, **Emily**, **Saffia** and **Margie**, were developed by peer researchers. Their stories and experiences are integrated throughout this section.

Problems experienced

Peer researchers used a coding system to capture the key housing problems which were appearing as core experiences for interviewees. How these issues present in a woman's life will of course differ from one individual to the next.

Of 35 interviewees:

- Two-thirds (23) reported poor treatment by their landlord (private or social) or accommodation provider
- Half (18) had experienced problems with a poor quality home or a home in disrepair
- Over half (19) reported having been homeless housed in emergency (e.g. hotel, B&B or refuge) or temporary accommodation and/or rough sleeping or 'sofa-surfing'
- 10 had lived in an overcrowded home
- Almost three-quarters (25) reported struggling financially to cover their housing costs

"You have no idea what I go through on a daily basis. I have constant headaches, I'm constantly anxious"

"You feel as if you're under constant duress and stress. And that brings on all kinds of different illnesses. My health isn't great, so I think it's affecting me quite a bit"

"The landlord used the lockdown as an excuse for not repairing the place and bringing the property up to scratch"

"Instead of me having the space to get away from him, we were at home together 24/7"

The vast majority of participants (31) reported **poor mental health as part of their housing problem picture**. Mental health issues may have driven the housing problem, such as in Courtney's case who was unable to work due to her mental health and ended up in rent arrears. Mental health issues may also have exacerbated the problem or occurred as a result of the housing problem. For instance, Sarah was living alone and terrified of the anti-social behaviour from others living with her in supported housing, saying as a result her mental health has declined so much that she feels like breaking down.

In addition, 21 participants reported **poor physical health or health problems experienced by themselves or their family members**. Similar to mental health issues, these physical health problems may have been pre-existing (e.g. cancer) and/or aggravated by the difficult housing situation, such as Shazia whose son was hospitalised with health problems made worse by the local council's failure to resolve the serious disrepair in their council home. She told us: "my son has allergies because there are exposed pipes". Health issues also covered substance misuse, COVID-19, and four people with accessibility issues due to being physically disabled.

16 participants reported a **relationship breakdown with friends or family**, and a third (12) of these participants had experienced **domestic abuse**, which unsurprisingly negatively impacted their mental health. Amani said her mental health declined as her abuser isolated her away from work and education.

The vast majority of participants (27 out of 35) felt that **COVID-19 had a negative impact on their housing problems**. People's mental health suffered, with four participants mentioning a heightened sense of isolation due to the pandemic and lockdowns. For several participants this meant being trapped with their violent partner. For others it meant managing the tensions caused by living in closer company with family, neighbours and other

"Anywhere you want to travel in Sheffield is one end to another... so you spend £5 everyday... it's really difficult"

"[There] should be a reform in [the] housing benefit system – they currently charge extortionate prices for substandard accommodation"

"I do not have a clue whether housing benefit will continue to cover [rent] where I am now"

"Every single day I look for a place and I just get turned down, sometimes I just think they discriminate [against] people [who receive benefits], especially when you're looking for a private property"

"As a woman you're faced with the fear of someone overpowering you to either rob or rape or do something awful... we have that fear everyday if you're not homeless, so its amplified"

"What I've found in my own experience from other women is they would rather stay with someone who's taking advantage sexually or whatever, than risk being street-homeless"

"There are a lot of places I ended up living in that were not safe for women"

people using shared facilities in temporary or supported housing. Two participants who were shielding reported feeling anxious that their clinical needs weren't respected by people coming into their homes, like builders and their landlord. Two participants became unwell with COVID-19 which made dealing with their housing problems harder, one of whom is still suffering with her breathing, which is aggravated by the damp in her supported accommodation which is making her and her baby unwell.

Systemic problems which make finding a safe, suitable home more difficult

There were several overarching systemic issues mentioned repeatedly by participants in relation to their housing problems. Participants across Birmingham, Bristol and Sheffield spoke about **a distinct lack of suitable accommodation options**, incorporating factors such as a shortage of housing near to their children's schools, poorly connected or expensive transport links, or housing only on offer in areas perceived as dangerous.

14 participants across all cities identified a **scarcity of social housing** available. This includes Saba who has been living in temporary accommodation in Birmingham for four years and has been told by the council she doesn't have a house yet as there are too many people bidding at the same time. This is unsurprising given there is a severe deficit of social homes – last year, 29,000 social homes were sold or demolished yet only 7,000 were built.^{lxxxii} Nationwide, there are over 1 million households waiting for social homes.^{lxxxiii}

Housing unaffordability and an **inadequate welfare safety net** means people are struggling to afford a decent home, with 25 participants encountering financial difficulties. Several participants expressed concerns that their benefits won't cover the costs of their home. The impact of **'No DSS' policies** where landlords won't let properties to people receiving benefits was also mentioned by six participants. Amani has given up calling estate agents, saying she feels being a 47-year-old lone parent in receipt of benefits means estate agents and the council won't give her a property: "they're probably thinking well if she's single, you know, she's at that age, how is she going to find work, how is she going to afford anything".

The impact of gender on housing experiences

15 out of 35 participants felt that **being a woman has a negative impact on housing or homelessness experiences**, either reflecting on their own experiences or women more generally.

Five women spoke about how women are at greater risk of **sexual exploitation or violence** which in turn poses issues with housing. Gemma reported feeling intimidated by her male landlord who became very aggressive with her. She was too afraid to hand over her key alone and so took her dad with her to make her feel safer. Two women described a lack of respect towards women, such as Sasha who said her landlord tells her to 'shut up' when she mentions the disrepair, but she doesn't think he would speak to her husband in the same way.

Three interviewees reflected on the role **domestic violence** plays in women's experiences, sometimes meaning women stay in an abusive environment to avoid rough sleeping. Amani, who is currently 'sofa-surfing' at her mother's house with three children in an overcrowded home, said she feels 'judged' for having experienced abuse. Another woman described past experiences of sexism from a council employee who said that "females exaggerate" domestic violence.

Conversely, two women felt that being a woman with children can make it easier to get housing assistance, and ten people said they felt gender doesn't impact on housing experiences.

Meet Emily

Emily moved out of her family home **due to a breakdown in their relationship**. She is disabled with mobility and pain management needs and **found it difficult to find an accessible home** for private rent.

Emily moved in with a new partner, but their relationship intensified during the pandemic, and **he began to control and isolate Emily**.

Emily eventually escaped her ex-partner's emotional abuse but is now struggling to find a place to call home. She has been **sofa surfing** and made a homeless application to her local council but is being pressured to accept **unsuitable accommodation** that is inaccessible.



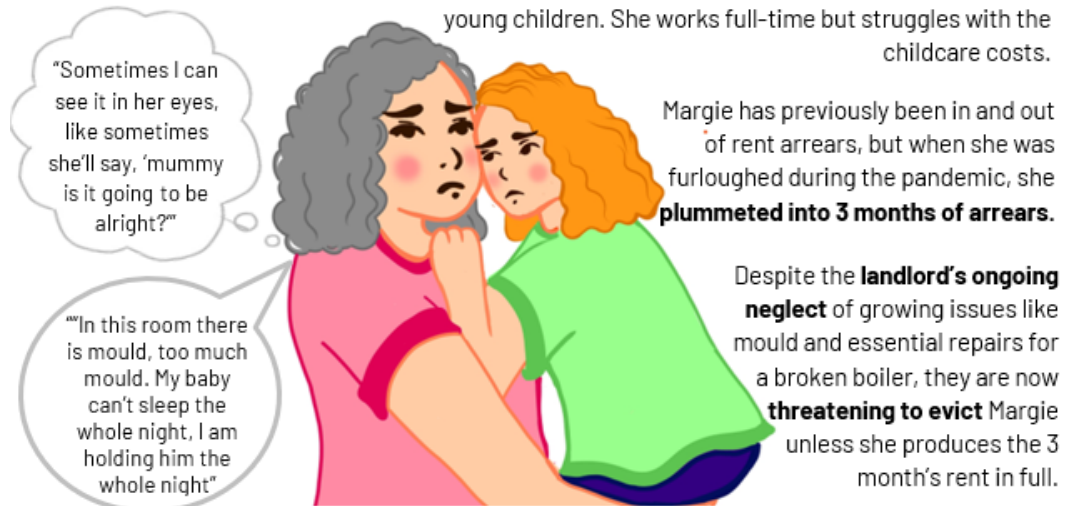
"Being alone [as a parent], you have to carry all the burden"

"You can understand as a mother I worry about what will happen to him, is he going to get home, is he safe? [.....] It's a vicious circle. I worry for him; he worries for me. It's just constant, we're all on edge all the time"

Several women spoke about their **childcare responsibilities and perceptions of their identity as a lone mother**. Isabella said she felt because she was a woman she was expected to stay home and look after her daughter and take on low- or un- paid work like cleaning and housework. Lower earnings then made it harder to secure new accommodation when she tried to flee domestic abuse. Joy mentioned that childcare responsibilities meant her available hours for working were limited, while Courtney said she is penalised by the system as a lone parent and not being able to earn as much as a man. All these experiences evidence how childcare responsibilities can financially disadvantage women.

Meet Margie

Margie is a **lone mother**, renting privately with three young children. She works full-time but struggles with the childcare costs.



"I felt completely fobbed off by the system, so I felt isolated, and my mental health really suffered"

"When you're on your own, you don't know where to go"

How did housing problems make people feel?

Participants were asked about how they had felt when encountering issues with their housing, which for the vast majority were persisting at the time of interview (30 out of 35). The most commonly reported feeling for 19 participants was feeling '**scared**', '**frightened**' or '**anxious**' about their housing problems". Sarah is 56 years old and lives alone in supported housing where she says she's afraid and on edge all the time due to anti-social behaviour from two teenage boys also living in the accommodation. She spends lots of time hidden in

"I don't know anybody here. It's quite a long way from even my close friends [who] are in Sheffield and that's an hour away. Financially I'm struggling, so it's difficult being able to afford the petrol, and I'm just lonely and isolated here"

"I felt like I was falling into a deep depression"

"My life is a living hell at the moment... I'm taking sleeping tablets to go to sleep because I hear a small noise in the night, and I think it's someone breaking in"

"It all adds up and stresses me out and I just shut down and go to bed for days. I feel guilty then because I'm not there to care for my mum"

her room and now feels very isolated, particularly as she has only heard from her support worker once in four months.

17 participants reported feeling '**lonely**' or '**isolated**'. This was often reported when women felt they had run out of options after trying to access support, or by those who felt that support was not available to them. 14 people explicitly told us they **didn't have a support network of friends and family to turn to** which is perhaps expected given many of the women experienced major relationship breakdowns or were located far from family and friends. For example, Valeria had to move from London to Birmingham to find temporary accommodation which left her and her three children, two of whom are autistic, without support from family and friends. They have been stuck in the 'temporary' accommodation for four years and she feels "like I have been dumped here and left".

12 participants reported feeling '**depressed**' or **experiencing symptoms of depression**, such as feeling unable to get out of bed and even suicidal in one person's case. Many of these women also reported the feeling of isolation and that support was not available to them. Nine women also told us they had developed **anxiety** due to their housing issues or that it was aggravating their pre-existing diagnosis of anxiety.

11 participants reported feeling '**angry**' or '**frustrated**' often due to experiencing their housing problems for years or because they had tried to get support on multiple occasions without a resolution. Two other participants described some feelings of '**guilt**' or '**embarrassment**', such as Sasha, who says her children won't go into their house in front of their peers as they are embarrassed by the state of the house.

Meet Saffia

Saffia's family are the only Muslim family in the area. **She feels isolated**, which is worsened by **harassment and racist abuse** they have experienced from neighbours

"I'm stuck in a situation I'm really unhappy with and there's no apparent way to get out of it"

Saffia and her family first came to the UK 6 years ago. When her No Recourse to Public Funds (NRPF) status was overturned 3 years ago she moved into **temporary accommodation** with her family, though they continued to struggle with money for food.





**WHAT DID GOOD
ADVICE AND
SUPPORT LOOK
LIKE?**

WHAT DID GOOD ADVICE AND SUPPORT LOOK LIKE?

All interviewees were asked about the journey they had taken while trying to access help with their housing problem. **All interviewees had accessed some form of support** and only 1 out of 35 people reported accessing just one form of support – this being her friends and family. The graph below lists the types of services or networks women turned to for support. Generally, people sought support from multiple different services, which is important to bear in mind when considering the different barriers people may come up against when working with a variety of services which have different procedures and help available. It also reflects the need to bring in other forms of support when people aren't having their needs met by one service – Samantha contacted ten different sources of support, reflecting a failure of multiple organisations to resolve her housing problems in full.

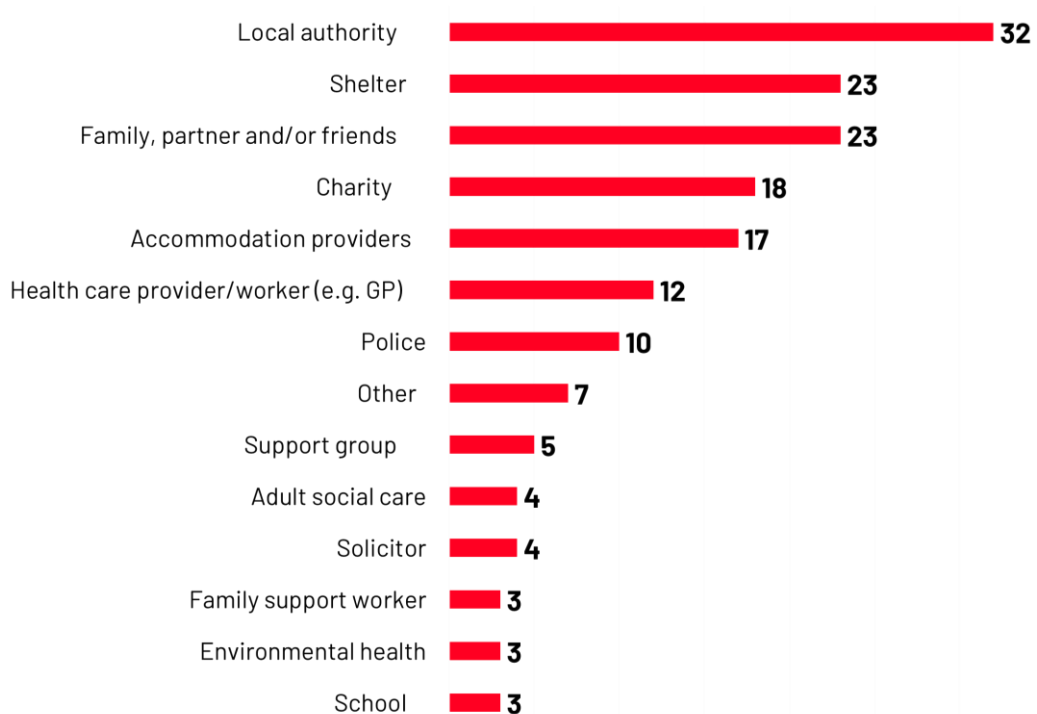


Figure 1: Where did people go for help?

While the bulk of discussion with interviewees centred on the difficulties they had faced when seeking help with their housing, there were some positive experiences. Shelter was the second most common source of support (behind local authorities) accessed by 23 participants, which is perhaps unsurprising given former clients were recruited for this research. Other charities outside of Shelter (e.g. Citizens Advice) were accessed by 18 participants. **Shelter and support from other charities were identified most often as the most 'helpful' source of support** for 18 participants in total. It's likely that former clients may have been more willing to participate in this research if they had a positive experience with Shelter, but overall these numbers reflect the reliance of many women on charitable organisations to resolve their housing issues.

"I had a friend who literally helped me move ... If it wasn't for her, I don't know what I'd do"

Tied with Shelter, the second most common form of support sought by 23 people was seeking help from **family and friends**. Five people said this was the most 'helpful' support they received. A survey by Shelter of private renters similarly shows that **1 in 3 (33%) women turned to their family**, and **1 in 4 (26%) to their friends**, for advice on housing.^{lxxxiv} This

underlines the positive impact for people of having social support networks in their local area that, according to our interviewees, can provide refuge, childcare, and emotional support.

We'll now look in more detail at what 'good' advice and support looked like for our interviewees.

Practical support

By far the most commonly occurring positive experience reported by 17 interviewees was in relation to the practical help they received in attempting to resolve their housing issues, even where this had not resulted in significant changes to their circumstances. Practical support was typically provided by charities and local authority workers who worked outside of housing, such as environmental health officers or social workers. It included support completing forms, writing letters or providing template letters – essentially **support that reduced the general time, energy, or financial burden on women**. A number of participants felt positive about organisations like Shelter communicating directly with local authorities or providers of housing to achieve outcomes which they had not been able to reach on their own.

Several participants also appreciated support with important non-housing tasks. For example, Samantha was helped to secure a volunteering job at Women's Aid, and Nasreen was helped to find English classes by Roshni, a domestic abuse charity for South Asian women in Sheffield.

Emotional support

Effective emotional support meant participants reported feeling **safe, hopeful, taken seriously** and **properly listened to and understood**. These sentiments appeared in 16 of our interviewees' reports. For most of these interviewees (nine), they also praised the practical help they received. This highlights the importance of support which addresses both practical and emotional aspects of people's needs.

Seven participants mentioned the emotional support given by Shelter specifically. For example, one person who worked with one of Shelter's hubs said, alongside helping with letters to the council, Shelter provided support which felt very compassionate, caring and honest. A number of other charities such as Citizen's Advice and Roshni received praise for the emotional support they provided. Other services were also praised, including the police, health and social care teams, and staff at housing associations. This demonstrates the importance of all services involved in resolving housing problems showing people empathy for what they are going through.

Support with children's needs

Ten women referred positively to receiving support for their children from charities, support workers or family and friends when trying to resolve their housing issues. For Sasha this was from a family support worker who visited regularly, arranged food and clothing for her children, and grants to buy furniture like bunkbeds. Joy has been living for months in a hotel with her four children and hugely appreciated the hotel manager and his partner who she says, "treat us like their family", even putting on movie and pizza nights to keep her children entertained as otherwise "there is no internet, no television, no YouTube. They [the children] can't do anything". Three participants asked for **support from their children's school**. Sasha said the school bought heaters for her and her family to get them through the winter, which is particularly important because as a sickle cell patient she said the cold affects her badly.

"[Professionals should be] open, approachable, calm, well mannered, polite.... just understanding, not biased, understanding of all walks of life, all situations"

**WHAT BARRIERS
PREVENT WOMEN FROM
GETTING SUPPORT?**

WHAT BARRIERS PREVENT WOMEN FROM GETTING SUPPORT?

At the core of the research was the discovery and discussion of the barriers that women faced when accessing advice and support to resolve their housing problems. For analysis purposes we have sub-divided these into **'barriers which make services inaccessible for women'** and **'barriers which lead to poorer experiences of services'**. The severity of a barrier will differ for individuals and can alter as their circumstances change (e.g. someone may become disabled, or their mental health may worsen). This means a service which was previously accessible to them is now not, underlining the importance of person-centred, trauma-informed approaches.

Barriers which make services inaccessible for women

A lack of support with mental health

For the vast majority of participants (31 out of 35), the negative impact that their housing problems had on their mental health was evident. While it is safe to assume that **mental health issues made getting support more difficult** for people across the board, mental health acting specifically as a barrier to getting support was explicitly evident in half (18) of the participants' accounts. Poor mental health left many women feeling they couldn't cope with daily activities and did not have the mental strength or resilience required to advocate for themselves or navigate the often complex maze of services (e.g. with differing eligibility criteria, geographical coverage, referral systems etc.). Sarah told us it was extremely difficult to try and get her head around self-referral when her mental health was in a bad place.

Six women said they felt they **didn't have a voice** after trying to seek help, which can lead to dis-engaging from support. For example, Holly said she struggles with confidence and finds it difficult to stand up for herself which makes contacting the estate agents that manage her property very hard. As a result, she said she tends to put up with things that aren't acceptable, like living among extreme disrepair, such as rotten floors where she's fallen twice badly and a back door that doesn't lock.

For many, **services failed to recognise and respond adequately to their mental health needs** which made them feel worse and the journey to resolving their issues much more draining and challenging. Systems also aggravated people's mental health, with Lorraine saying the 90-minute wait when phoning the housing team at Sheffield council was really difficult with her anxiety. Several participants identified **a lack of awareness of trauma**, such as Valeria who said services need to stop making women repeat their traumas to multiple people, instead saying there should be greater collaboration across organisations to better take account of people's needs and avoid women feeling pushed around by the system. For Esther, poor treatment by staff in a shelter added to her trauma.

Physical health issues, learning disabilities and autism led to difficulties getting support

Physical health issues, which affected 21 of our participants and their family members, in some cases, will have made accessing support more difficult or not possible at points. For instance, engaging with support will have been more challenging when people were hospitalised for various health reasons or had to prioritise caring responsibilities. Five participants explicitly mentioned the challenges they encountered getting support when

"I was incredibly psychotic. I ended up sectioned in hospital three times at the back end of last year. And I was asked by [the] council did you get legal advice, and to be perfectly honest I was so unwell that if someone asked me my name, I couldn't even tell them. My partner had to communicate on my part... so no I didn't get legal advice"

"I'd try and think about moving or trying to get myself into housing but every time I tried to think about it, it caused me so much anxiety that I then kind of avoided it"

"I spent three years thinking about ending my life, and when you're thinking about ending your life, you're not thinking about... legal pathways to sort your housing problems"

they had physical health issues, learning disabilities and/or autism, highlighting **a lack of understanding or tailoring of support to meet people's additional needs**. Natalia is visually impaired due to being attacked by her partner and feels the council have not listened to her needs relating to her disability, such as not being able to read emails. Thankfully Natalia did get help from a support worker at Shelter who explains the content of emails to her. Ami feels she's been discriminated against by a charity, her landlord and estate agents, telling us: "they're completely ableist, they don't understand my disability at all" and described letting agency staff saying, "she's faking it". Gemma said the overall fragmented nature of support is inaccessible to autistic people, underlining the benefits of joined-up working.

Emily has **no idea what financial support** she is eligible for, or who to talk to for advice.

Having experienced domestic abuse, she has **low self esteem** and finds it challenging to be assertive.

She has **no support network** due to her relationship breakdown.

Emily can find it **difficult to get to appointments due to physical access needs** and it is expensive to travel into the city centre.



"As a first-time private renter, I was just like, none of this makes any sense, I feel like I have nowhere to go - I asked my mum but there's only so much she knows"

"I had a lot of difficulties growing up and did end up sort of leaving home quite young, and struggled really with where to go, and what to do, and where to find support"

"Nobody tells you what services are available, everybody I went to, they all knew if a service was available, but no-one was sharing that information, it's like they were all keeping it to themselves... it should be common information, but it isn't"

Lack of knowledge of how the system works

Over half (20) of the people we spoke to told us they **didn't know where to turn to for support** with their housing, saying they didn't know what help or resources were out there or how best to navigate the system, which held them back from getting the support they needed. This includes not knowing who to turn to when an issue first arises or when you hit barriers preventing you from solving your problems. Debbie said she only realised she didn't know where to get support when she'd reached crisis point. Gemma didn't know where she and other disabled people who are renting could get specialist support with their housing.

Margie is worried about her children and **doesn't want to talk about her experience in front of them**, but she can't afford childcare, and services often **can't provide a private space**.

She's finding everything she needs to do to get support **overwhelming**, and when she has contacted services, she **hasn't heard anything back** from them, she feels stuck in limbo. She's embarrassed to talk to people about what she's going through.

"I feel like stringing myself up seriously, I'm just in limbo, I don't know anything, I don't know what's going to happen, apart from probably they're gonna just kick me out and that's it I'll be on the streets"

"Every time I go out, I worry about other people's opinions of me, what they think about the state of my house"

Margie has noticed that **services aren't talking to each other**, and she is tired of retelling her story to get nowhere.



Language barriers

Many women found it was hard to be listened to even with English as a first language, and this is exacerbated if English is your second or subsequent language. Seven women had problems due to a language barrier, **making complex processes like applying for benefits even harder**, with many reliant on their support workers to communicate on their behalf.

Seven women spoke about the difficulties they had **navigating housing systems as a migrant** and arriving in a country often to unstable housing situations. This was largely connected to a loss of support systems and being less likely to understand your housing rights or access to benefits when living somewhere new. For example, Caihong was living in an Airbnb property with a controlling landlord who limited how long they could wash-up or use the washing machine to save money. Caihong said as she isn't British, she was unaware of her right to challenge her landlord and doesn't know the local area well enough to consider moving. Laycee also felt she was coming up against barriers in the system because "she's not from here". Laycee has No Recourse to Public Funds and resultingly has struggled to feed herself and her daughter, relying on the food bank and friends, and finding it hard to pay for the bus to get her daughter to school.

"We don't have rights to a lot of things, so I don't know what will happen to me and my little girl"

Barriers related to having children

Two participants were concerned about **the impact seeking support would have on their children**. Mary is currently stuck in temporary accommodation with her three children. There are only two bedrooms, so her 15 year old daughter is sharing with her 6 year old son. During the pandemic they were in an even smaller hotel with one room and had to navigate shared facilities which made her feel unsafe. She felt alone and fearful as the only other place to go for help was children's services, but she felt stigmatised about going to them and anxious it would mean losing her children, saying: "I didn't want my children to go anywhere". Mary was shocked when the council advised her to make room by having one of her children sleep in the living room, telling us a council officer "came and moved the chairs [in the living room] but they didn't move me".

Courtney also feared losing her 12-year-old daughter so didn't want to ask for help to address the severe disrepair that their private landlord refused to sort. It was only because Courtney's daughter, who is suffering from depression due to how difficult their living circumstance are, told her teacher how cold the house was that they eventually were connected to the support they needed.

"Using a computer – for some people that's a massive hurdle"

"When they wanna contact you, you've not always got somewhere to charge your phone [when homeless]. I'm lucky I had the car.... but I kept killing the battery with everything charged up"

Barriers related to internet or computer access

Eight women mentioned a lack of access to the internet or computers as barriers to getting the help they needed. Three of these women said they had poor Wi-Fi access in the emergency or temporary accommodation they were staying in, whilst another said that libraries shutting during the pandemic meant they lost access to a computer. For Katie, limited access to Wi-Fi when she was homeless meant **she missed important emails and calls** which aggravated her mental health and left her feeling worthless. Not having a fixed address meant she also could not receive post. One person requested more face-to-face support to counter their internet problems. Similarly, another person felt services should better recognise that: "we do so much on the computer these days, we forget that's not how it's always been".

Eligibility barriers

Due to factors such as funding restrictions and demand on overstretched services, people may find they are **not eligible for assistance from services they go to for help**. Six people were denied homelessness assistance or access to social housing by their local council, for reasons such as not having a local connection, not being legally classed as homeless or not meeting age requirements to access support. Debbie is disabled and felt discriminated against by her local council. They required her to have a health needs assessment from social services, but in order to receive an assessment she needed to be resident in the area, but she was unable to move into that area because of her health needs. Her experiences highlight a wider systemic issue as Debbie appears to be eligible for assistance, but a **lack of joined-up working** between the council and adult social care means she couldn't access the help she needed. She also felt that, as an older lesbian, she was discriminated against on the grounds of her age and sexuality. She felt less likely than her heterosexual and younger peers to have 'local connections' due to being estranged from her family (research has shown family rejection is the top reason for LGBT homelessness^{lxxxv}).

Eligibility criteria also affected people's access to support from charities. Isabella was turned down for support by a charity who would not provide her with furniture as she was working and not receiving benefits.

Barriers which lead to poorer experiences of services

Poor treatment by professionals

Seeking help from services should be a positive experience which leaves women feeling supported. However, **poor treatment by 'professionals' was apparent in the majority (23) of people's experiences** and was therefore **the most commonly experienced barrier** to getting adequate support. Participants described a range of different ways they were treated badly, including being spoken to rudely, being made to feel like a burden or that your problems weren't severe enough, or being shown a lack of empathy or understanding. When describing an interaction with a charity helping them, Rowan said:

"I don't know if it was this particular gentleman I spoke to or what, but I found it quite difficult...I walked away from the phone call and I felt worse.... He came across a bit dismissive and negative and I think that was based on the fact he didn't know the answer".

In the most extreme cases **people were left feeling re-victimised and helpless**, such as Amani who felt she was blamed by police for the abuse she'd endured. In fact, eight women told us their **domestic abuse experiences were not handled adequately**. Half of these referred to **poor treatment by the police**, such as Debbie who, after telling the police about the homophobic harassment and threats of violence she'd received, described the police's response as: "it's your fault for being so obviously gay... If he hasn't killed you by now, he probably won't today will he?". Liberty also felt she had been treated poorly by the police. After being locked out of her home by her abusive partner, and sleeping in her car for eight

nights, she was told by police that if she follows her housing officer's advice to break into the property then she would be arrested.

Six women told us about coming up against a barrier caused by having **a lack of evidence or proof meaning they felt dis-believed by services or unable to get help**. This included lost records of correspondence with a support worker, proof of ID or, for several participants, evidence of previous or ongoing experiences of violence. For example, Samantha felt a severe lack of empathy was demonstrated by her local council asking for proof of the domestic abuse she had experienced ten years previously. When she requested proof of the court hearing and charges against her ex-partner, Samantha was told the police couldn't find the files. At this point, she was driven to the verge of a mental breakdown and felt totally lost in the system. Ashima also felt dis-believed by a housing association about the racist attacks her family were experiencing which made her feel re-victimised:

"I've got no proof. I've got no one there to say that yeah, we've seen this, and we've seen that. So, where do they expect me to get the truth from...It just makes me feel like a liar. It's just really horrible. [...] That's where I lost my confidence... I'm thinking if I phone them, they're gonna blame me... With them I just lose hope"

Almost all participants (32) involved the local authority at some point in their housing journey, making this **the most common port of call for women experiencing housing issues**. This encompassed a range of local authority services from social workers to housing officers. This reflects a general sense among participants that councils hold lots of power to change an individual's situation. However, **the local authority was the source of support most reported as being 'least helpful'** by 19 participants, and poor treatment specifically by council staff appeared repeatedly in people's accounts. A couple of participants felt it was worse at their local council than elsewhere, and others who had moved around had seen first-hand how the level of support from councils varied. Several people said they were made to **feel like a nuisance by council staff** which aggravated one person's drinking habit and worsened her depression. Two women spoke about their case being mishandled and once again shared the feeling they had been dis-believed by council staff. Gemma also felt her complaints about mould in her home hadn't been taken seriously enough despite a note from her doctor. She was told by her council to open the windows more which she said felt "like a slap in the face".

General disorganisation and poor communication between and within council departments also appeared in several women's reflections of their experiences. Valeria felt poor practice is due to a lack of accountability, arguing this was fuelled by never meeting her housing officer face-to-face (in this instance, this was happening before the pandemic).

It's worth noting though that people who had positive initial experiences with their local authority may not have approached another service (like Shelter), and so might be less likely to be in this research.

Slow speed of response

The slow speed of response and action by services was a repeated theme, with almost two-thirds (22) of the interviewees feeling they were **"waiting weeks and weeks and weeks to get an answer"**. This complaint was often made about local authority services who were slow to reply or help and landlords who did not deal with problems in a reasonable time. One woman reported that she did not attempt to contact her local authority as she knew the waiting times for social housing were long and the service was slow. One woman said if you manage to get through you are only given five minutes on the phone and told repeatedly to wait for emails.

Things apparently got much worse for many of our participants as a result of the **COVID-19 pandemic** as many reported services **slowed down, were unavailable, or more difficult to access**. In some cases, repairs and inspections weren't taking place or were delayed, with

"[The council have] no empathy, no understanding and they don't care"

"[The council] forget about you completely...You need help quick and they will ask you about a long, long, long story"

"They're not open very often, even before the dark days of COVID, they used to be open 3 hours a day 3 days a week 'cuz obviously it's volunteer and they couldn't staff it"

one participant living in temporary accommodation with five children aged seven and under, saying no-one would come to help with a bug infestation in their flat. Changes to services proved tricky for people to navigate and made it hard to get appointments. Plus, multiple people reported reductions in opening hours, and two participants told us services they relied on shut down altogether, including a service which helps one woman support her autistic son.

Saffia is **struggling with her mental health**, she is feeling helpless and on her own. Not being able to speak English is making it difficult for Saffia to make progress with her housing. **Forms aren't available in other languages** and sometimes Interpreters don't properly communicate her situation, or **she isn't offered one at all**.

Although she has spoken to the council, she still doesn't know what support is available as this **hasn't been clearly communicated**.



"I keep thinking I'll sort it, I'll get it sorted, but then I just get this panicking thing I can't do... it I can't phone them, I can't talk to them because I don't understand what I'm saying"

"you know you're being fobbed off... [The council] weren't bothered, they didn't care"

She is reluctant to speak to 'professionals' as **authorities haven't taken her seriously in the past**.

She **can't get hold of evidence** she needs to prove she is experiencing racism and harassment.

Too many forms

Seven women highlighted **problems filling in forms for different services** they went to for help with their housing, with some saying that having too many became overwhelming. Rowan was a mental health nurse and told us they had no issue helping other people complete forms, but they had not received this same support themselves. Sarah in Birmingham was also overwhelmed by having to complete so many forms when applying for housing with her local council and housing associations. She said social housing application forms were too rigid, with specific criteria on the forms meaning you can't tailor to an individual's needs and are therefore more likely to fall through the cracks. She said she struggled to have the mental strength needed to do the forms and is worried she's filled the applications incorrectly as she hasn't heard back for a while. Liberty is dyslexic and said she struggled digesting complex information she found on forms.

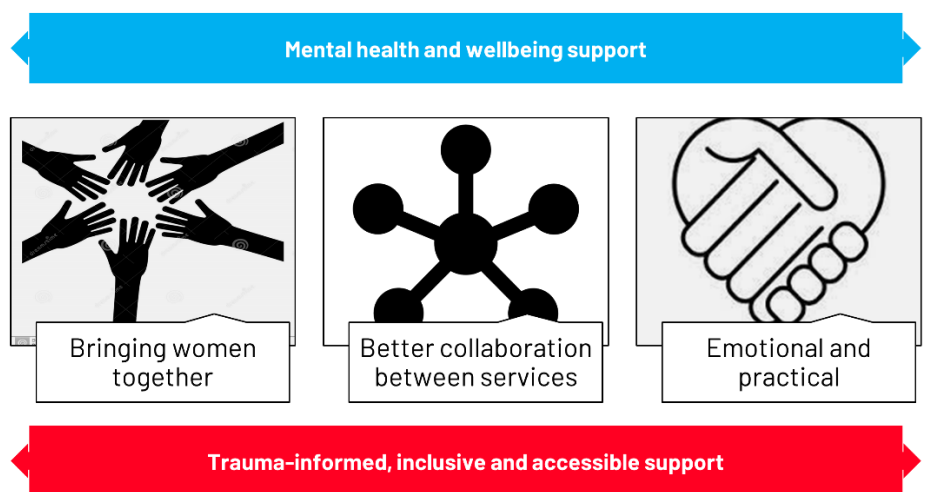
"That's what's stressing me out now. Half of [the paperwork's] been done and the other half is there but if I don't do that then I'm not going to get anywhere and that just brings me down again"

PRIORITIES FOR DELIVERING WOMEN- CENTRED SERVICES

PRIORITIES FOR DELIVERING EFFECTIVE WOMEN-CENTRED SERVICES

This chapter explores the priorities for delivering effective women-centred services as identified in the research. These are applicable to services supporting women in the housing and homelessness sector and more widely. They have been developed based on the suggestions and lived experiences of the women and non-binary person we interviewed, our peer researchers' expertise, and collaborative inputs from the co-design sessions.

PRIORITIES FOR DELIVERING EFFECTIVE WOMEN-CENTRED SUPPORT



"I just wanted somebody to hold my hand...and help me through this time so I can pick myself back up but there doesn't seem to be anybody"

"I'm really bad at telling people everything's not okay. I'm really bad at being honest about things if I'm struggling. So like I'm that person who'll always say, 'oh yeah, yeah I'm sound'; and I'm not. I'll say I'm sound whilst I'm on the phone to somebody and I've just taken an overdose"

"Being in the house has all the memories of my ex-husband and the abuse"

Our recommended approach to women-centred services is underpinned by the need for **effective mental health support** and **trauma-informed support**.

Mental health and wellbeing support

This research shows the pervasiveness of poor mental health – causing and exacerbating housing problems and acting as a key barrier to people getting the help they need.

It is vital that services for women recognise the significance of mental health and make provisions which support people who might be suffering. This doesn't necessarily mean offering access to therapists or other mental health specialists, but rather keeping the wellbeing of the people you are supporting at the centre of what you do. This includes **facilitating opportunities to improve people's mental health**, such as creating a supportive peer network that would tackle the social isolation that many of our participants mentioned. It also means working in a way that prevents people's mental health being harmed by the service, such as ensuring people are not spoken to rudely or re-victimised, as a number of participants expressed.

Trauma informed, inclusive and accessible support

Women-centred services must also be underpinned by a recognition of the heightened experiences of trauma many women have faced. Support should be tailored around the specific kinds of trauma experienced by women and the various ways it presents.

"I have been diagnosed with post-traumatic stress disorder and other mental health problems, depression, anxiety etc. etc. [Being homeless] It's had a remarkable effect on me"

"In this day and age organisations have to be... a little bit more accepting as... there's so many labels and people that identify as x, y and z"

"Mainstream services continually cut us out"

"I'm stuck here, and I hate it, and I'm stuck in a cycle... There's no way out of it, there's a huge amount of help that I need, [but] my needs that are supposed to be taken into account are not"

It was important to contributors to this project that services strive to be as inclusive as possible and make access to services easy for anyone who might need advice and support. That means consideration of protected characteristics (e.g. ethnicity, sexual orientation, disabilities etc.) and other aspects of people's identity (e.g. living in poverty, substance misuse). When thinking about gender identities in this context, a fully inclusive approach means making sure services welcome cis and trans women, and that non-binary and gender non-conforming people feel comfortable in spaces designed for women if they wish to use these services.

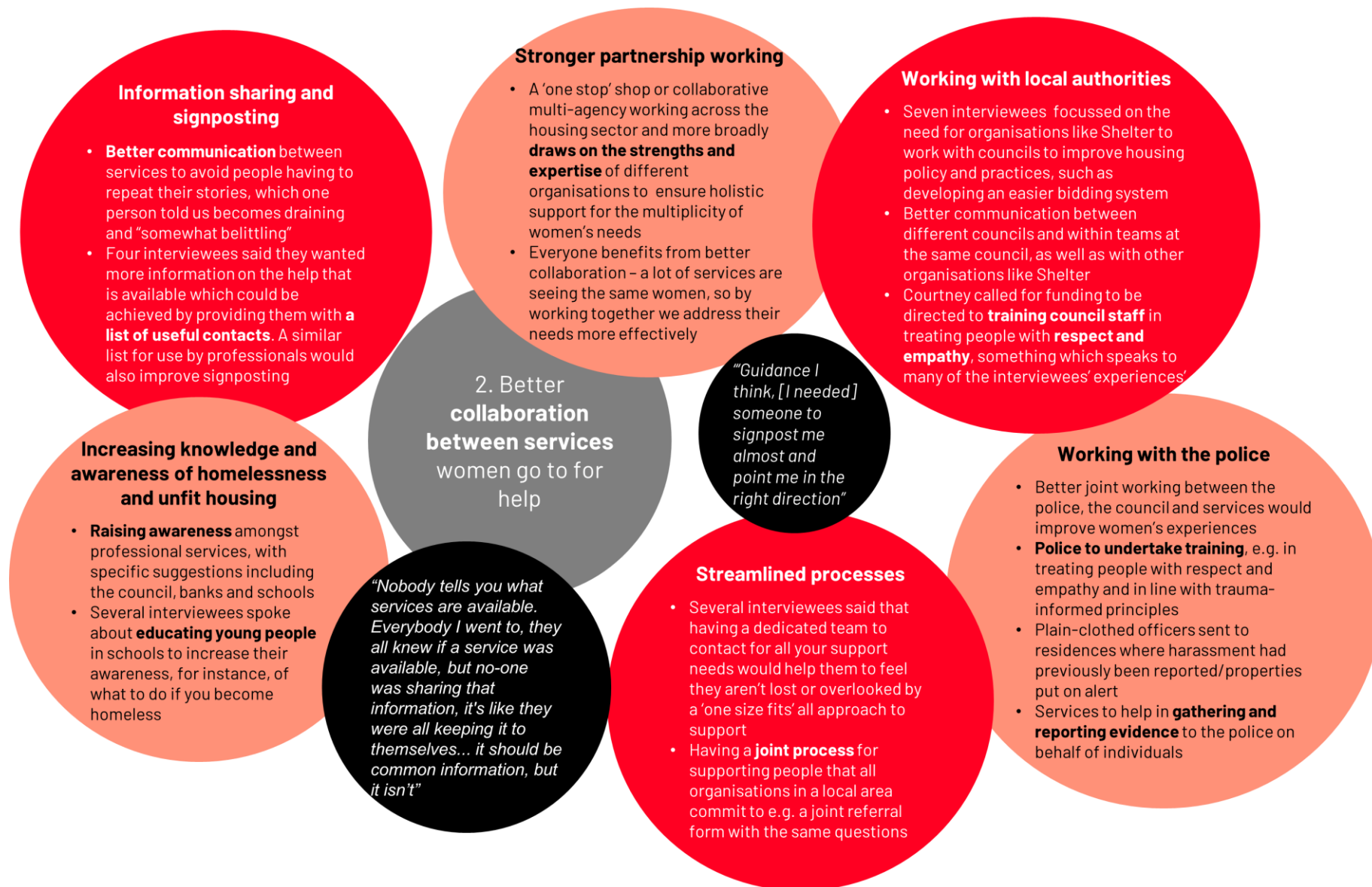
Particularly in the context of women-centred services, accessibility also means being aware of childcare and other caring responsibilities and adapting accordingly. This can include being mindful of school run times, or offering childcare provision where possible, so that women don't need to talk about their housing situation in front of their children, can concentrate on discussing their housing needs, and/or so they don't need to pay additional transport costs for their children to attend appointments with them.

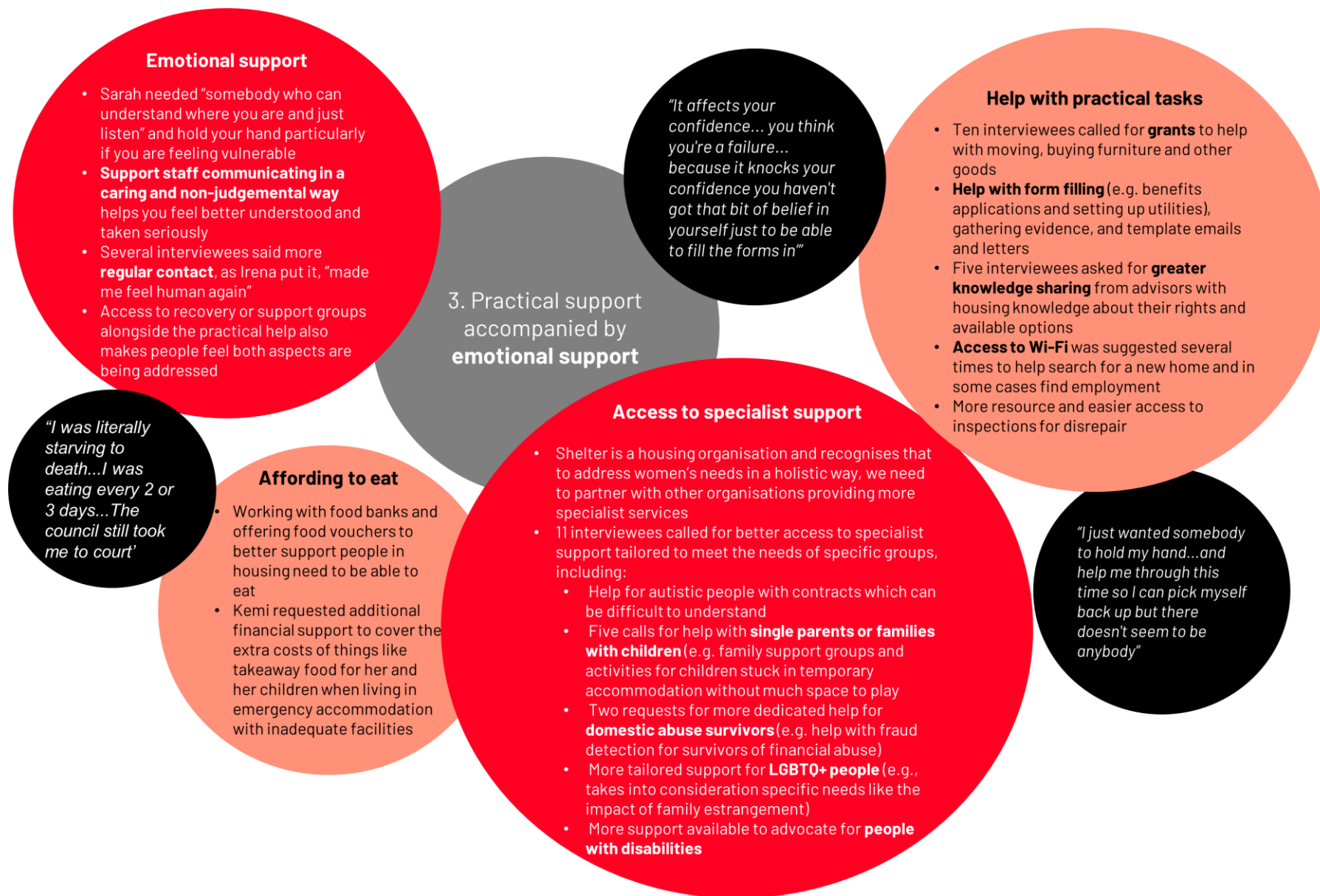
Accessibility concerns will differ according to the individual – some people may need an interpreter, some may need virtual or flexible meeting times, and so forth. A person-centred approach will improve accessibility alongside the provision of a flexible budget available to support people with their individual access requirements (e.g. childcare, travel etc.). More detail on the Access Fund which could cover these costs for those engaged with the service can be found in our service model in Chapter 11.

Priorities for what women want support to look like

We have outlined above the approaches which should underpin women-centred support. The graphics below outline three priority areas for delivering women-centred services. We demonstrate how each priority area could be achieved by listing examples of what service design and delivery could look like in practice. These examples are based on suggestions from interviewees and peer researchers, and we hope they act as helpful guidance for services wishing to adapt their support to better meet women's needs.





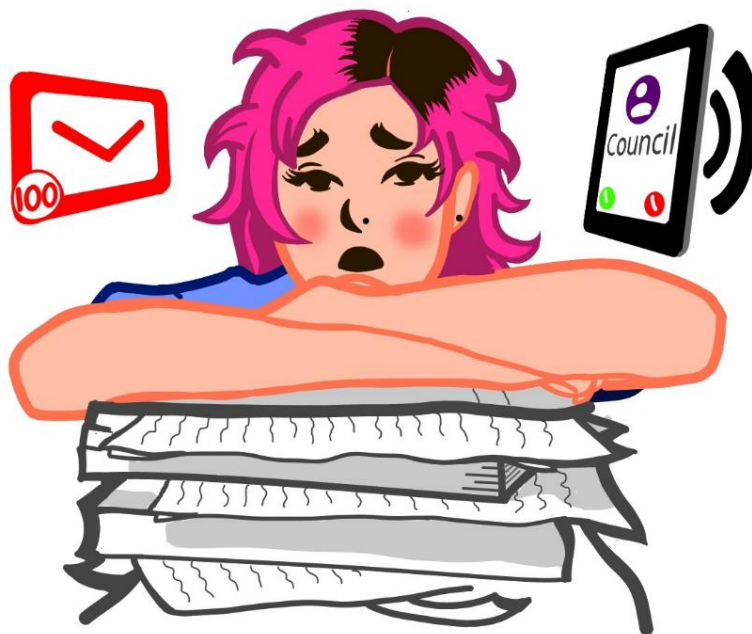


SHELTER'S CO- DESIGNED WOMEN- CENTRED SERVICE MODEL

SHELTER'S CO-DESIGNED WOMEN-CENTRED SERVICE MODEL

The following co-designed service model pulls together all three priorities, and the key approaches which underpin them, to deliver an effective women-centred service that supports women with their housing problems. It would thereby take a person-centred, trauma-informed approach which recognises people's mental health needs. Although we refer to the model as Shelter's women-centred service, as it was designed with implementation by our frontline services in Bristol, Birmingham and Sheffield in mind, elements can certainly be drawn upon and replicated by other organisations, and best practice would be to deliver this in collaboration with other organisations.

Women like Emily have been left feeling stressed and overwhelmed when trying to get help



The service in a nutshell

Across all locations, it was decided in the co-design sessions that **more preventative, early help** was needed, and that peer support networks (both online and in person) could create more **resilient communities** of women who would be able to support each other with their housing issues and prevent feelings of isolation.

It was also recognised that the service must be led by **people with lived experience**, with a range of paid and volunteer opportunities to be involved in service design and delivery, and systems change work.

The services would be open to all adult women and non-binary and gender non-conforming people who needed help with their housing. However, the services across each location may initially target specific groups to meet gaps in support available in the area (e.g. there may be a focus on women and non-binary people in the private rental sector).

There are three key elements to the service model.

1. Peer Support Service

Women and non-binary people with personal experience of homelessness and unsuitable housing would be recruited from the local community as Peer Support Volunteers.

Supported by a Volunteer Coordinator, Peer Volunteers would:

- Facilitate or help to facilitate group support sessions, e.g. coffee mornings, housing rights sessions
- Support women to take action to resolve their housing issues, e.g. filling in forms, communicating with the council, viewing properties
- Attend appointments with women when they are feeling anxious or overwhelmed
- Connect women with activities or courses run internally or by other organisations to build their confidence and self-esteem and reduce isolation
- Regularly follow up with the person being supported including up to six months after their situation has been resolved
- Encourage women to build local, sustainable connections and social networks

Emily begins feeling better supported when receiving emotional and practical support from a peer volunteer



Ideally volunteers would have a range of different experiences, a good understanding of local services and, for some, the ability to speak multiple languages. Specific training for volunteers and staff would be required across a number of areas including resilience building, professional boundaries, trauma-informed practice, and reflective practice. An **Access Fund** is also made available to support women engaged with the service to participate, including paying for childcare, travel and mobile phones so that women are able to stay connected.

Emily has grown in confidence and is now running activities to help other women experiencing housing problems



2. Peer research programme

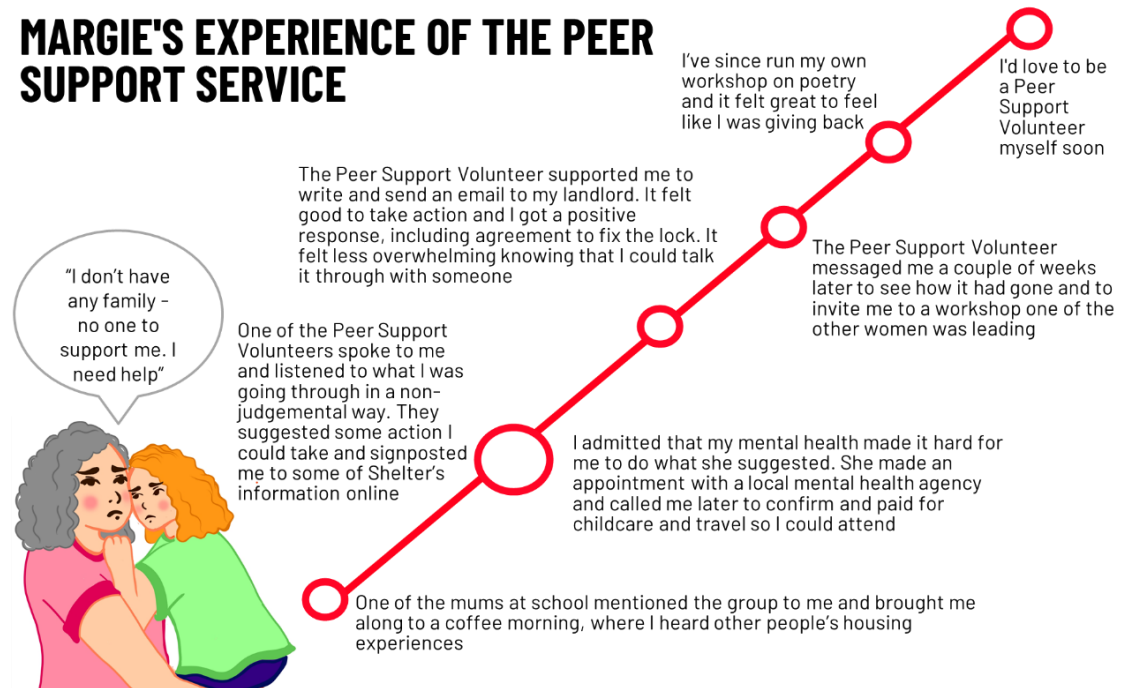
In addition to the Peer Support Volunteer role, it is important to ensure paid opportunities are created for women with lived experience. Peer research roles enable skills development as women and non-binary people gain research expertise and monitor the achievement of the service in line with its original aims. With the support and guidance of a Peer Research Programme Manager, peer researchers would shape and lead the evolution of the project by:

- Monitoring and evaluating the Peer Support Service and other closely linked services or projects
- Carrying out peer research into topics which warrant further investigation by people with experience of the issue in focus. For example, further research into the experiences of using services as a trans woman or non-binary person is required
- Contributing evidence to influence local and national policy and campaigns and feeding this into systems change, such as educating organisations like the police on the reality of homelessness and using this to improve how they understand and respond to people in unsuitable housing
- Once the Peer Support Service is operational, peer researchers will explore implementing a navigation role delivered by someone with lived experience. This would provide additional support to women struggling to navigate the complex maze of services. It would need to be truly collaborative and done at the same time as influencing and systems change to achieve the best outcome for women

The peer researchers would work as part of a wider, multi-regional team to develop and mobilise paid delivery roles within the service for women with lived experience based on evidence and local need. A peer-led research role is important as it engages more women and non-binary people in the evolution of the service by breaking down barriers to participate in research and centring the voices of people with lived experience. Peer researchers become agents for change within their communities by having power and influence to make decisions that will directly impact individuals experiencing unfit housing and homelessness.

Overall, the journey for someone like Margie who uses Shelter's women-centred service would look like this:

MARGIE'S EXPERIENCE OF THE PEER SUPPORT SERVICE



3. Partnership working

Fundamental to achieving long-term changes for women in Bristol, Birmingham, Sheffield, and beyond is working in partnership over a longer-term project (e.g. five years) with other local support agencies and organisations working with women encountering housing problems. This would involve working across sectors, including mental health, physical health, LGBTQ+ rights, domestic abuse and women's issues, and migrant's rights, in order to grow and develop new partnerships in response to need over a longer-term. Partnership working also ensures that the service is tailored to local need and does not duplicate existing services, but instead complements what already exists. This will also be supported by the evidence from the peer research programme.

Volunteers with lived experience would also take part in the systems change work with partners, providing valuable insights into the barriers and needs of their peers in order to design better services and support other services to work in a more trauma-informed way.

CONCLUSIONS ON DELIVERING WOMEN- CENTRED SERVICES

CONCLUSIONS ON DELIVERING WOMEN-CENTRED SERVICES

There is a gendered nature to the housing problems women experience which demands a gendered approach to the solution. Although women are far from a homogenous group, various sources and findings from this research demonstrate there are commonly shared experiences for women and non-binary people in need of support with their housing. Women are disproportionately impacted by the unaffordability of the housing market, and welfare restrictions are making housing costs unmanageable and forcing women and their families into poverty. The experience or threat of abuse and violence is an almost universal part of women's trajectory to, and experiences of, homelessness. Lone mothers have the added demand of keeping their children safe and well, both physically and emotionally – and their ability to do so is being significantly impacted by all of the above. The impact of these pressures is reflected in women's poorer mental health and the prevalence of trauma.

The current landscape of services is all too often failing to meet the needs of women who are experiencing homelessness or living in unfit housing. Historically homelessness services are designed by default for, and dominated by, men, without considering how the needs of women differ. Women and non-binary people are being let down by the expectation that they should slot into these services which aren't adequately accounting for their needs and experiences. Instead of getting the help they needed to resolve their housing issues, our interviewees told us they repeatedly came up against a range of barriers that stopped them having their needs met.

A woman-centred approach to support should help to overcome many of these barriers. We have outlined a number of ways that a woman-centred approach can be implemented – including women-only provision, involving women with lived experience in service design and delivery, and delivering trauma-informed, person-centred services which supports women and non-binary people holistically. We have identified priorities for delivering women-centred services, emphasising that support must be underpinned by a recognition of mental health and wellbeing needs. It must also strive to be inclusive and accessible to women with a range of different access and support needs stemming from their backgrounds, identities and experiences.

We have produced a co-designed women-centred service model that will work collaboratively across sectors to ensure that women and non-binary people encountering housing issues feel better seen, heard and understood, and that they have access to good advice and support at the time it is needed. Through peer support, we will build a sense of community and a support network for the women and non-binary people within it, as well as create opportunities for personal development and increased resilience so that people with lived experience are empowered to be part of the solution, as was fundamental to this peer research project.

We have heard what women want and where they want to be. Women-centred support is how we get women to that point; it's the driving force that empowers women to achieve their ultimate goal of living in safe, suitable homes from which to build a stable life for them and their families.

ⁱ Shelter., (2021). *What is the housing emergency?* [online]. London: Shelter. [Viewed 15 October 2021]. Available from: https://england.shelter.org.uk/support_us/campaigns/what_is_the_housing_emergency

ⁱⁱ DLUHC, Live tables on homelessness, [Statutory homelessness live tables](#), Table TA2. We assume that there is an equal number of men and women within couples with dependent children and other household types.

- ⁱⁱⁱ DLUHC, Live tables on homelessness, [Statutory homelessness live tables](#), Table TA2. We assume that there is an equal number of men and women within couples with dependent children and other household types.
- ^{iv} DLUHC, [Rough sleeping snapshot in England: autumn 2020](#), Table 2A
- ^v YouGov online survey 6th – 14th April 2021. Sample size 13,268 adults (18+) in Britain, weighted. Results presented are for England only.
- ^{vi} YouGov online survey 6th August – 7th September 2021. Sample size 3,561 adults (16+) who live in private rented accommodation in England, weighted, 242 of who were single women with children in the household.
- ^{vii} DLUHC, [Statutory homelessness live tables](#), released 28th October 2021.
- ^{viii} Bretherton, J. and Pleace, N., (2018). *Women and Rough Sleeping: A Critical Review of Current Research and Methodology* [online]. York: Centre for Housing Policy, University of York. [Viewed 11 April 2020]. Available from: http://eprints.whiterose.ac.uk/138075/1/Women_and_Rough_Sleeping_Report_2018.pdf
- ^{ix} Smolen, B., (2021). Why social housing is a feminist issue (Shelter) [online]. [Viewed 8 December 2021]. Available from: <https://blog.shelter.org.uk/2021/03/why-social-housing-is-a-feminist-issue/>
- ^x from ONS, [Families and Households in the UK 2020](#), Table 1
- ^{xi} YouGov online survey 6th – 14th April 2021. Sample size 13,268 adults (18+) in Britain, weighted. Results presented are for England only with a total of 1,307,000 lone mother families with dependent children in England. From: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/datasets/familiesbyfamilytyperegionsofenglandandukconstituentcountries>
- ^{xii} YouGov online survey 6th – 14th April 2021. Sample size 13,268 adults (18+) in Britain, weighted. Results presented are for England only.
- ^{xiii} This statistic is based on a YouGov survey of 161 young people who had experienced homelessness – 24% of the respondents were non-binary people.
- ^{xiv} AKT (2021) The LGBTQ+ youth homelessness report [online]. [Viewed 18 October 2021] Available from: <https://www.akt.org.uk/Handlers/Download.ashx?IDMF=59eae91c-ee80-4b6b-8ecb-158edfeeaccd>
- ^{xv} Shelter (2021) What is the housing emergency? [online]. London: Shelter. [Viewed 15 October 2021]. Available from: https://england.shelter.org.uk/support_us/campaigns/what_is_the_housing_emergency
- ^{xvi} DLUHC, Live tables on homelessness, [Statutory homelessness live tables](#), Table TA2. We assume that there is an equal number of men and women within couples with dependent children and other household types.
- ^{xvii} DLUHC, Live tables on homelessness, [Statutory homelessness live tables](#), Table TA2. We assume that there is an equal number of men and women within couples with dependent children and other household types.
- ^{xviii} DLUHC, Live tables on homelessness, [Statutory homelessness live tables](#), Table A5P. ONS mid-year population estimates: [Population estimates for the UK, England and Wales, Scotland and Northern Ireland – Office for National Statistics \(ons.gov.uk\)](#)
- ^{xix} DLUHC, [Rough sleeping snapshot in England: autumn 2020](#), Table 2A
- ^{xx} St Mungo's., (2019). *Women at St Mungo's: A three year strategy for 2019–2022* [online]. London: St Mungo's. [Viewed 11 April 2020]. Available from: <https://www.mungos.org/app/uploads/2019/03/St-Mungos-Womens-Strategy-2019-22-web.pdf>
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- ^{xxiv} Total number of female single parent households with children owed a prevention duty between July 2020 and June 2021. This is available at: DLUHC, Detailed local authority level tables on homelessness, Statutory homelessness live tables, Table A5P. A small number of households may be double counted across quarters where an initial decision was subject to review or where a household has made a new application. This figure is compared with the number of such households in England according to the English Housing Survey 2018–19
- ^{xxv} Calculated by Shelter based on YouGov online survey 6th – 14th April 2021. Sample size 13,268 adults (18+) in Britain, weighted. Results presented are for England only with calculations based on a total of 1,307,000 lone mother families with dependent children in England. From: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/datasets/familiesbyfamilytyperegionsofenglandandukconstituentcountries>
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- ^{xxviii} Affordable rent is considered as taking less than a third of your household income. Source: Reis, S., (2019). *A home of her own: Housing and women* [online]. UK Women's Budget Group. [Viewed 11 April 2020]. Available from: <https://wbg.org.uk/wp-content/uploads/2019/07/WBG19-Housing-Report-full-digital.pdf>
- ^{xxix} YouGov online survey 16th – 18th November 2021. Fieldwork. Sample size 3,645 adults (18+) in England, weighted. Data has been analysed for those with housing costs only; sample size of 2,177, 1,153 of whom were women. Population estimates have been calculated by Shelter. The number of women is based on mid-year population estimates by gender and the weighed sample sizes.

<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/bulletins/annualmidyearpopulationestimates/mid2020>

^{xxx} YouGov online survey 16th – 18th November 2021. Sample size 3,645 adults (18+) in England, weighted. This question was only asked to those with housing costs, 140 of whom are women who did not say they had a wife, husband or partner in the household with children under 18 in the household (defined as lone mothers). Population estimates have been calculated by Shelter. The number of women is based on mid-year population estimates by gender and the weighed sample sizes, with lone mothers based on LFS data for families and households and the weighted sample sizes.

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/datasets/familiesbyfamilytyperegionsofenglandandukconstituentcountries>

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^{xxxi} Figure refers to April 2018 before the rollout of Universal Credit, which is the last time reliable figures were available for the gender of those claiming LHA. Shelter (2020), [LHA Impact Assessment: The Effect of the Reforms since 2011](#).

^{xxxi} YouGov online survey 6th August – 7th September 2021. Sample size 3,561 adults (16+) who live in private rented accommodation in England, weighted, 242 of who were single women with children in the household.

^{xxxi} Bangladeshi and Black families respectively have rates of 20% and 17% of families receiving housing benefit, compared to an average rate of 10%. Source: DWP, 'Family Resources Survey: 2019/20'.

Disabled people are three times more likely to be in receipt of benefit than those without disabilities. Source: Disability data is taken from wave 9 of Understanding Society and covers the UK. Total unweighted base is c.29,750. Disabled respondents have a base of c3,592. Data was collected January 2017 – January 2019. We have defined those who are disabled as those who say they are claiming either the disability living allowance or the severe disablement allowance. 44.6% of households who claim DLA or SDA claim Housing Benefit compared to 15.1% of households who do not claim DLA or SDA. This means that, in the private rented sector, disabled households are almost three times as likely to rely on Housing Benefit, and thus be excluded by a No DSS policy, than non-disabled households.

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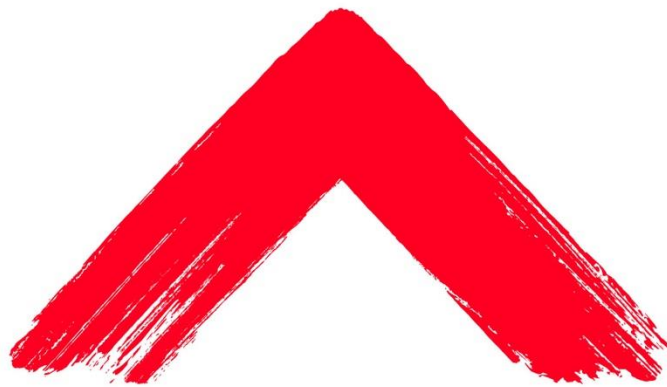
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