

Exeter Community Initiatives
Homelessness Collaboration Project
**Report on the Views of Homeless and Vulnerably Housed People
in Exeter**
Summary of Findings and Recommendations (as at 31.3.08)

Introduction

A questionnaire was carried out with 152 homeless or vulnerably housed people in Exeter in June and July 2007. The questionnaire was designed to seek the views of service users of support that is available for homeless and vulnerably housed people in the city, and to ask their opinions on possible future developments. A series of focus groups were also carried out to 'dig deeper' into certain issues in more detail. The research was carried out independently of all organisations directly providing services to homeless people in Exeter. The project was co-ordinated by Exeter Community Initiatives (ECI) and funded by Exeter City Council (ECC). The responses were analysed and a report written by a member of the University of Exeter. The full report was published in January 2008 and sent out to the organisations which had been involved in the research. The staff, trustees and volunteers of these organisations have been asked to comment on the findings and help to draw up a plan of action.

This document has been produced with service users in mind, to summarise the findings of the research and the recommendations put forward. It will be sent out to all the organisations that work with homeless and vulnerably housed people, for their service users to read. It is hoped that service users feel that they have been kept informed and will be encouraged to make comments on the research and recommendations. **A form is attached at the end for comments.** Service users can also see a copy of the full report from a member of staff at one of the organisations involved, or from the ECI website, www.eci.org.uk.

The research focussed on the services provided by the following organisations:

- the Big Issue,
- the Clock Tower Surgery,
- Exeter City Council (including Home Choice),
- Exeter Homeless Action Group (EHAG),
- Meaningful Occupation Project (MOP),
- St Petrock's Centre, and
- the Street Homeless Outreach Team (SHOT).

Summary of Findings

Facts about the people that were interviewed:

Age and gender:

1. **More than two-thirds** of those interviewed (67.8%) **were male**, possibly showing that men are at a higher risk of homelessness.
2. **About two in five** (39%) of those interviewed **were under the age of 24**. This was nearly twice the figure (19.8%) of the same age range – as a proportion of Exeter's total adult population – in the 2001 Census. This may show that people aged between 16 and 24 are at a proportionately higher risk of homelessness than other age groups.
3. **Female respondents aged between 16 and 21 substantially outnumbered their male counterparts** (22 females to 12 males); suggesting women in this age group may be particularly vulnerable to becoming homeless.

Where people lived:

4. **More than half** (51%) of respondents had lived in their current residence for **six months or less**, with **71% resident for no more than one year**. This points to some level of housing insecurity and raises questions about whether people are successfully moving to long-term housing, or circulating between a variety of short-term or insecure forms of accommodation.

5. **The majority** (71%) of respondents had lived in Exeter for **more than three years**, with **more than two in five** (42%) resident for **over a decade**, suggesting homelessness is an issue for long-term residents, as well as new arrivals to the area.

Current Services:

6. All types of current homelessness services were well used by respondents, with services assisting with **'accommodation finding'** the most heavily used.

7. **Most** respondents were **generally satisfied** with the services they used, with some scoring extremely high levels of overall satisfaction. However, a small number of services received a significant minority of 'dissatisfied' responses, the reasons for which may need to be looked into closely if improvements are to be made.

8. Services assisting with **drug and alcohol use** (48%), along with those supporting people with **mental health issues** (42.8%), recorded **high levels of use**. This suggests that both drug and alcohol addiction and mental health issues may be more common amongst homeless and vulnerably housed people than in the general population; factors which need to be considered in regards to future developments.

9. Most services were seen as easy to use, but some negative comments were expressed about a few services, particularly in relation to 'atmosphere and comfort'.

10. **Knowledge of additional services** was **variable** amongst those interviewed, with responses ranging from more than three-quarters (76.3%) knowing where to get 'help to find education and training', to less than one respondent in six (15.8%) being aware of where to access 'help to be a better parent'. Equally, those identifying themselves as **'sleeping rough'** recorded consistently **lower levels of knowledge** of where to access services than other groups. This suggests that some services may need to be more widely publicised.

11. Of those services not solely involved with homelessness, the most widely used was the **Benefits Agency**, with Solicitors and GPs also recording high levels of 'useful' contacts.

12. **More than three in every four** respondents (75.2%) had tried to access **Supported Accommodation** in Exeter whilst homeless. **A large proportion** (69.2%) of these applications had been **successful**, though three of the larger providers – Mortimer House (53%), YMCA (50%) and Foyer (45%) – had recorded far lower success rates.

13. Many respondents were **generally happy** with current **opening hours**. However, for a number of services, respondents' preferred hours of opening appeared to be very different from what is currently on offer.

Future Services:

14. A range of opinions about how services could improved in the future were received but, **for six of the eight** featured organisations, **'communication'** was the most regularly quoted area for improvement, suggesting that more may need to be done in this area.

15. The **majority** of respondents (86.4%) were **in favour** of improved information sharing between organisations, though some had concerns about how safe the information would be kept, and the possibility that they could be discriminated against.

16. **Many people** (62.5%) felt that there was **no help** which could have been given to stop them becoming homeless. Yet, these people had similar issues to the people who thought that their homelessness **could** have been prevented. This is interesting because it shows the differences in how people see their situation and events in their lives.

17. Despite responses to the previous question, the **majority** of those interviewed (82%) **supported** Exeter City Council's plan to **prioritise** the funding of projects seeking to **prevent** people becoming homeless, suggesting that whilst many respondents viewed their own homelessness as inevitable, they felt that, for others, it was an avoidable situation.

18.

- 'Making it easier to get into **Supported Housing**' (79 votes),
- 'Making sure people were not **discharged from Hospital** without accommodation, by working better with the Health Services' (76 votes) and
- 'Working better with **Mental Health Services** to make sure homeless people can get help and support' (74 votes)

were the **most popular** options for inclusion in Exeter City Council's Homelessness Strategy. Options concerned with preventing youth homelessness (69 votes) and improving post-Prison accommodation (66 votes) were also well supported.

Focus Groups:

19. **Personal safety** was an issue for most of those who participated in the focus groups, but was **of top concern** to those who were **sleeping rough or sofa surfing**.

20. The **geographical location** of services in **Devon** is an issue for some people. Some participants believed that, because some people thought that there were few homelessness services in many parts of the county, they were **forced to move** to urban areas in order to get help and support.

21. Many participants appear to be moving between **different forms of homelessness and insecure housing**, rather than moving on to sustainable permanent housing.

22. Although some participants made a point of praising some of those who had assisted them, **many people** were concerned with **poor levels of communication** demonstrated by some services. The lack of signposting to other services, not enough communication of what services offered (and to whom), and a seeming lack of respect towards clients by some members of staff, were all given as examples of disappointing contact with homeless service providers in Exeter.

23. Difficulties in moving to **permanent, long-term, accommodation** were a large concern of many of those taking part in the focus groups. This was made up of two related problems: the **lack of support** received once people had **moved out** of temporary accommodation (such as training in managing a household, counselling and emotional support), and the **lack of suitable housing** in Exeter. Participants felt that more social housing was needed, as well as a more accessible private rented housing sector.

24. An increase in the availability of **counselling** and other forms of **emotional support**, as well as improved **training of frontline staff** in this area, were popular as possible service improvements.

25. Whilst existing services were praised, there is evidence that a **lack of flexibility** amongst a number of agencies is making it **difficult** for some homeless and vulnerably housed people in Exeter **to access** the services they need, **when** they need them. **Restrictions** on the use of certain services **by housing status**, along with **long waiting-lists** and difficulties in **getting referrals**, were all put forward as areas for improvement.

26. **Family breakdown**, along with **leaving care**, were, by far, the most common reasons given for participants originally becoming homeless.

27. Although most participants felt that there was **nothing** that could have been done to stop them becoming homeless, **most** were also **positive** about plans to concentrate resources on **preventing homelessness**.

28. However, many noted that it was important to gain access to services when people **first** approached an organisation for support. This was **particularly important** when people **feel ready to change**. Long waiting lists and delays in getting help after having asked for it, were seen as putting barriers in the way of preventing homelessness.

29. Also, organisations may need to become **more flexible** in how and when they provide their services in order to successfully prevent people becoming homeless. This may require major changes in the way services are delivered.

Recommendations:

30. Although it may not be possible to prevent people from becoming homeless, it may be possible to take successful actions to help people, as long as organisations **respond soon after the person has asked for help**.

31. **Information** about services needs to be made **readily available** to those who become, or are at risk of becoming, homeless. This needs information to be **visible, clear and in the right place** for people to be able to get access to it.

32. Services need to be **flexible and quick to respond** to make sure that action can be taken to help people at the point of need.

33. For certain services – particularly St. Petrock's, MOP and SHOT – making services available on **evenings and weekends** would be a popular addition to their current services.

34. A possible option for some organisations is to consider **sharing a building**. However they should remain aware of the concerns of service users and consult widely on any future plans.

35. For many people homelessness is about more than housing. In order to deal with this, it would be helpful to provide a more **all-round (and combined) service**, making projects designed to help with related issues available, **at the same time** as housing and 'survival' support are provided.

36. Making it easier to get **private-sector housing** (including giving more support once people are housed) may help in relieving pressure on the social housing sector in Exeter, as well as allowing people to learn to live independently and keep hold of a tenancy. However, to make sure that existing homelessness services in the local area are not put under extra strain, more 'social' housing is needed in the city.

37. Improvements in **communication and joint working** between organisations are needed to make sure that services are provided quickly and usefully. This includes **better 'sign-posting'** between services, as well as thinking about introducing a **shared system of assessment** and similar developments.

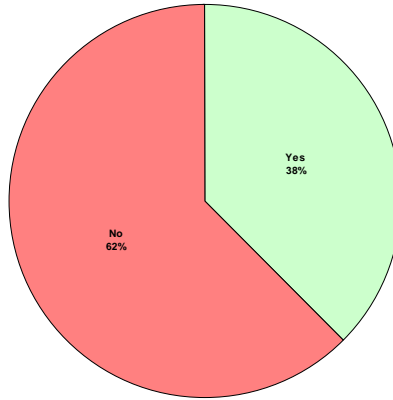
38. **Better training and recruitment** systems are needed to make sure that service users feel respected by staff.

39. **Regular and formal feedback** systems are needed, in order to allow clients to feel more involved in the way organisations are run, as well as making sure services are aware of the needs of those who use them.

40. It is important to make sure that **when decisions are made** about homelessness services, that this is based on **hard evidence** wherever possible. In this way, the findings of this report should help to shape future service developments in Exeter, including Exeter City Council's Homelessness Strategy.

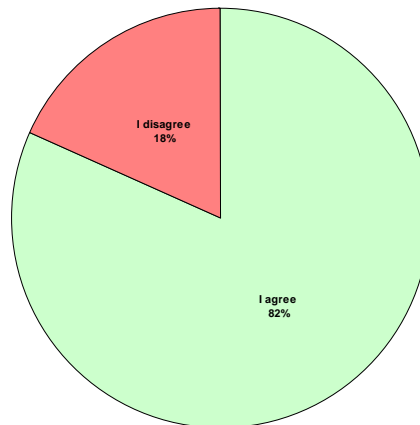
Prevention...?

Figure 22: Is there any help you think could have been provided that would have stopped you becoming homeless?



... or early intervention?

Figure 23: Exeter City Council has decided that projects that try to prevent people becoming homeless should be a priority for future funding. Do you agree with this decision?



Q13: Favoured opening times by Service

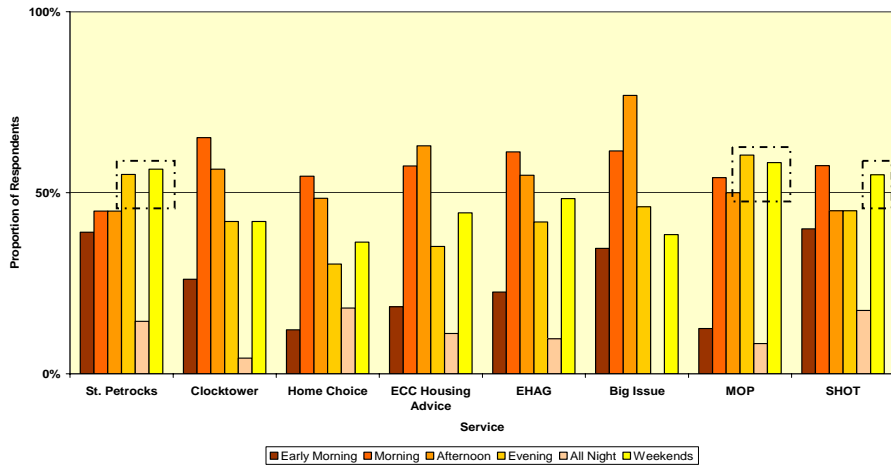


Figure 6: Aspects of named services rated as 'difficult to use' by respondents

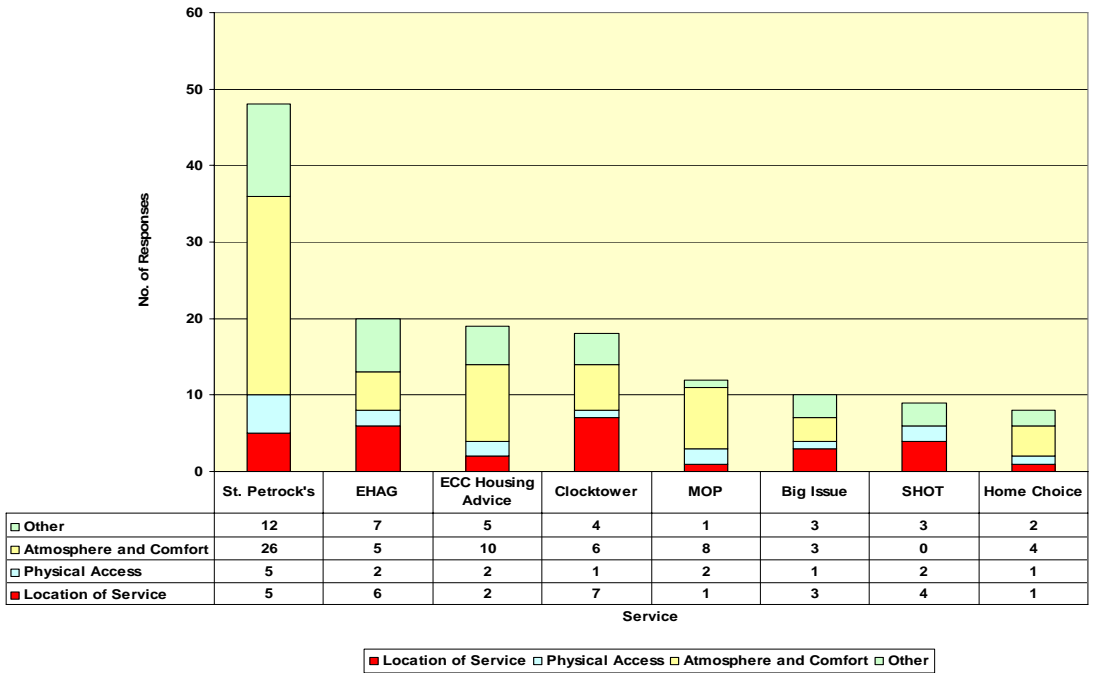


Figure 24: Number of respondents supporting each option (Exeter City Council Homeless Strategy)

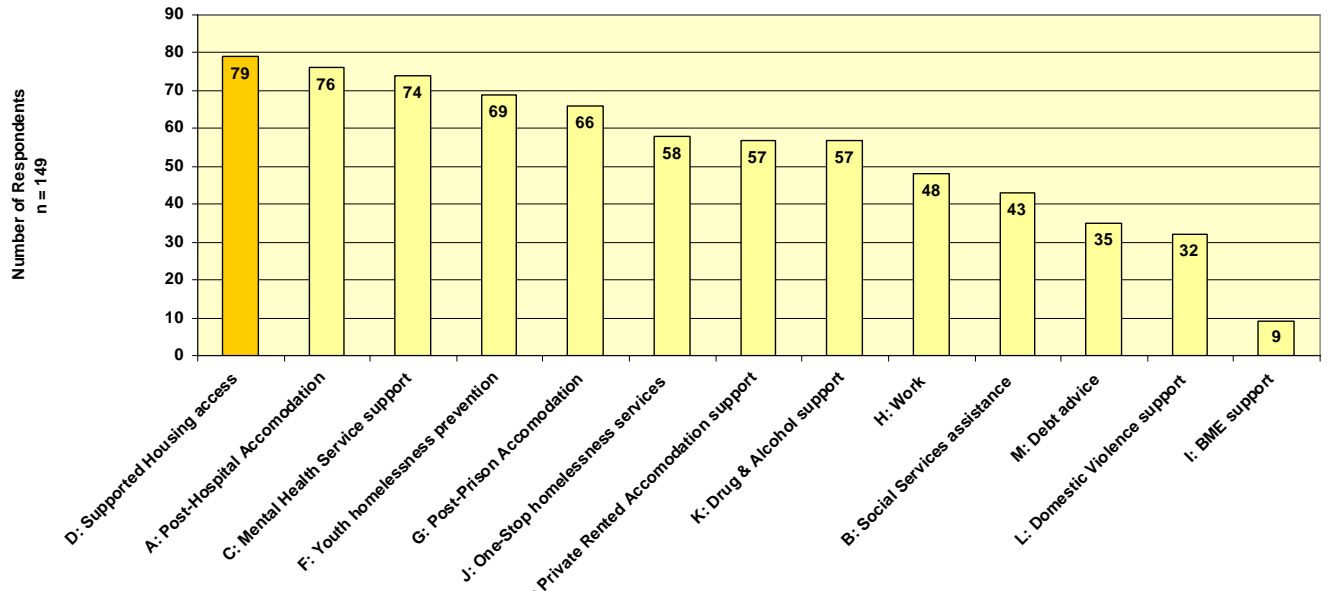


Figure 21: Preferences for Inter-Agency Information Sharing

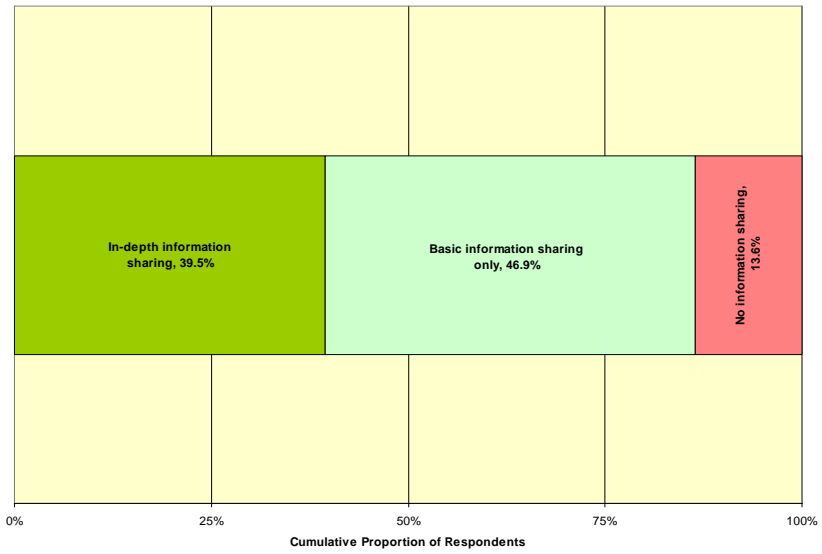
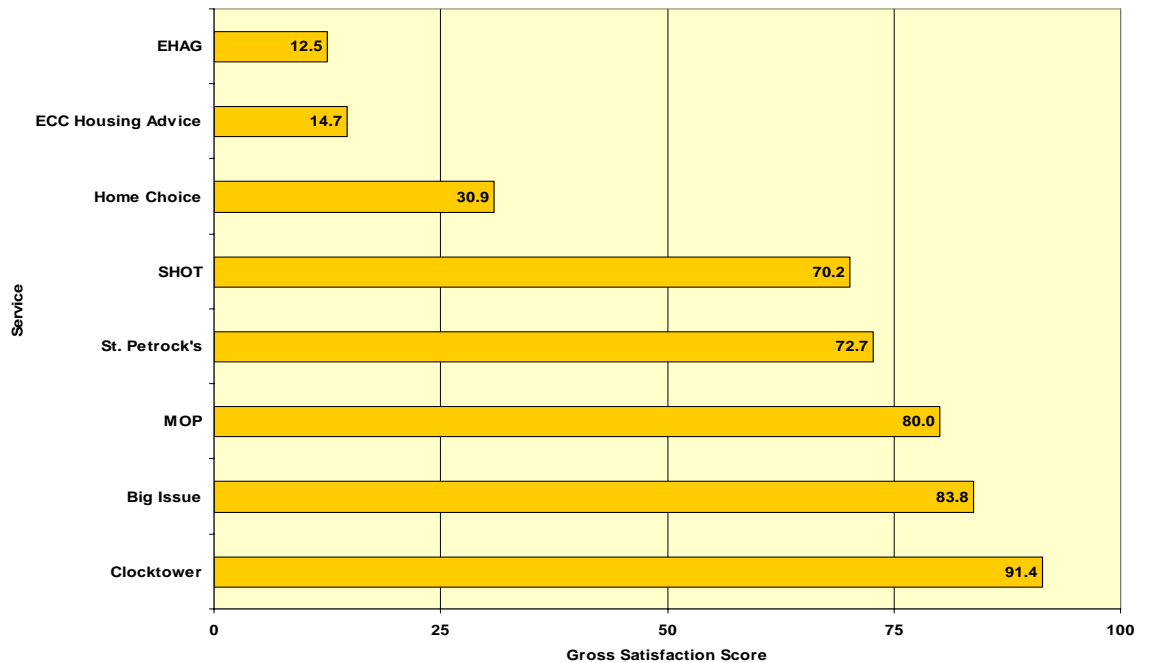


Figure 11: Gross Satisfaction Scores by Service



SERVICE USER COMMENT FORM

We value your input to this research and to the process of helping Homelessness organisations to work more closely together to improve services.

Please use this form to make comments on the Summary Research Findings. Your comments will be used to help make decisions about Exeter's services for homeless and vulnerably housed people in the future. They will also be used to help shape Exeter City Council's Homelessness Strategy.

If you would like a response, please give your name and contact details.

Comments:

Please tick here if you would like a response, and give your contact details below.

My name (OPTIONAL).....

I can be contacted.....

.....

Thank you for your comments. We will try to respond as soon as possible.

Please return to:

**Laura Callaway
14 York Road
Exeter
EX4 6BA**

or give to your keyworker to send to us, by Friday 2nd May 2008.

